

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

IN THE MATTER OF:



Reg. No.: 2013-24641
Issue No.: 1038
Case No.: 1 [REDACTED]
Hearing Date: February 21, 2013
County: Wayne (35)

ADMINISTRATIVE LAW JUDGE: Jan Leventer

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 February 21, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Family Independence Manager and [REDACTED], Partnership, Accountability, Training, Hope (PATH) Coordinator.

ISSUE

Did the Department properly deny Claimant's application close Claimant's case for:

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

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 applied for benefits received benefits for:

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

2. On February 1, 2013, the Department
 denied Claimant's application closed Claimant's case
due to noncompliance with work participation requirements.
3. On or about December 27, 2012, the Department sent
 Claimant Claimant's Authorized Representative (AR)
notice of the denial. closure.
4. On January 16, 2013, Claimant filed a hearing request, protesting the
 denial of the application. closure of the case.

CONCLUSIONS OF LAW

Department policies are contained 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, Rule 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

Additionally, Bridges Eligibility Manual (BEM) 233A, "Failure to Meet Employment and/or Self-Sufficiency-Related Requirements: FIP," is the Department policy that applies in this case. It is necessary therefore to determine if the Department fulfilled the requirements of BEM 233A in this case. Department of Human Services Bridges Eligibility Manual (BEM) 233A (2012).

The following additional findings of fact and conclusions of law are entered in this case. Claimant failed to participate for the required hours per week in the Work First program. On January 3, 2013, the Department conducted a triage conference at which the best available evidence was reviewed in order to determine if good cause existed to explain Claimant's failure to participate. The Claimant did not appear for the triage.

The information presented at the triage included Claimant's attendance record at the Work First program, and Claimant's documentation from July 11, 2012, regarding physical therapy for four weeks. Dept. Exh. 2; Dept. Exh. 3, p. 1.

There are twelve categories of good cause in BEM 233A: the person is employed forty hours, the client is physically or mentally unfit, the client (or spouse or child) has an illness or injury, the employer (or DHS) failed to reasonably accommodate a disability, no child care is available, the available employment involves illegal activities, the client experiences unlawful discrimination at work, an unplanned event or factor occurs, the client changes jobs, the commuting time is excessive, and, the client is receiving

Emergency FIP. BEM 233A explains the twelve types of good cause in more detail. BEM 233A, pp. 4-5.

The Department is charged with the responsibility to determine good cause at the triage appointment. It is found and determined that the Department fulfilled its responsibility. The Department conducted a triage, and reviewed Claimant's attendance history from the Work First program and her July, 2012, physical therapy note. It is found and determined that the best available information, as required by BEM 233A, does support the Department's conclusion at the triage that Claimant's explanations do not meet any of the twelve acceptable reasons for good cause. *Id.*, pp. 5, 7-8.

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 application improperly denied Claimant's application
 properly closed Claimant's case improperly closed Claimant's case

for: AMP FIP FAP MA SDA CDC.

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 AMP FIP FAP MA SDA CDC decision is AFFIRMED REVERSED for the reasons stated on the record.



Jan Leventer
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: February 26, 2013

Date Mailed: February 26, 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

JL/tm

cc:

