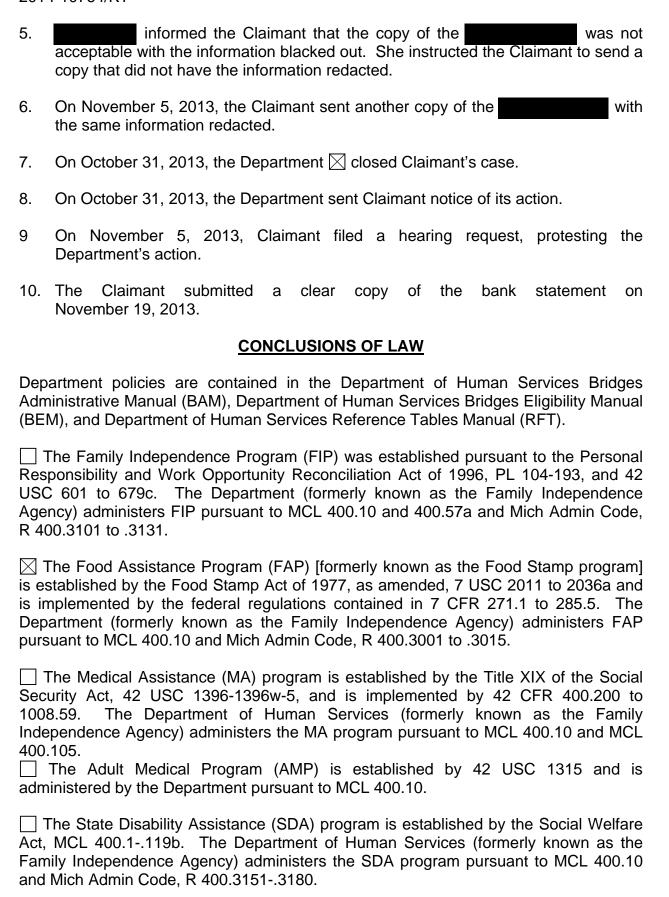
## STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

DEFARTMENT OF HOMAN CERTICES						
IN T	HE MATTER OF:					
			Reg. No.: Issue No(s): Case No.: Hearing Date: County:	2014-1076 3002 December Jackson		
ADI	MINISTRATIVE LAW JUDGE:	Katherine Talb	ot			
	HE	ARING DECIS	SION			
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 CFR 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 December 5, 2013, from Lansing, Michigan Participants on behalf of Claimant included participants on behalf of the Department of Human Services (Department) included Assistant Payment Supervisor, and Eligibility Specialist.						
		<u>ISSUE</u>				
	e to a failure to comply with perly ⊠ close Claimant's case fo		n requirements,	did the De	partmen	
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)?			Adult Medical Program (AMP)? State Disability Assistance (SDA)? Child Development and Care (CDC)?			
FINDINGS OF FACT						
	Administrative Law Judge, ballence on the whole record, include	•				
1.	Claimant ⊠ received: □FIP benefits.	⊠FAP [	]MA	□SDA	CDC	
2.	Claimant was required to subm	nit requested v	erification by Octo	ober 21, 201	3.	
3.	On October 25, 2013, Claimant submitted a copy of a of a with information redacted, including					

, an Eligibility Specialist, called the Claimant and spoke to her on

4.

October 25, 2013.



## 2014-10764/KT

not provide the specific date.

☐ The Child Development and Care (CDC) program is established by Ti	tles IVA, IVE
and XX of the Social Security Act, 42 USC 601-619, 670-679c, and 1397-	1397m-5; the
Child Care and Development Block Grant of 1990, PL 101-508, 42 USC 98	358 to 9858q;
and the Personal Responsibility and Work Opportunity Reconciliation Act	of 1996, PL
104-193. The program is implemented by 45 CFR 98.1-99.33. The	Department
administers the program pursuant to MCL 400.10 and provides services	to adults and
children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.500150	20.
The Claimant received the verification checklist which requested	
information. She confirmed she sent a redacted copy of a	on or about
October 25, 2013. She asserted copies had been sent previously. The Cl	aimant could

The Claimant confirmed she redacted important information on the as verification.

The Claimant confirmed that confirmed told her the confirmed told her the the information blacked out. Instructed the Claimant to send a copy that did not have the information redacted.

The Claimant confirmed she sent another copy of the bank statement with the same redactions on November 5, 2013. Therefore, the Claimant did not comply with the verification checklist

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 Food Assistance Program (FAP) benefits.

## **DECISION AND ORDER**

Accordingly, the Department's decision is  $\boxtimes$  **AFFIRMED**.

/s/

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

Date Signed: 12/13/13

Date Mailed: 12/13/13

**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;
- 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

KT/tb

