STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

███████████████
███████████████

Reg. No.:   2012-78020
Issue No.:   3008
Case No.:   ███████████
Hearing Date:
County: ███████████

ADMINISTRATIVE LAW JUDGE: Suzanne Morris

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's request for a hearing. After due notice, a telephone hearing was held on ███████████████████████████, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of Department of Human Services (Department) included ███████████████.

ISSUE

Due to a failure to comply with the verification requirements, did the Department properly ☐ deny Claimant's application ☒ close Claimant's case ☐ reduce Claimant's benefits for:

☐ Family Independence Program (FIP)?   ☐ State Disability Assistance (SDA)?
☒ Food Assistance Program (FAP)?   ☐ Child Development and Care (CDC)?
☐ Medical Assistance (MA)?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material, and substantial evidence on the whole record, including testimony of witnesses, finds as material fact:

1. Claimant ☐ applied for ☒ was receiving: ☐FIP ☒FAP ☐MA ☐SDA ☐CDC.

2. Claimant ☒ was ☐ was not provided with a Verification Checklist (DHS-3503).

3. Claimant was required to submit requested verification by ███████████.

4. On ███████████████ the Department
    ☐ denied Claimant's application
    ☒ closed Claimant's case

1

☐ reduced Claimant's benefits
for failure to submit verification in a timely manner.

5. On ▮▮▮▮▮▮▮▮▮▮▮, the Department sent notice of the
   ☐ denial of Claimant's application.
   ☒ closure of Claimant's case.
   ☐ reduction of Claimant's benefits.

6. On ▮▮▮▮▮▮▮▮▮▮▮ Claimant filed a hearing request, protesting the
   ☐ denial.   ☒ closure.   ☐ reduction.

CONCLUSIONS OF LAW

Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq.* The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq.*, and 1999 AC, R 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

☒ The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and 1999 AC, R 400.3001 through Rule 400.3015.

☐ The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

☐ The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq.*, and 2000 AACS, R 400.3151 through Rule 400.3180.

☐ The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.

Additionally, the claimant testified that she dropped off the checking account statement sometime in May or the first week o ███████. The department representative went through each page of the front desk log during the hearing and found the claimant did not sign in at all during ███ through ██████████ The claimant was advised to reapply for FAP benefits to allow the department to re-determine her eligibility.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department
☒ properly ☐ improperly

    ☒ closed Claimant's case.
    ☐ denied Claimant's application.
    ☐ reduced Claimant's benefits.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department
☒ did act properly. ☐ did not act properly.

Accordingly, the Department's decision is ☒ AFFIRMED ☐ REVERSED for the reasons stated on the record.

/s/_____
Suzanne L. Morris
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: ██████████████

Date Mailed: ██████████████

NOTICE: Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the receipt date of this Decision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request. (60 days for FAP cases)

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
- misapplication of manual policy or law in the hearing decision,
- typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
- the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at
    Michigan Administrative hearings
    Reconsideration/Rehearing Request
    P. O. Box 30639
    Lansing, Michigan 48909-07322

SLM/jk

cc:

MAHS