

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201342345
Issue No.: 2009; 4031;5032; 3002; 5016
Case No.: [REDACTED]
Hearing Date: May 22, 2013
County: Iosco

ADMINISTRATIVE LAW JUDGE: Susanne E. Harris

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 May 22, 2013, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED]. Participants on behalf of Department of Human Services (Department) included Eligibility Specialist (ES) [REDACTED].

ISSUE

Did the Department properly determine the Claimant's monthly Food Assistance Program (FAP) allotment and properly take action to deny Claimant's application for:

- | | |
|---|--|
| <input type="checkbox"/> Family Independence Program (FIP)? | <input type="checkbox"/> Adult Medical Assistance (AMP)? |
| <input type="checkbox"/> Food Assistance Program (FAP)? | <input checked="" type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA/Disability)? | <input type="checkbox"/> State Emergency Relief (SER)? |

FINDINGS OF FACT

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

1. Claimant applied for benefits received benefits for:

- | | |
|--|--|
| <input type="checkbox"/> Family Independence Program (FIP). | <input type="checkbox"/> Adult Medical Assistance (AMP). |
| <input type="checkbox"/> Food Assistance Program (FAP). | <input checked="" type="checkbox"/> State Disability Assistance (SDA). |
| <input checked="" type="checkbox"/> Medical Assistance (MA). | <input checked="" type="checkbox"/> State Emergency Relief (SER). |

2. Claimant applied for benefits received benefits for:

- | | |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP). | <input type="checkbox"/> Adult Medical Assistance (AMP). |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP). | <input type="checkbox"/> State Disability Assistance (SDA). |
| <input type="checkbox"/> Medical Assistance (MA). | <input type="checkbox"/> State Emergency Relief (SER). |

3. On April 8, 2013, the Department increased the Claimant's monthly FAP allotment and on April 9, 2013, the Department denied Claimant's application due to her not meeting any of the eligibility categories for MA and SDA and because of her failure to provide an eviction notice and as her electric bill was not in shut off status.
4. On April 9, 2013, the Department sent
 Claimant Claimant's Authorized Representative (AR)
notice of the denial. closure.
5. On April 11, 2013, Claimant filed a hearing request, protesting the
 denial of the application. closure of the case.

CONCLUSIONS OF LAW

Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility 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 of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

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 State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq.*, and 2000 AACS, R 400.3151 through Rule 400.3180.

The State Emergency Relief (SER) program is established by 2004 PA 344. The SER program is administered pursuant to MCL 400.10, *et seq.*, and by, 1999 AC, R 400.7001 through Rule 400.7049. Department policies are found in the State Emergency Relief Manual (ERM).

On May 7, 2013, the Claimant submitted a signed hearing request withdrawal form that the Administrative Law Judge could not completely read and understand. Therefore, on May 8, 2013, the Administrative Law Judge issued an Order Denying Hearing Request Withdrawal. The Claimant's request was discussed during the hearing and she testified that she no longer had any issue with her FAP benefits or SER issue for denial to pay her utility bill, and those portions of the Claimant's hearing request are therefore dismissed. The Claimant, though denied for MA, was approved for AMP.

Regarding the Claimant's shelter emergency, it is not contested that the Claimant did not present an eviction notice. Emergency Relief Manual (ERM) 303 (2007) provides that the Department issue the amount the Claimant needs to keep permanent shelter and that one of the ways to verify this is with an eviction notice. When the Department denied the Claimant's application because she had no eviction notice, the Department was acting in accordance with its policy.

The Department testimony in this case was that the worker was unsure of what the Claimant put on her application regarding whether or not she was disabled, as there was no DHS-1171, Assistance Application in evidence. The DHS-1605, Notice of Case Action in evidence indicates that the Claimant was denied for cash assistance for a variety of reasons including that she was "not aged or disabled." The Administrative Law Judge asked the Department's worker at the hearing if the Claimant's case was sent to the Medical Review Team (MRT) for a disability determination and the Department's worker testified that it was not. The Administrative Law Judge does therefore not understand how it is that the Department determined the Claimant was not disabled. The Claimant testified she suffers from a closed head injury.

Departmental policy at Bridges Eligibility Manual (BEM) 105 (2010) p. 1 requires that the Department consider all MA categories so as to ensure the Claimant's right to choose the most beneficial MA category. It appears in this case that it may have even been considered that the Claimant was disabled, as her not being disabled was one of the reasons she was denied for cash assistance. The Claimant's medical information was never sent to the MRT, and therefore MA based on disability was never properly considered. Therefore, when the Department took action to deny the Claimant's application for MA and SDA, the Department was not acting in accordance with its policy as it was not determining eligibility under the most beneficial MA category for the Claimant.

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 denied Claimant's application improperly denied Claimant's application
 properly closed Claimant's case improperly closed Claimant's case for:
 AMP FIP FAP MA SDA CDC.

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 denied Claimant's application improperly denied Claimant's application
 properly closed Claimant's case improperly closed Claimant's case for:
 AMP FIP FAP MA SER CDC.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law finds that the Department did act properly denying the SER application. did not act properly denying the MA and SDA application.

Accordingly, the Department's AMP FIP FAP MA SER CDC decision is AFFIRMED REVERSED.

Accordingly, the Department's AMP FIP FAP MA SDA CDC decision is AFFIRMED REVERSED.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Initiate action to determine the Claimant's eligibility for MA and SDA back to her original application date, and
2. Initiate action to issue the Claimant any supplement she may thereafter be due.

/s/ _____
Susanne E. Harris
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: 5/24/13

Date Mailed: 5/24/13

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 mailing 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 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

SEH/tb

cc:

