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

IN THE MATTER OF:		
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2013-46359 2014 July 11, 2013 Isabella
ADMINISTRATIVE LAW JUDGE: Carmen G. Fal	nie	
HEARING DECIS	<u>SION</u>	
This matter is before the undersigned Administration and MCL 400.37 following Claimant's request telephone hearing was held on Thursday, July Participants on behalf of Claimant included, the Participants on behalf of Department of Humanda Davis, ES.	for a hearing. 11, 2013, from e Claimant and	After due notice, a Lansing, Michigan. her husband,
ISSUE		
Due to excess income, did the Department properly $\square$ deny the Claimant's application $\square$ close Claimant's case $\square$ reduce Claimant's benefits for:		
Food Assistance Program (FAP)?		sistance (AMP)? ssistance (SDA)? nt and Care (CDC)?
FINDINGS OF F	<u>ACT</u>	
The Administrative Law Judge, based on the evidence on the whole record, finds as material fac		rial, and substantial
1. Claimant ☐ applied for benefits for: ☐ red	ceived benefits fo	r:
<ul><li>☐ Family Independence Program (FIP).</li><li>☐ Food Assistance Program (FAP).</li><li>☐ Medical Assistance (MA).</li></ul>		sistance (AMP). Assistance (SDA). ent and Care (CDC).
<ol> <li>On April 16, 2013, the Department: ☐ denied ☐ closed Claimant's case ☐ reduced Claim due to excess income.</li> </ol>		cation
3. On April 16, 2013, the Department sent:  ☐ Claimant ☐ Claimant's Authorized Rep notice of the ☐ denial. ☐ closure. ☐	resentative (AR) reduction.	

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<ol> <li>On April 25, 2013, Claimant or Claimant's AHR filed a hearing request, protesting the: ☐ denial of the application. ☐ closure of the case. ☐ reduction of benefits.</li> </ol>
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 Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, <i>et seq</i> .
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 1997 AACS R 400.3101-3131. 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, <i>et seq.</i> , and 1997 AACS R 400.3001-3015.
∑ 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 (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 400.105.
☐ The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, et seq., and 1998-2000 AACS R 400.3151-400.3180.
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 1997 AACS R 400.5001-5015.

Additionally, the Claimant was re-determined eligible for benefits because a MA-OHK review was not done in 2012. The re-determination application was received by the Department on April 4, 2012. Department Exhibit 16-17. The Claimant's household had earned income of \$11,908.83. Department Exhibit 18-20. As a result, the Claimant had excess income where the program had an income limit of \$2,441 for a group size of 3, but the Claimant had a net income of \$11,725. Department Exhibit 23.

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Date Mailed: <u>07/17/2013</u>

The Department has met its burden that the Claimant is not eligible for MA-OHK due to excess income and the Department properly closed the case. BEM 131, 500, 501, and 531. BAM 210.

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, due to excess income, the Department $\square$ properly $\square$ improperly
<ul> <li>☐ denied Claimant's application</li> <li>☐ reduced Claimant's benefits</li> <li>☑ closed Claimant's case</li> </ul>
for:
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 AMP FIP FAP MA SDA CDC 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:
/s/ Carmen G. Fahie Administrative Law Judge For Maura Corrigan, Director Department of Human Services
Date Signed: <u>07/16/2013</u>

**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.

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.

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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

# CGF/pw

