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

DEPARTMENT OF HUMA	AN SERVICES		
IN THE MATTER OF:			
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	201315330 2006, 3008 January 15, 2013 Macomb	
ADMINISTRATIVE LAW JUDGE: Kevin Scully			
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 January 15, 2013, from Lansing, Michigan. Participants on behalf of Claimant included Participants. Participants on behalf of Department of Human Services (Department) included			
<u>ISSUE</u>			
Due to a failure to comply with the verification requirements, did the Department properly $\square$ deny Claimant's application $\boxtimes$ close Claimant's case $\square$ reduce Claimant's benefits for:			
☐ Family Independence Program (FIP)? ☐ State Disability Assistance (SDA)? ☐ Child Development and Care (CDC) ☐ Medical Assistance (MA)?			
FINDINGS OF F	<u>ACT</u>		
The Administrative Law Judge, based upon the evidence on the whole record, including testimony			
<ol> <li>Claimant ☐ applied for ☒ was red</li> <li>☐CDC.</li> </ol>	ceiving: ☐FIP [	☑FAP ☑MA □SDA	
2 Claimant ⊠ was □ was not no	ovided with a V	/erification Checklist	

Claimant was required to submit requested verification by October 12, 2012.

(DHS-3503).

4.	On October 26, 2012, the Department $\square$ denied Claimant's application $\boxtimes$ closed Claimant's case $\square$ reduced Claimant's benefits for failure to submit verification in a timely manner.	
5.	On October 26, 2012, the Department sent notice of the $\square$ denial of Claimant's application. $\boxtimes$ closure of Claimant's case. $\square$ reduction of Claimant's benefits.	
6.	On December 5, 2012, Claimant filed a hearing request, protesting the ☐ denial. ☐ closure. ☐ reduction.	
CONCLUSIONS OF LAW		
•	nt policies are found in the Bridges Administrative Manual (BAM), the Bridges Manual (BEM) and the Reference Tables Manual (RFT).	
Responsib 42 USC 60 Agency) a through R	mily Independence Program (FIP) was established pursuant to the Personal sility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 01, et seq. The Department (formerly known as the Family Independence dministers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 ule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program october 1, 1996.	
program] implement Regulation Agency) a	ood Assistance Program (FAP) [formerly known as the Food Stamp (FS) is established by the Food Stamp Act of 1977, as amended, and is ed by the federal regulations contained in Title 7 of the Code of Federal is (CFR). The Department (formerly known as the Family Independence dministers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 ale 400.3015.	
Security A The Depar	edical Assistance (MA) program is established by the Title XIX of the Social ct and is implemented by Title 42 of the Code of Federal Regulations (CFR). The three	
for disable as the Far	ate Disability Assistance (SDA) program which provides financial assistance d persons is established by 2004 PA 344. The Department (formerly known mily Independence Agency) administers the SDA program pursuant to MCL seq., and 2000 AACS, R 400.3151 through Rule 400.3180.	
and XX of 1990, and The progra	nild Development and Care (CDC) program is established by Titles IVA, IVE if the Social Security Act, the Child Care and Development Block Grant of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. It is implemented by Title 45 of the Code of Federal Regulations, Parts 98 The Department provides services to adults and children pursuant to MCL and 1999 AC, R 400.5001 through Rule 400.5015.	

Additionally, the Claimant argued that she provided the Department with verification of all her bank accounts. The Department requested verification of a savings account, but the Claimant denies that she possessed a savings account.

This Administrative Law Judge finds that the Claimant failed to properly respond to the Department's request for information by either providing the Department with verification of a savings account, or by informing the Department that she does not possess a savings account in a timely manner.

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 $\square$ properly $\square$ improperly $\square$ closed Claimant's case. $\square$ denied Claimant's application. $\square$ 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 $\square$ did not act properly.
Accordingly, the Department's decision is $oxed{\boxtimes}$ <b>AFFIRMED</b> $oxed{\square}$ REVERSED for the reasons stated on the record.
/s/
Kevin Scully Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: January 15, 2013

Date Mailed: January 15, 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 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 <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

## KS/tb

