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

IN THE MATTER OF	•
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	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2014 10155 2002, 3000,1000 December 2, 2013 Wayne (19)
ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris		
HEARING DECI	SION	
Following Claimant's request for a hearing, the Administrative Law Judge pursuant to MCL 400.9 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99 notice, telephone hearing was held on Decemparticipants on behalf of Claimant included the CH Hearing Representative, Participated Partici	and 400.37; 7 CF 9.33; and 45 CFF ber 2, 2013, fror laimant and the C	R 273.15 to 273.18; R 205.10. After due m Detroit, Michigan.
<u>ISSUE</u>		
Due to a failure to comply with the verification properly \boxtimes deny Claimant's application \boxtimes close benefits for:		
☐ Family Independence Program (FIP)?☐ Food Assistance Program (FAP)?☐ Medical Assistance (MA)?		ogram (AMP)? ssistance (SDA)? ent and Care (CDC)?
FINDINGS OF F	ACT	
The Administrative Law Judge, based upon the evidence on the whole record, including testimony		
 Claimant ⋈ applied for ☐ received: ⋈FIP ⋈FAP ☐MA ☐ AMP ☐SI benefits in October 2011. The Claimant's 2013. 		s dated October 25,

2.	The Claimant was sent a redetermination form on August 13, 2013. The redetermination was sent to the address in the manner of the manner of the control of t
3.	The Claimant moved from that address sometime in August but did not provide the Department with a change of address form.
4.	The Claimant did not return the redetermination by the due date.
5.	Claimant was required to submit requested verification by August 23, 2013.
6.	On November 1, 2013, the Department denied Claimant's application. closed Claimant's case for medical assistance reduced Claimant's benefits.
7.	On November 1, 2013, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
8.	On October 25, 2013, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's action.
	CONCLUSIONS OF LAW
Adm	artment policies are contained in the Department of Human Services Bridges ninistrative Manual (BAM), Department of Human Services Bridges Eligibility Manual M), and Department of Human Services Reference Tables Manual (RFT).
Res USC Age	The Family Independence Program (FIP) was established pursuant to the Personal ponsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 601 to 679c. The Department (formerly known as the Family Independence ncy) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, 00.3101 to .3131.
is es is in Dep	The Food Assistance Program (FAP) [formerly known as the Food Stamp program] stablished by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and applemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The artment (formerly known as the Family Independence Agency) administers FAP suant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.
Section 1008 Inde	The Medical Assistance (MA) program is established by the Title XIX of the Social urity Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 8.59. The Department of Human Services (formerly known as the Family ependence Agency) administers the MA program pursuant to MCL 400.10 and MCL 105.

Additionally, there are two issues in this case to be decided. The first issue is whether the Claimant's request for a hearing regarding the denial of her FIP cash assistance application in October 2011 and the denial of her food assistance application in October 2011 was timely.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 400.901 through R 400.951. Rule 400.903(1) provides as follows:

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.

A request for hearing must be in writing and signed by the Claimant, petitioner, or authorized representative. Rule 400.904(1). Moreover, the Department of Human Services Bridges Administrative Manual (BAM) 600 (10/2013), 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. [Emphasis added.]

A request for hearing must be made within 90 days of the date of the notice of case action. In this case, almost 2 years have passed since the Department denied the Claimant's applications. Based on the facts presented at the hearing it is determined that the hearing request for food assistance and cash assistance denial was untimely and therefore the request for hearing regarding those issues must be dismissed.

The second issue involves whether or not the Claimant properly and timely returned the redetermination sent to her at the last address on file with the Department. The evidence presented in this case demonstrated that the Claimant did not file a change of address as required by Department Policy; therefore, the Department sent the redetermination to Claimant's old address. Based on these facts and circumstances it is determined that because the Claimant did not comply with policy the Department had no choice but to close the Claimant's medical assistance for failure to complete redetermination. As stated at the hearing Claimants are required to report changes including changes in income and change in address within 10 days of the change. As further stated at the hearing the Claimant may reapply for medical assistance at any time. Based on the evidence presented the Department properly closed the Claimant's Medical Assistance Case.

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

acted in accordance with Department policy when it closed the Claimant's Medical Assistance Case for failure to complete the redetermination.

The Claimant's request for hearing regarding Food Assistance and FIP cash assistance application denial from a denial in October 2011 is untimely. Claimant did not file a request for hearing to contest the Department's action until October 25, 2013. Claimant's hearing request was not timely filed within ninety days of the Notice of Case Action and is, therefore, **DISMISSED** for lack of jurisdiction. BAM 600, p. 4.

DECISION AND ORDER

Accordingly, the Department's decision is

AFFIRMED with regard to the closure of the Claimant's Medical Assistance Case.

The Claimant's request for hearing dated October 25, 2013 as regards her request for hearing regarding the denial of food assistance and cash assistance applications is hereby DISMISSED for lack of jurisdiction.

Lynn M. Ferris

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

Date Signed: <u>December 5, 2013</u>

Date Mailed: December 5, 2013

NOTICE OF APPEAL: 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 or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

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).

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

- Newly discovered evidence that existed at the time of the original 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;

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• Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the Claimant must specify all reasons 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.

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

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