## 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:	2013-44862 3008 Washtenaw DHS
ADMINISTRATIVE LAW JUDGE: Kevin Scully	1	
HEARING DE	CISION	
This matter is before the undersigned Administrated MCL 400.37 following Claimant's requestelephone hearing was held on behalf of Claimant included Human Services (Department) included	st for a hearing. from Lansing, Michi	
ISSUE		
Due to a failure to comply with the verifical properly $\square$ deny Claimant's application $\boxtimes$ closhenefits for:		
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)?		assistance (SDA)? ent and Care (CDC)?
FINDINGS OF	FACT	
The Administrative Law Judge, based upon the evidence on the whole record, including testimon		•
1. Claimant ☐ applied for ☒ was receiving	J: □FIP ☑FAP □N	MA □SDA □CDC.
2. Claimant ⊠ was ☐ was not provided wi	th a Verification Che	ecklist (DHS-3503).
Claimant was required to submit request	ed verification by Fe	bruary 25, 2013.

4.	on the Department denied Claimant's application closed Claimant's case reduced Claimant's benefits for failure to submit verification in a timely manner.
5.	On, the Department sent notice of the denial of Claimant's application closure of Claimant's case reduction of Claimant's benefits.
6.	On, Claimant filed a hearing request, protesting the denial closure reduction.
	CONCLUSIONS OF LAW
	rtment policies are found in the Bridges Administrative Manual (BAM), the Bridges ility 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, R 400.3101 through Rule 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 1999 AC, R 400.3001 through Rule 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, easeq., and MCL 400.105.
	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, <i>et seq.</i> , and 2000 AACS, R 400.3151 through Rule 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 1999 AC, R 400.5001 through Rule 400.5015.
Additionally, the Claimant testified that he faxed verification of his bank account to the Department on but was unable to provide evidence of his submission.
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
<ul><li>☐ closed Claimant's case.</li><li>☐ denied Claimant's application.</li><li>☐ reduced Claimant's benefits.</li></ul>
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 not act properly. ☐ did not act properly.
Accordingly, the Department's decision is $\boxtimes$ <b>AFFIRMED</b> $\square$ REVERSED for the reasons stated on the record.
☐ THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:
/S/  Kevin Scully  Administrative Law Judge  For Maura Corrigan, Director  Department of Human Services
Date Signed: 06/05/2013
Date Mailed: <u>06/05/2013</u>

**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 <u>MAY</u> 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/kl

