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:	2013-30989 3008 March 20, 2013 DHS SSPC-West	
ADMINISTRATIVE LAW JUDGE: Carmen G. Fa	hie		
HEARING DECI	SION		
This matter is before the undersigned Administrate and MCL 400.37 following Claim—ant's request for telephone hearing was held on Wednesday, Mar Participants on behalf of Claimant inc luded the Department of Human Services (Department) incl	or a hearing. After ch 20, 2013, from c lai <u>mant. Parti</u> ci	r due notice, a Lansing, Michigan.	
<u>ISSUE</u>			
Due to a failure to comply with the ve rification properly ☑ deny Claimant's application ☐ close benefits for:		lid the Department reduce Claimant's	
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? ☐	State Disability As Child Developme State Emergency	nt and Care (CDC)?	
FINDINGS OF FACT			
The Administrative Law Judge, based upon the evidence on the whole record, including testimony			
 Cla imant]FIP ⊠FAP □MA	A □SDA □CDC □	
2. Cla imant ⊠ was ☐ was not provided with a ∨	erification of Empl	oyment (DHS-38).	
3. Claimant was required to submit requested verification by February 4, 2013.			

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 4. On February 7, 2013, 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 February 7, 2013, the Department sent notice of the ☐ denial of Claimant's application. ☐ closure of Claimant's case. ☐ reduction of Claimant's benefits. 	
 On February 19, 2013, Claimant filed a hearing request, ☐ denial. ☐ closure. ☐ reduction. 	protesting the
CONCLUSIONS OF LAW	
Department policies are found in the Bridges Administrative Eligibility Manual (BEM) and the Reference Tables Manual (
☐ The Family Independence Program (FIP) was established Responsibility and W ork Opportunity Reconciliation Act of 242 USC 601, et seq. The Department (formerly k nown as Agency) administers FIP pursuant to MCL 400.10, et seq., through Rule 400.3131. FIP replaced the Aid to Dependence effective October 1, 1996.	1996, Public Law 104-193, s the Family Independence and 1999 AC, R 400.3101
☐ The Food Assistanc e Program (FAP) [fo rmerly known program] is establis hed by the Food St amp Act of 1977 implemented by the federal r egulations contained in Title Regulations (CFR). The Department (formerly known as Agency) administers FAP pursuant to MCL 400.10, et seq. through Rule 400.3015.	7, as amended, and is 7 of the Code of Federal 8 the Family Independenc
☐ The Medical Ass istance (MA) program is es tablished by Security Act and is im plemented by Title 42 of the Code of The Department (formerly known as the F amily Independent MA program pursuant to MCL 400.10, et seq., and MCL 400.	Federal Regulations (CFR). nce Agency) administers the
☐ The State Disability Assistance (SDA) progr am which progression of the disabled persons is established by 20 04 PA 344. The D as the F amily Independence Agency) administers the SDA 400.10, et seq., and 2000 AACS, R 400.3151 through Rule 4	epar tment (formerly known program pursuant to M CL
☐ The Child Development and Care (CDC) program is estand XX of the Soc ial Security Act, the Child Care and De 1990, and the Personal Responsibility and Work Opportunity	velopm ent Block Grant of

The program is implemented by Title 45 of the Code of Fe deral Regulations, Parts 98 and 99. T he Department provides servic es to adult s and children pursuant to MCL 400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.
☐ The State Emergency Relief (SER) program is estable ished by 2 004 PA 344. The SER program is administer ed pursuant to MCL 400.10, et seq., and by, 1999 AC, R 400.7001 through Rule 400.7049. Department police ies are found in the State Emergency Relief Manual (ERM).
Additionally, the claimant failed to turn in her/his required verific ation of 30 days of income to verify eligibility by the due da te, which resulted in her/his case being denied/closed. The claimant is entitled to re-apply for benefits.
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
☐ closed Claimant's case.☐ denied Claimant's application.☐ 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 ☐ did act properly. ☐ did not act properly.
Accordingly, the Depar tment's decision is $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
<u>/s/</u>
Carmen G. Fahie
Administrative Law Judge For Maura Corrigan, Director
Department of Human Services
Date Signed: March 25, 2013
Date Mailed: March 25, 2013

NOTICE: Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the receipt date of this Dec ision and Orde r. MAHS will not or der a rehearing or reconsideration on the Department's mo tion where the final decis ion 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 ti mely 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, math ematical error, or other obvious errors in the he aring 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

Re consideration/Rehearing Request P. O. Box 30639 Lansing, Michigan 48909-07322

CGF/hj

CC:

