

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201260753
Issue No.: 2006; 4003
Case No.: [REDACTED]
Hearing Date: September 24, 2012
County: Wayne (35)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 September 24, 2012, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and [REDACTED], Claimant's Living Together Partner (LTP). Participants on behalf of the Department of Human Services (Department) included [REDACTED], Assistance Payment Worker, and [REDACTED], Assistance Payment Supervisor.

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:

- | | |
|--|--|
| <input type="checkbox"/> Family Independence Program (FIP)? | <input type="checkbox"/> Adult Medical Program (AMP)? |
| <input type="checkbox"/> Food Assistance Program (FAP)? | <input checked="" type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA)? | <input type="checkbox"/> Child Development 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:

1. Claimant and her LTP applied for was receiving: FIP FAP MA AMP SDA CDC.

2. On May 14, 2012 and June 12, 2012, the Department denied Claimant's and the LTP's application due to failure to meet eligibility requirements.
3. On May 14, 2012, and June 12, 2012, the Department sent notices of the denial.
4. On June 18, 2012, Claimant and the LTP filed a hearing request, protesting the denial of the application.

CONCLUSIONS OF LAW

Department policies are found in the Department of Human Services Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM) and 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 Mich Admin Code, R 400.3101 through R 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 Mich Admin Code, R 400.3001 through R 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 Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq.*

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 Mich Admin Code, R 400.3151 through R 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 Mich Admin Code, R 400.5001 through R 400.5015.

Additionally, Claimant and Claimant's LTP applied together for MA and cash assistance. In a May 14, 2012 Notice of Case Action, the Department denied Claimant's and the LTP's application, finding that eligibility under the Adult Medical Program (AMP) could not be considered because the program was closed to new enrollees and that MA coverage was not available because the parties were not blind, disabled, pregnant, parent/caretaker relative of a dependent child and did not meet age requirements. The Department sent a June 12, 2012 Notice of Case Action, again denying MA coverage for both Claimant and the LTP for the same reasons previously provided, and denying cash assistance because "[t]he individual(s) are not a dependent child, a caretaker/relative of a child, not pregnant, not aged or disabled, not a refugee or does not have a qualifying relationship to other household members."

Claimant's LTP's Application for MA and Cash Assistance

At the hearing, the Department explained that Claimant's LTP was denied MA coverage on the basis of disability and SDA benefits because he had failed to provide requested medical verifications. The Department explained that, because the LTP indicated he was disabled in the application, a Medical Determination Verification Checklist (VCL) was prepared on May 14, 2012, requesting that certain medical forms be completed and submitted by May 24, 2012. The Department presented evidence that the VCL and the medical documents referenced in the VCL were printed in the local office but could not testify regarding whether the documents were sent to Claimant and the LTP, or hand-delivered to them. Both Claimant and the LTP denied receiving the documents by mail or at the time they applied and met with their caseworker on May 14, 2012. In light of the Department's failure to establish that it delivered the VCL to Claimant and the LTP, the Department did not act in accordance with Department policy when it denied the LTP's MA and SDA cases for failure to provide verification or based on lack of disability.

Claimant's Application for MA and Cash Assistance

The Department also denied Claimant's application for MA and cash assistance. An individual may receive Medical Assistance (MA) coverage if the individual qualifies under an a FIP-related MA category or an SSI-related MA category. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. BEM 105 (October 1, 2010), p 1. To receive MA under a FIP-related category, the person must have dependent children, be a caretaker relative of dependent children, or be under age 21 and pregnant or recently pregnant. BEM 105, p 1. AMP provides limited medical services for persons not eligible for MA coverage. BEM 100 (June 1, 2012), p 4.

The evidence at the hearing established that Claimant was not under 21 years old or over 65 years old. There was no evidence that Claimant was pregnant or alleged any disability at the time the May 14, 2012, application was filed. Although Claimant is the parent of three minor children, because the children did not live in the home with her at the time of her application, Claimant was not eligible for FIP-related MA. See BEM 211

(January 1, 2012), pp 1-3. Because Claimant did not meet any of the eligibility criteria for MA, the Department acted in accordance with Department policy when it denied Claimant's MA application.

The Department also denied Claimant's application for cash assistance. At the hearing, Claimant credibly testified that, at the time she applied for cash assistance, her three minor children were in foster care, but she had complied with a treatment plan and anticipated being reunited with them the month following the hearing. The legal parent and/or stepparent of a child in out-of-home foster care placement due to abuse or neglect is eligible to receive cash assistance under the Family Independence Program (FIP), as long as there is a plan to return the child to the parent/stepparent's home up to twelve months from the date of removal. BEM 210 (October 1, 2011), pp 7, 10-11. The Department testified that it was aware that Claimant had minor children because there was a prior benefit case with Claimant, her ex-husband, and the children. While the workers were aware that the children were not living with Claimant, they credibly testified that they were *not* aware that the children were in foster care. Because the Department was not aware that the children were in foster care, the Department acted in accordance with Department policy when it denied Claimant's application for cash assistance.

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 denied Claimant's MA and cash assistance application and improperly denied the LTP's MA and cash assistance application.

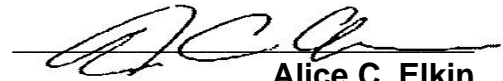
DECISION AND ORDER

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, the Department's decision is AFFIRMED REVERSED AFFIRMED IN PART with respect to denial of the MA and cash assistance application for Claimant AND REVERSED IN PART with respect to denial of the MA and cash assistance application for Claimant's LTP.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reregister Claimant's and the LTP's May 14, 2012, MA and cash assistance application;
2. Begin reprocessing the application concerning Claimant's LTP's eligibility for MA and SDA in accordance with Department policy and consistent with this Hearing Decision, requesting any verification required by Department policy;
3. Provide Claimant's LTP with MA coverage he is eligible to receive from the date of the MA application;
4. Issue supplements to Claimant's LTP for any SDA benefits he was eligible to receive but did not from May 14, 2012; and

5. Notify Claimant in writing of its decision in accordance with Department policy.


Alice C. Elkin
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 10/9/2012

Date Mailed: 10/9/2012

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 mailing 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

ACE/hw

cc:

