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

IN THE MATTER OF:



Reg. No.:	201
Issue No.:	500
Case No.:	
Hearing Date:	May
County:	Mad

3-38783 8

/ <u>1, 201</u>3 comb County DHS #12

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

HEARING DECISION

This matter is before the undersigned Administ rative 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 Wednes day, Ma y 1, 2013 from Lansing, Michigan. Participants on behalf of Claimant included the claimant's brother, , the claimant's brother's wife. and the f uneral home director, Participants on behalf of Departm ent of Human Services (Department) ES. included

ISSUE

Due to excess income, did the Department properly independent of the Claimant's application Close Claimant's case reduce Claimant's benefits for:

Family Independence Program (FIP)?

Food Assistance Program (FAP)? Medical Assistance (MA)?

Adult Medical Assistance (AMP)?

State Disability Assistance (SDA)?

Child Development and Care (CDC)?

State Emergency Relief (SER)?

FINDINGS OF FACT

The Administrative Law Judge, based on t he competent, material, and substantial evidence on the whole record, finds as material fact:

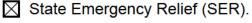
1. Cla imant

applied for benefits for: received benefits for:

Family Independence Program (FIP).

Food Assistance Program (FAP).

Medical Assistance (MA).



Adult Medical Assistance (AMP). State Disability Assistance (SDA).

Child Development and Care (CDC).

2. On May 18, 2012, the Department denied Claimant's SER application Closed Claimant's case reduced Claimant's FAP benefits

due to failure to provide required verifications.

3. On May 18, 2012, the Department sent

🖂 Claimant	🗌 Claiman	t's Authorized	Representative (AR)
notice of the	🛛 denial.	closure.	reduction.

4. On July 6, 2012, Claimant or Claimant's AHR filed a hearing request, protesting the ⊠ denial of the application. □ closure of the case. ⊠ reduction of benefits.

CONCLUSIONS OF LAW

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

The Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq*.

☐ The Family Independence Program (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 known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq*., and 1997 AACS R 400.3101-3131. FI P replaced the Aid to Depe ndent Children (ADC) program effective October 1, 1996.

☐ The Food Assistanc e 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 1997 AACS R 400.3001-3015.

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 Disabilit y Assistance (SDA) progr am, which provides financial ass istance for disabled persons, is establis hed by 2004 PA 344. The Department (formerly known as the F amily Independence Agency) admini sters the SDA program pursuant to M CL 400.10, *et seq.*, and 1998-2000 AACS R 400.3151-400.3180.

☐ 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 1997 AACS R 400.5001-5015.

The State Emergenc y Relief (SER) program is established 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 polic ies are found in the State Emergency Relief Manual (ERM).

Additionally, the claimant died on April 30, 2012. The claim ant's family applied for SER with assist ance in burial for the claiman t. The Verification Checklist was sent May 8, 2012 with a due date of May 15, 2012. Department Exhibit 1-2. The department did not receive the required verif ications and the case was denied on May 18, 2012. Department Exhibit 3.

During the hearing, the claimant 's brother testified that his family and the funeral home had called the depart ment caseworker repeatedly during the v erification request time period, but the department caseworker had not called them back. The department caseworker who implemented the case action was not available to testify and her department caseworker phone logs were not available. No verifications were received on behalf of the claimant and the case was denied. The funeral home director also testified that he also called the department caseworker repeatedly with no return call. In addition, the funeral director s tated that he faxed t he required verifications to the department caseworker two (2) times, but the application was still denied. The bill is still outstanding and the claimant's fa mily did pay their co-pay wit hin the time required. The department has not met its bur den that i t correctly followed policy in denying the claimant's application for SER. BAM 130 and ERM 103.

Based upon the abov e Findings of Fact and Conclus ions of Law, and for the reasons stated on the record, the Administrative La income, the Department income properly improperly improperly

denied Claimant's application

reduced Claimant's benefits

closed Claimant's case

for: \square AMP \square FIP \square FAP \square MA \square SDA \square CDC \boxtimes SER.

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 i did act properly i did not act properly.

Accordingly, the Department's AMP FIP FIP AR A SDA CDC SER.decision is AFFIRMED 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:

1. Initiate a redetermination of the Claimant's eligibility for SER by using the verifications faxed by the funeral home director.

2. Provide the Claimant with written notification of the Department's revised eligibility determination.

3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if any.

/s/

Carmen G. Fahie Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: May 9, 2013

Date Mailed: May 9, 2013

NOTICE: Michigan Administrative Hearing S ystem (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 mailing date of this Dec ision and Order . 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.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing 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

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

CGF/hj

