

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 201354646  
Issue No.: 3008  
Case No.: [REDACTED]  
Hearing Date: July 25, 2013  
County: Oakland County (#02)

**ADMINISTRATIVE LAW JUDGE: MICHELLE HOWIE**

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's June 18, 2013 request for a hearing. After due notice, a telephone hearing was conducted on Thursday July 25, 2013 from Detroit, Michigan. The Claimant appeared and testified. Participants on behalf of Department of Human Services (Department) included [REDACTED] (Eligibility Specialist) and [REDACTED] (Interpreter for Claimant).

**ISSUE**

Did the Department properly  deny Claimant's application  close Claimant's case 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"/> Child Development and Care (CDC)?  |

**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 checked="" type="checkbox"/> Food Assistance Program (FAP). | <input type="checkbox"/> State Disability Assistance (SDA). |
| <input type="checkbox"/> Medical Assistance (MA).                  | <input type="checkbox"/> Child Development and Care (CDC).  |

2. On July 1, 2013 , the Department  
 denied Claimant's application       closed Claimant's case  
due to failure to return verification of wage match information.
3. On June 12, 2013, the Department sent  
 Claimant notice of the     denial.     closure.
4. On June 18, 2013, Claimant filed a hearing request, protesting the  
 denial of the application.     closure of the case.

### **CONCLUSIONS OF LAW**

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

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 Department routinely matches recipient data with computer data exchanges that assist in the identification of potential current and past employment income. When there is a discrepancy between the wage match information and the client's work history stated on an application or other information in the client's case record, the Department must request verification from the client by sending a Wage Match Client Notice (DHS-4638). BAM 802 (December 1, 2011), p 2. If verifications are not returned by the 30th day, the case will close for a minimum of 30 days after appropriate actions are taken in the Department's system unless the client returns verifications. BAM 802, p 2. If the household fails to provide the requested verification, the Department may use the information shown on the wage match report to calculate an over-issuance amount. The date the client reapplies determines if the wage match verifications must be returned before processing the new application. BAM 802, p. 2.

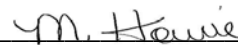
In this case, Claimant acknowledged receipt of the Wage Match Client Notice requesting verification of employment income for her son by May 20, 2013. Claimant submitted wage match information for herself but not the son. The verification information for the son has not been returned to date. Claimant testified that although her son resides in the home he does not contribute to the household bills. Since the requested verification was not received by the 30<sup>th</sup> day, the Department acted in accordance with policy when it closed Claimant's FAP case for failure to provide verification. Claimant may reapply for FAP benefits after the case has been closed for a minimum of 30 days.

Accordingly, the Department action is UPHELD.

**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 when it closed Claimant's FAP case effective July 1, 2013.

Accordingly, the Department's  FAP determination is hereby, **AFFIRMED**.



**Michelle Howie**  
Administrative Law Judge  
For Maura Corrigan, Director  
Department of Human Services

Date Signed: 8/2/2013

Date Mailed: 8/2/2013

**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 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

MH/hw

cc:

