

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2013-48273
Issue No.: 1021
Case No.: [REDACTED]
Hearing Date: June 19, 2013
County: Wayne (82-41)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 June 19, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Did the Department properly close Claimant's Family Independence Program (FIP) case for failure to provide requested verifications?

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 was an ongoing recipient of Family Independence Program (FIP) benefits who was not participating in the work participation program.
2. In reviewing FIP cases in which clients were not participating in the work participation program, the Department found that Claimant's file lacked any Medical Review Team (MRT) determination of Claimant's disability.
3. On April 15, 2013, the Department sent Claimant a Medical Determination Verification Checklist (VCL) asking that she provide requested medical documents by April 25, 2013, in order for the Department to determine her ongoing eligibility for a work participation program deferral based on disability.

4. The Department did not receive the completed medical packet from Claimant.
5. On April 29, 2013, the Department sent Claimant a Notice of Case Action notifying her that her FIP case would close effective June 1, 2013, because she had failed to provide the documents requested in the VCL
6. On May 21, 2013, Claimant filed a hearing request, protesting the closure of her case.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), the Department of Human Services Bridges Eligibility Manual (BEM), and the Department of Human Services 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.

At the hearing, the Department testified that Claimant was identified as a client receiving FIP who was not participating in the work participation program but lacked an MRT finding of disability. Unless temporarily deferred or engaged in activities that meet participation requirements, work-eligible individuals are required as a condition of continued FIP eligibility to participate in a work participation program or other employment-related activity. BEM 230A (January 1, 2013), p. 1; BEM 233A (January 1, 2013), p. 1. MRT determines whether a client has a long-term disability making them eligible for a deferral from participation in the work participation program. BEM 230A, pp. 9-12.

Establishing a long-term disability involves a three-step process. First, at the Department's request, the client must provide verification of the disability showing that it will last longer than 90 calendar days, and a failure to do so results in the client having failed to establish a disability and being required to fully participate in the work participation program as a mandatory participant. BEM 230A (January 2013), p. 10. Once a client provides verification of a disability lasting over 90 days, the client must then submit a completed medical packet (consisting of documentation such as the DHS-49 series and medical and/or education documentation needed to define the disability) to the Department to be forwarded to MRT for MRT's determination of whether the client is disabled and eligible for a deferral from the work participation program. BEM 230A, pp. 10-12. If the client fails to provide the completed medical packet, the Department

closes the client's FIP case for failure to provide needed medical documentation. BEM 230A, p. 10.

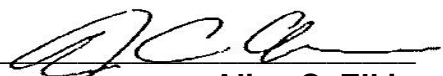
In this case, Claimant testified that she had been receiving FIP for over ten years and, based on her disability, had never participated in the work participation program. However, the Department credibly testified that Claimant's file lacked an MRT determination of disability entitling Claimant to a deferral. Consequently, the Department acted in accordance with Department policy when it sent Claimant the Medical Determination VCL seeking the medical documentation necessary to refer Claimant's case to MRT to verify a disability.

At the hearing, Claimant denied receiving the VCL and enclosed medical forms. The Department presented a copy of the VCL dated April 15, 2013, showing that it was addressed to an [REDACTED] address, Claimant's address of record at the time. The Department also showed that the documents were mailed through its automated system from Lansing to Claimant. Claimant admitted living at the [REDACTED] address at the time the VCL was sent but testified that she had issues receiving mail at the address. However, the Department presented evidence that Claimant used the [REDACTED] address for an online application she filed with the Department on April 24, 2013, which was after the date the VCL was sent to her. In light of these facts, Claimant has failed to rebut the presumption that she received the VCL. See *Good v Detroit Automobile Inter-Insurance Exchange*, 67 Mich App 270, 275-278 (1976). Thus, the Department acted in accordance with Department policy when it closed Claimant's FIP case based on Claimant's failure to provide requested documents.

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 acted in accordance with Department policy when it closed Claimant's FIP case.

Accordingly, the Department's FIP decision is AFFIRMED.



Alice C. Elkin
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: June 24, 2013

Date Mailed: June 24, 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 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 affect 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

ACE/pf

cc:

