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

IN THE MATTER OF:



Reg. No.: Issue No(s).: Case No.: Hearing Date: County: 2014-5426 3008

November 20, 2013 Macomb-20

ADMINISTRATIVE LAW JUDGE: Colleen Lack

HEARING DECISION

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CF R 431.200 to 431.250; 45 CFR 99. 1 to 99.33; and 45 CFR 205.10. After due notice, a telephone hearing was held on November 20, 2013, from Lansing, Michigan. Participants on behalf of Claimant included for the Claimant. Participants on behalf of the Department of Human Services (Department) included Eligibility Specialist.

ISSUE

Did the Department pr operly deny the Claimant's F ood Assist ance Prog ram (FAP) application based on a failure to comply with the verification requirements?

FINDINGS OF FACT

The Administrative Law Judge, based on t he competent, material, and substantial evidence on the whole record, finds as material fact:

- 1. On or about August 30, 2013, the Claimant applied for FAP.
- 2. On September 18, 2013, a Verification Checklist was iss ued to the Claimant stating what proofs were needed by the September 30, 2013, due date. (Exhibit A, pages 5-6)
- 3. The Claim ant submitted verificat ions to the Department, including a current bank statement.
- 4. On September 27, 2013, the Department issued a Notice of Case Action to the Claimant stating the FAP application was denied becau se the Claimant refused t o submit a bank statement. (Exhibit A, pages 3-4)
- 5. On October 17, 2013, t he Claimant filed a request for hearing protesting the Department's action. (Exhibit 1)

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Service s Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), D epartment of Human Servic es Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

The Food Assistance Program (FAP) [formerly known as the Food Stamp program] i s established by the Food Stamp Act of 197 7, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations c ontained in 7 CFR 271. 1 to 285.5. The Department (formerly known as the Fam ily Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.

Additionally, a Claimant must cooperate wit h the local office in determining initia I and ongoing eligibility, including c ompletion of necessary forms, and must completely and truthfully answer all questions on forms and in interviews. BAM 105.

Verification is usually required upon application or redetermination and for a reported change affecting eligibility or benefit level. Verifications are considered timely if received by the date they are due. For F AP, the Department must allow a client 10 calendar days (or other time limit specified in policy) to provide the requested verification. The Department worker must tell the client what verification is required, how to obtain it, and the due date. BAM 130.

For FAP, if the client c ontacts the Department prior to the due date requesting an extension or assistance in obtaining verifications, the Department must assist them with the verifications but not grant an extens ion. The Department worker must explain to the client they will not be given an extens ion and their case will be denied once the due date is pas sed. Also, the Department worker s hall explain their eligib ility and it will b e determined based on their compliance date if they return required verifications. BAM 130. The Department must re-r egister the application if t he client complies within 60 days of the application date. See BAM 115 & BAM 130.

On September 18, 2013, a Veri fication Checklist was iss ued to the Claimant stating what proofs were needed by the September 30, 2013, due date. T he listed requested proofs were for: identity; wages, salaries , tips, and commissions; and home rent. The only mention of bank information was in the comments section, which stated "submit a copy of your current checking and savings account." (Exhibit A, pages 5-6)

The Eligibility Specialist test ified that the Claimant submitted the requested verifications of identity, wages, and home rent as well as a bank statement from 1 st State Bank . However, the Eligibility Spec ialist testified that the D epartment's computer system showed that the Clai mant had an account with Kemba Cred it Union. No current bank statement, nor verification that the account had closed, was submitted regarding Kemba Credit Union. Accordingly, the Notice of Case Action was issued denying the Claimant's FAP application based on the refusal to submit a bank statement. (Exhibit A, pages 3-4)

The Claim ant noted that the Verification Checklist only request ed a copy of current checking and saving account, which was submitted. The CI aimant testified that the account closed in 2010. This account was related to her past and the Credit Union was out of state. The Claimant stated she employment at had a prior FAP case, which clos ed in April 2013. The Claimant explained that for her FAP prior case, once the account closed she had been submitting banking verifications from . Accordingly, for the I ast three years of the prior FAP case, the Claimant's banking verifications were from . The Claimant also testified that she previously provided verification that the acc ount closed to the Departm ent. The Claimant guestioned why the Department is asking for something from three years ago.

The Department's determination to deny the Claimant's FAP application based on refusal to provide a bank statement cannot be upheld. On the September 18, 2013, Verification Checklist, the only place b ank information was mentioned was in the comments section. In the comment, the Department specifically requested a copy of current checking and savings ac count. (Exhibit 1, pages 5-6) It was uncontested that the Claimant provided verification of her current bank account with

There was no request made to v erify any past banking accounts had closed. Further, it is noted that the Department did not indic ate what types of proof could be submitted for the bank account s, as was provided for the listed requested proofs. (Exhibit 1, pages 5-6)

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department did not act in accordance with Department policy when it denied the Claimant's FAP application based on a refusal to submit a bank statement.

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WIT H DE PARTMENT P OLICY AND CONSIS TENT WIT H THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reinstate and re-process the Claimant's FAP appli cation in accordanc e with Department policy.

2. Issue the Claimant any supplement that she may thereafter be due.

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Colleen Lack Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: November 26, 2013

Date Mailed: November 26, 2013

NOTICE OF APP EAL: The claimant may appea I the Dec ision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the mailing date of this Dec ision and Order . MAHS will not order a rehearing or reconsideration on the Department's mo tion where the final decis ion cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly disc overed evidence that existed at the time of the or iginal hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the clai mant must specify all reas ons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

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The written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings Reconsideration/Rehearing Request P.O. Box 30639 Lansing, Michigan 48909-07322

CL/las