

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2013-14991  
Issue No.: 1021  
Case No.: [REDACTED]  
Hearing Date: April 29, 2013  
County: Wayne (19)

**ADMINISTRATIVE LAW JUDGE:** Colleen M. Mamelka

**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 conducted from Detroit, Michigan on Monday, April 29, 2013. Claimant appeared and testified. Participating on behalf of the Department of Human Services ("Department") was [REDACTED].

**ISSUE**

Whether the Department properly terminated Claimant's cash assistance ("FIP") effective December 1, 2012, based on the failure to submit requested verifications.

**FINDINGS OF FACT**

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. Claimant was an ongoing FIP recipient.
2. On October 26, 2012, the Department sent a Medical Determination Verification Checklist ("VCL") to the Claimant with a due date of November 7, 2012. (Exhibit 1)
3. On November 7, 2012, Claimant requested, and was granted, an extension of the VCL due date, with a new due date of November 15<sup>th</sup>. (Exhibit 3, Exhibit 6, pp. 1, 2)
4. The Department did not receive the requested verifications on November 15, 2012.
5. On November 16, 2012, the Department sent a Notice of Case Action ("NOCA") to Claimant informing her that her FIP benefits were scheduled for closure effective

December 1, 2012 based on the failure to submit the requested verifications. (Exhibit 2)

6. On November 16, 2012, Claimant submitted verifications to the Department, but not the verifications that were requested. (Exhibit 4)
7. On November 27, 2012, the Department received the Claimant's timely written request for hearing, protesting the proposed termination of FIP benefits. (Exhibit 7)
8. As a result of the timely hearing request, the Department deleted the November 16<sup>th</sup> negative action, pending this hearing.

### **CONCLUSIONS OF LAW**

As a preliminary matter, Claimant did not receive her FIP benefits on November 5<sup>th</sup>, however; on November 7<sup>th</sup>, the Department issued FIP benefits resulting in no loss of benefits. As such, this particular issue will not be addressed.

Department policies are contained in the Bridges Administrative Manual ("BAM"), the Bridges Eligibility Manual ("BEM"), and the Bridges Reference Tables ("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, Rules 400.3101 through 400.3131. FIP replaced the Aid to Dependent Children program effective October 1, 1996.

An individual who identifies barriers may be temporarily deferred from JET participation. BEM 229 (November 2012), p. 1. Clients should not be referred for orientation and the work participation program until it is certain that barriers to participation have been removed and possible reasons for deferral have been assessed and considered and disabilities have been accommodated. BEM 229, p. 2.

When an individual claims to be disabled, or indicates the inability to participate in work-related activities for more than 90 days due to a mental or physical condition, the individual should be deferred. BEM 230A (November 2012), p. 10. The client must provide the Department with verification of the disability when requested. BEM 230A, p. 10. If the verification is not returned, disability is not established and the client is required to fully participate in the work participation program. BEM 230A, p. 10. For verified disabilities over 90 days, the Department must submit a completed medical packet to the Medical Review Team ("MRT") for a disability determination. BEM 230A, p. 11. If the client does not provide the requested verifications, FIP benefits are placed into closure for failure to provide needed documentation. BEM 230A, p. 11. Required verifications are discussed in BAM 815. BEM 230A, p. 11.

In alleging disability, the client is required to complete all sections of the Medical-Social Questionnaire (DHS 49-F). BAM 815 (June 2012), p. 3. Clients are offered the opportunity to complete the Activities of Daily Living (DHS 49-G) to help support/document the claim of disability; however, this form is optional and is not considered a requirement of the disability determination process. BAM 815, p. 3. When the Department is required to obtain existing medical records on behalf of the client, the client must complete an Authorization to Release Protective Health Information (DHS-1555). BAM 815, p. 3. The Department is required to forward all medical evidence, to include the DHS 49-F, to the medical contact person who, in turn, forwards the packet to the Medical Review Team ("MRT") for a disability determination. BAM 815, p. 5.

By way of background, the Claimant requested a hearing on August 20, 2012 regarding an August 8<sup>th</sup> Notice of Case Action which notified the Claimant of the termination of FIP benefits effective September 1<sup>st</sup> based on the failure to submit the requested verifications. As a result of the timely hearing request, benefits were reinstated. A hearing was scheduled for November 15, 2012. Claimant submitted a withdrawal of the hearing request, however; the withdrawal was insufficient and ultimately denied by the Michigan Administrative Hearing System. As such, a hearing was rescheduled for January 2, 2013. On January 9, 2013, a Hearing Decision was mailed which affirmed the Department's proposed termination of FIP benefits effective September 1, 2012. Prior to the January 2<sup>nd</sup> hearing, there was ongoing communication between Claimant and the Department regarding the submission of the requested verifications as well as referrals to the Jobs, Education, and Training ("JET") program. It should be noted, that on October 26, 2012, the Department sent a Notice of Non-compliance to Claimant regarding the alleged failure to participate with the JET program. A triage was held resulting in a finding of good cause and the deletion of the proposed action.

In this case, the Department sent a Medical Determination Verification Checklist ("VCL") to Claimant on October 27, 2012, specifically requesting completed Medical-Social Questionnaire (DHS 49-F) and Activities of Daily Living (DHS 49-G), and a signed Authorization to Release Protected Health Information (DHS 1555 or DHS 1555E). The verifications were due November 7, 2012. Claimant requested an adjournment, which the Department granted, allowing her to submit the requested verifications on November 15<sup>th</sup>, the date of the previously scheduled hearings (see above). No verifications were submitted by the due date.

On November 16, 2012, the Department sent a Notice of Case Action to Claimant notifying her that the FIP benefits would terminate effective December 1<sup>st</sup> based on the failure to submit the requested verifications. On this date, Claimant submitted some medical verifications but not what was requested on the October 26<sup>th</sup> VCL. This VCL requested the Medical-Social Questionnaire, Activities of Daily Living, and a signed Authorization to Release Protected Health Information. As noted above, the Activities of Daily Living is optional and cannot be the basis for terminating FIP benefits. That being stated and as detailed above, a completed Medical-Social Questionnaire was a required document that the Department was to send, along with other verifications, to the MRT for a determination regarding Claimant's alleged disability. During the hearing, Claimant

testified that she was only provided approximately 5 days to submit the verifications and that it took longer to get her doctor(s) to complete the forms. It was pointed out that the three verifications requested on the October VCL were forms that were to be completed by Claimant and not her physician(s). Further, the VCL due date was extended until November 15<sup>th</sup>. On November 15<sup>th</sup>, the requested verifications, specifically the Medical-Social Questionnaire, were not submitted.

Ultimately, under the facts presented, the Department established it acted in accordance with Department policy when it terminated Claimant's FIP benefits based on the failure to submit requested verifications by the extended due date. Accordingly, the Department's actions are upheld.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law finds the Department established it acted in accordance with department policy when it terminated Claimant's FIP benefits effective December 1, 2012.

Accordingly, it is ORDERED:

The Department's November 16, 2013 determination is AFFIRMED.



**Colleen M. Mamelka**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: April 30, 2013

Date Mailed: May 2, 2013

**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

CMM/tm

cc:

