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

| IN THE MATTER OF: | | |
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| | Reg. No.: Issue No.: Case No.: Hearing Date: County: | 201350080 3008; 2006; 4003 July 2, 2013 Macomb 20 |
| ADMINISTRATIVE LAW JUDGE: Susanne l | E. Harris | |
| HEARING D | ECISION | |
| This matter is before the undersigned Admini and MCL 400.37 following Claimant's requtelephone hearing was held on July 2, 2013 behalf of Claimant included Human Services (Department) included Assi | uest for a hearing. , from Lansing, Michi Participants on beha | After due notice, a gan. Participants on alf of Depart <u>ment of</u> |
| ISSU | <u>JE</u> | |
| Did the Department properly \boxtimes deny Claims for: | ant's application 🗌 c | lose Claimant's case |
| ☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? | ☐ Adult Medical As ☐ State Disability A ☐ Child Developme | |
| FINDINGS (| OF FACT | |
| The Administrative Law Judge, based on evidence on the whole record, finds as materi | • | rial, and substantial |
| Claimant ⊠ applied for benefits ☐ receive | ed benefits for: | |
| ☐ Family Independence Program (FIP). ☐ Food Assistance Program (FAP). ☐ Medical Assistance (MA). | State Disability | ssistance (AMP). Assistance (SDA). ent and Care (CDC). |
| 2. On May 23, 2013, the Department ☑ denied Claimant's application ☐ cl | losed Claimant's case | |

due to his failure to submit verification of his social security number.

| | On May 23, 2013, the Department sent Claimant Claimant's Authorized Representative (AR) notice of the Contain Closure. |
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| | On May 31, 2013, Claimant filed a hearing request, protesting the denial of the application. closure of the case. |
| | CONCLUSIONS OF LAW |
| | partment policies are contained in the Bridges Administrative Manual (BAM), the dges Eligibility Manual (BEM), and the Reference Tables Manual (RFT). |
| Res 42 Age thro | The Family Independence Program (FIP) was established pursuant to the Personal sponsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly known as the Family Independence ency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 ough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program ective October 1, 1996. |
| prog imp Reg Age | The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) gram] is established by the Food Stamp Act of 1977, as amended, and is elemented by the federal regulations contained in Title 7 of the Code of Federal gulations (CFR). The Department (formerly known as the Family Independence ency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 bugh Rule 400.3015. |
| Sec The Age | The Medical Assistance (MA) program is established by the Title XIX of the Social curity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). Department of Human Services (formerly known as the Family Independence ency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 0.105. |
| | The Adult Medical Program (AMP) is established by 42 USC 1315, and is ninistered by the Department pursuant to MCL 400.10, et seq. |
| for Ser pro | The State Disability Assistance (SDA) program, which provides financial assistance disabled persons, is established by 2004 PA 344. The Department of Human vices (formerly known as the Family Independence Agency) administers the SDA gram pursuant to MCL 400.10, et seq., and 2000 AACS, R 400.3151 through Rule 0.3180. |
| and 199 The and | The Child Development and Care (CDC) program is established by Titles IVA, IVE IXX of the Social Security Act, the Child Care and Development Block Grant of 90, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. It program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 IS 99. The Department provides services to adults and children pursuant to MCL 0.14(1) and 1999 AC. R 400.5001 through Rule 400.5015. |

In this case, the Claimant asserted that he submitted everything asked of him and he presented the DHS-3503, Verification Checklist to the Department APW at the hearing, as she only had an incomplete copy and as there was no copy of it in the hearing packet before the Administrative Law Judge. The Department APW was not the worker who took the action in this case. The Department APW examined the DHS-3503, Verification Checklist and confirmed that the Claimant was never asked for verification of a social security number. The DHS-1605, Notice of Case Action in evidence indicates that the Claimant was denied benefits for failing to provide verification of his identity and verification of a social security number. Even the hearing summary indicates that the Claimant presented verification of identity.

Bridges Assistance Manual (BAM) 130 (2012) p. 2 provides that the Department worker tell the Claimant what verification is required, how to obtain it and the due date by using either a DHS-3503 Verification Checklist, or for MA determinations, the DHS-1175, MA Determination Notice to request verification. BAM 130 p. 5 provides that verifications are considered to be timely if received by the date they are due. It instructs Department workers to send a negative action notice when the client indicates refusal to provide a verification, or when the time period given has elapsed and the client has not made a reasonable effort to provide it. In this case, the Administrative Law Judge determines that the time period to submit the verification had lapsed and the Claimant had made no reasonable effort to provide the verification because he was never notified that he had to submit proof of his social security number. The Department's APW conceded that the Department was not acting in accordance with its policy. As such, the Administrative Law Judge concludes that the Department was not acting in accordance with policy when taking action to deny the Claimant's application for failure to submit the required verification.

| 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. |
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| DECISION AND ORDER |
| The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law finds that the Department \square did act properly. \bowtie did not act properly. |
| Accordingly, the Department's \square AMP \square FIP \boxtimes FAP \boxtimes MA \boxtimes SDA \square CDC decision is \square AFFIRMED \boxtimes REVERSED . |
| \boxtimes 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 redetermine the Claimant's eligibility for FAP, MA and SDA back to the original application date, and

2. Initiate action to issue the Claimant any supplements he may thereafter be due.

<u>/s/</u>

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

Date Signed: 7/3/13 Date Mailed: 7/3/13

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 <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, 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



