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

IN THE MATTER OF:



Reg. No.: Issue No.: 3008 Case No.: Hearing Date: County DHS:

201332867

ADMINISTRATIVE LAW JUDGE: Kevin Scully

HEARING DECISION

This matter is before the undersigned Admini strative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claim ant's request for a hearing. After due notice, a telephone hearing was held on from Participants on behalf of Claimant included Participants on behalf of Department of Human Services (Department) included

ISSUE

Due to a failure to comply with the ve rification requirements, did the Department properly \prod deny Claimant's application \bigotimes close Claimant's case \prod reduce Claimant's benefits for:

imes

Family Independence Program (FIP)? Food Assistance Program (FAP)? Medical Assistance (MA)?

State Disability Assistance (SDA)? Child Development and Care (CDC)?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material, and substantia evidence on the whole record, including testimony of witnesses, finds as material fact:

1. Cla imant applied for was receiving: FIP KAP MA SDA CDC.

2. Cla imant 🔀 was 🗌 was not provided with a Verification Checklist (DHS-3503).

Claimant was required to submit requested verification by

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

Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

☐ The Family Independence Progr am (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq*. The Department (formerly k nown 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 Assistanc e Program (FAP) [for merly 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 Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department (formerly known as the F amily Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

The State Disability Assistance (SDA) progr am which provides financial as sistance for disabled persons is established by 2004 PA 344. The Depart ment (formerly known

as the F amily Independence Agency) admini sters the SDA program pursuant to M CL 400.10, *et seq.*, and 2000 AACS, R 400.3151 through Rule 400.3180.

☐ The Child Development and Care (CDC) program is establis hed by Titles IVA, IVE and XX of the Soc ial Security Act, the Ch ild Care and Developm ent 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 Fede ral 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.

Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the D epartment properly improperly

 \boxtimes closed Claimant's case.

denied Claimant's application.

reduced Claimant's benefits.

DECISION AND ORDER

The Administrative Lav	w Judge, based upon the above Findings	s of Fact	and	Conclusions
of Law, and for the rea	asons stated on the record, finds	that	the	Department
\boxtimes did act properly.	did not act properly.			

Accordingly, the Depar tment's decision is \square **AFFIRMED** \square REVERSED f or the reasons stated on the record.

<u>/s/</u>

Kevin Scully Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: 04/05/2013

Date Mailed: 04/05/2013

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)

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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 <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 r, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
- the failure of the ALJ to address ot her relevant iss ues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at

Michigan Administrative hearings Recons ideration/Rehearing Request P. O. Box 30639 Lansing, Michigan 48909-07322

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