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

IN THE MATTER OF:



Reg. No.: 2013-55292 Issue No.: 3008; 6015 Case No.:

Hearing Date: July 30, 2013 County: Jackson

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 Tuesday, July 30, 2013, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of Department of Human Services (Department) included, Amy Turner, APSup, and Kimberly Sellers, ES.

ISSUE

pro		cation requirements, did the Department ose Claimant's case		
	Family Independence Program (FIP)? Food Assistance Program (FAP)? Medical Assistance (MA)?	☐ State Disability Assistance (SDA)?☐ Child Development and Care (CDC)?☐ State Emergency Relief (SER)?		
FINDINGS OF FACT				
The Administrative Law Judge, based upon the competent, material, and substantial evidence on the whole record, including testimony of witnesses, finds as material fact:				
1.	Claimant \boxtimes applied for \boxtimes was receiving SER.	: □FIP ⊠FAP □MA □SDA ⊠CDC □		
2.	Claimant ⋈ was ☐ was not provided with	a Verification Checklist (DHS-1010).		

3. C	claimant was required to submit requested verification by May 24, 2013.		
	On June 24, 2013, the Department denied Claimant's application closed Claimant's case reduced Claimant's benefits for failure to submit verification in a timely manner.		
	On June 24, 2013, the Department sent notice of the denial of Claimant's application. closure of Claimant's case. reduction of Claimant's benefits.		
_	On July 1, 2013, Claimant filed a hearing request, protesting the denial.		
	CONCLUSIONS OF LAW		
Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).			
Resp 42 U Agen throu	he Family Independence Program (FIP) was established pursuant to the Personal consibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, SC 601, et seq. The Department (formerly known as the Family Independence ncy) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 ugh Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) programetive October 1, 1996.		
progr imple Regu Agen	The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) ram] is established by the Food Stamp Act of 1977, as amended, and is emented by the federal regulations contained in Title 7 of the Code of Federal ulations (CFR). The Department (formerly known as the Family Independence ncy) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 ugh Rule 400.3015.		
Secu The	The Medical Assistance (MA) program is established by the Title XIX of the Social urity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). Department (formerly known as the Family Independence Agency) administers the program pursuant to MCL 400.10, et seq., and MCL 400.105.		
for di	The State Disability Assistance (SDA) program which provides financial assistance isabled persons is established by 2004 PA 344. The Department (formerly known he Family Independence Agency) administers the SDA program pursuant to MCL 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.
☐ The State Emergency Relief (SER) program is established by 2004 PA 344. The SER program is administered pursuant to MCL 400.10, <i>et seq.</i> , and by, 1999 AC, R 400.7001 through Rule 400.7049. Department policies are found in the State Emergency Relief Manual (ERM).
Additionally, the Claimant turned in a Change Report, DHS 2240, on May 8, 2013 with an unsigned daycare application with verification that the Claimant had full custody of 2 of his children. Department Exhibit 1-4. On May 14, 2013, the Department caseworker sent the Claimant a Verification Checklist, DHS 3503, to verify eligibility for CDC and FAP due May 24, 2013. Department Exhibit 5-8. On May 23, 2013, the Claimant submitted pages of verifications of income through receipts and invoices. Department Exhibit 9-28. On June 24, 2013, the Department caseworker denied the Claimant's application for CDC benefits because verification of citizenship for the children was not provided and self-employment was not returned. FAP was closed because verification of self-employment was not returned. Department Exhibit 29-34.
The Department has not met its burden that the Claimant failed to provide the required verifications by the due date. The Claimant did provide verification of self-employment income, but the Department caseworker found it confusing and could not determine the Claimant's income. The Department caseworker could have asked for clarification through another Verification Checklist, but cannot deny an application when the Claimant had made an attempt to comply. Therefore, the Department did not properly deny the Claimant's application for CDC and close the Claimant's FAP case. BAM 210 and 402. BEM 100.
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 ☐ improperly
☐ closed Claimant's case.☐ denied Claimant's application.☐ reduced Claimant's benefits.
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 decision is \square AFFIRMED \boxtimes **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:

- 1. Initiate a redetermination of the Claimant's eligibility for FAP and CDC by sending another Verification Checklist for the Claimant to provide the required verification to determine eligibility.
- 2. Provide the Claimant with written notification of the Department's revised eligibility determination.
- 3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if any.

<u>/s/</u>_____

Carmen G. Fahie
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: <u>08/06/2013</u>

Date Mailed: <u>08/06/2013</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 receipt 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

