

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

**IN THE MATTER OF:**

██████████  
██████████████████  
████████████████████

Reg. No.: 2013-26085  
Issue No.: 2006  
Case No.: ██████████  
Hearing Date: July 11, 2013  
County: Kalamazoo

**ADMINISTRATIVE LAW JUDGE:** Carmen G. Fahie

**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 Hearing. After due notice, a telephone hearing was held on Thursday, July 11, 2013, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant's Authorized Representative and Power of Attorney, ██████████. Participants on behalf of Department of Human Services (Department) included, Tara Reed, ES.

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

2. On October 11, 2012, the Department  denied Claimant's application  closed Claimant's case due to the Claimant's authorized representative failure to provide the required verifications to determine eligibility.
3. On October 11, 2012, the Department sent  Claimant  Claimant's Authorized Representative (AR) notice of the  denial.  closure.
4. On January 14, 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 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 1999 AC, R 400.5001 through Rule 400.5015.

Additionally, this Administrative Law Judge notes that this is not a timely hearing request because the Department's denial actions occurred October 11, 2012, for failure to provide verification and July 17, 2012, for excess assets with the hearing request being submitted on January 14, 2013. Department Exhibit t. However, the record is clear that the Claimant's Authorized Representative failed to provide the required verification by the due date based on a second application filed for MA of September 27, 2013, with a request for retroactive MA to June 2012, and a first application filed on June 1, 2012 for excess assets. Department Exhibit h-m and n-r. The hearing request for both applications is beyond the 90 day requirement of policy. BAM 600.

The regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in the Michigan Administrative Code, 1999 AC, R 400.901 through Rule 400.951. An opportunity for a hearing shall be granted to an applicant who requests a hearing because a claim for assistance is denied or is not acted upon with reasonable promptness, and to any recipient who is aggrieved by a Department action resulting in suspension, reduction, discontinuance, or termination of assistance. Rule 400.903(1). A Request for Hearing shall be in writing and signed by the Claimant, Petitioner, or Authorized Representative. Rule 400.904(1).

The Bridges Administrative Manual (BAM) 600, p. 4, provides in relevant part as follows:

The Client or Authorized Hearing representative has 90 calendar days from the date of the written notice of case action to request a hearing. The request must be received anywhere in DHS within the 90 days.

During the hearing, the Department caseworker testified that the Claimant's Authorized Representative submitted a third application on December 14, 2012 that was approved with retroactive benefits to September 2012. An approval notice was sent on January 8, 2013.

During the hearing, the Claimant's Authorized Representative stated that she had had a heart attack and was in rehabilitation during the contested time period as a reason for good cause. The Claimant's Authorized Representative submitted verification of a hospital stay from July 5, 2012, through July 13, 2012, in Bronson Hospital. Claimant Exhibit c. In addition, the Claimant's Authorized Representative received additional treatment from July 14, 2012, through July 27, 2012. Claimant Exhibit d-g. The denial notice was sent July 17, 2012, for the first application. The record reflects that the Claimant's Authorized Representative was incapacitated for the month of July 2012, but she still had 90 days from the date of the negative action to ask for a hearing which is August 2012, September 2012, and October 2012, to be timely. Even though the Claimant's Authorized Representative filed a new application on September 27, 2012, the application was denied because of failure to provide verifications on October 11, 2012. This Administrative Law Judge does not find good cause based on medical impairment.

As a result, the Department properly processed the two previous applications and properly determined that the Claimant was eligible based on the third application submitted.

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.

**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:

On January 14, 2013, Claimant's Authorized Representative filed a Request for Hearing concerning the Department's action. Because Claimant's Request for Hearing was not within ninety days of the disputed action taken by the Department, this Request for Hearing must be dismissed for lack of jurisdiction.

Based on the above discussion, it is ORDERED that this Request for Hearing is DISMISSED.

/s/ \_\_\_\_\_  
**Carmen G. Fahie**  
Administrative Law Judge  
For Maura Corrigan, Director  
Department of Human Services

Date Signed: 08/06/2013

Date Mailed: 08/06/2013

**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; or
  - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the Claimant; or
  - 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

cc:

[REDACTED]  
[REDACTED]  
[REDACTED]  
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