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

IN THE MATTER OF:

███████████
███████

Reg. No.:	201332983
Issue No.:	3008
Case No.:	███████
Hearing Date:	███████
County DHS:	███████

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 ███████ 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 verification requirements, did the Department properly ☐ deny Claimant's application ☒ close Claimant's case ☐ reduce Claimant's benefits for:

☐ Family Independence Program (FIP)? ☐ State Disability Assistance (SDA)?
☒ Food Assistance Program (FAP)? ☐ Child Development and Care (CDC)?
☐ Medical Assistance (MA)?

FINDINGS OF FACT

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

1. Claimant ☐ applied for ☒ was receiving: ☐FIP ☒FAP ☐MA ☐SDA ☐CDC.

2. Claimant ☒ was ☐ was not provided with a Verification Checklist (DHS-3503).

3. 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) [fo rmerly known as the Food Sta mp (FS) program] is establis hed by the Food St amp Act of 1977, as amend   ed, and is implemented by the federal r egulations contained in Title   7 of the Code of Federal Regulations (CFR). The   Department (formerly known   as the Family Independenc e 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 im plemented by Title 42 of the Code of Federal Regu lations (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 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.

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 Department's decision is ☒ **AFFIRMED** ☐ REVERSED for the reasons stated on the record.

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

Date Signed: 04/12/2013

Date Mailed: 04/12/2013

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 **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 erro 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

KS/kl

cc: