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

IN THE MATTER OF:				
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2012860 3019 October 27, 2011 SSPC East (98)		
ADMINISTRATIVE LAW JUDGE: Andrea J. Bra	dley			
HEARING DECISION				
This matter is before the undersigned Administration and MCL 400.37 following Claimant's request telephone hearing was held on October 27, 2011 on behalf of Claimant included the Claimant, Department of Human Services (Department) in Payment Supervisor.	for a hearing. , from Detroit, Mi . Par	After due notice, a chigan. Participants ticipants on behalf of		
ISSUE				
Due to a failure to comply with the verification requirements, did the Department properly \boxtimes deny Claimant's application \square close Claimant's case \square reduce Claimant's benefits for:				
Family Independence Program (FIP)? Food Assistance Program (FAP)? Medical Assistance (MA)?	-	ssistance (SDA)? ent and Care (CDC)?		
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:				
Claimant ⊠ applied for ☐ was receiving: ☐F	FIP ⊠FAP □MA [□SDA □CDC.		
2. Claimant ⊠ was ☐ was not provided with a V	erification Checkli	st (DHS-3503).		
3. Claimant was required to submit requested v	erification by Aug	ust 26, 2011, but he		

failed to do so.

	On September 2, 2011, the Department denied Claimant's application closed Claimant's case reduced Claimant's benefits for failure to submit verification in a timely manner.
	On September 2, 2011, the Department sent notice of the denial of Claimant's application. closure of Claimant's case. reduction of Claimant's benefits.
	On September 27, 2011, Claimant filed a hearing request, protesting the denial. closure. reduction.
	CONCLUSIONS OF LAW
	partment policies are found in the Bridges Administrative Manual (BAM), the Bridges gibility Manual (BEM) and the Reference Tables Manual (RFT).
Res 42 Age	The Family Independence Program (FIP) was established pursuant to the Personal sponsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly known as the Family Independence ency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101 ough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program ective October 1, 1996.
pro- imp Reg Age	The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) gram] is established by the Food Stamp Act of 1977, as amended, and is blemented by the federal regulations contained in Title 7 of the Code of Federal gulations (CFR). The Department (formerly known as the Family Independence ency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 0.3001 through Rule 400.3015.
Sec The	The Medical Assistance (MA) program is established by the Title XIX of the Social curity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). Program (formerly known as the Family Independence Agency) administers the program pursuant to MCL 400.10, <i>et seq.</i> , and MCL 400.105.
for as	The State Disability Assistance (SDA) program which provides financial assistance disabled persons is established by 2004 PA 344. The Department (formerly known the Family Independence Agency) administers the SDA program pursuant to MCL 0.10, et seq., and 2000 AACS, Rule 400.3151 through Rule 400.3180.
and	The Child Development and Care (CDC) program is established by Titles IVA, IVE XX of the Social Security Act, the Child Care and Development Block Grant of 30, 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, Rule 400.5001 through Rule 400.5015.

Additionally, the Claimant admitted that he did not return the verifications by the August 26, 2011 due date. The Claimant stated that he did not receive the verification checklist until four days prior to the due date; however, he testified that he did not contact the Department to request an extension.

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 \infty \text{did act properly.} \infty \text{did not act properly.}
Accordingly, the Department's decision is \boxtimes AFFIRMED \square REVERSED for the reasons stated on the record.
Andrea J. Bradley Administrative Law Judge for Maura Corrigan, Director Department of Human Services

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)

Date Signed: 10/28/11

Date Mailed: 10/28/11

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 <u>MAY</u> 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

AJB/dj

