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

IN THE MATTER OF:



Reg. No.:2Issue No.:1Case No.:1Hearing Date:1County:1

2014-10978 1008 December 11, 2013 Macomb (50-20)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, an in-person hearing was held on December 11, 2013, from Warren, Michigan. Participants on behalf of Claimant included Claimant

Participants on behalf of

the Department of Human Services (Department) included

ISSUE

Did the Department properly deny Claimant's application for Family Independence Program (FIP) benefits?

FINDINGS OF FACT

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

- 1. On August 9, 2013, Claimant applied for FIP benefits.
- 2. On September 23, 2013, the Department sent Claimant a Notice of Case Action denying the FIP application because Claimant failed to complete the entire PATH orientation process.
- 3. On October 30, 2013, Claimant filed a hearing request disputing the Department's actions.

CONCLUSIONS OF LAW

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

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131.

Additionally, a client's FIP application cannot be approved until the client completes the 21-day PATH application eligibility period (AEP) part of orientation. BEM 229 (July 2013), p. 1. This requires that the client (1) begin the AEP by the last date to attend indicated on the PATH Appointment Notice, (2) complete the PATH AEP requirements, and (3) continue to participate in PATH after completion of the 21-day AEP. BEM 229, p. 1. Failure by a client to participate fully in PATH-assigned activities while the FIP application is pending will result in denial of FIP benefits. BEM 229, p. 6.

In this case, Claimant did not identify herself as disabled in her August 9, 2013, FIP application. However, when she attended the first day of the PATH program, she told her PATH worker that she was unable to participate in employment activities due to a disability, and her PATH worker told her to bring a completed Medical Needs form (DHS-54A) by the next meeting date.

At the next PATH appointment date on September 20, 2013, Claimant appeared 30 minutes after the time designated on her PATH Week 1 Assignment Plan paperwork. The PATH worker advised her that she had failed to comply with the PATH appointment and the Department would be notified of the noncompliance. After the Department was notified of the noncompliance, it sent Claimant a September 23, 2013, notice denying her FIP application because she had failed to complete the 21-day PATH orientation period.

By failing to timely attend the PATH meeting on September 20, 2013, Claimant was not in compliance with her AEP part of the PATH program. However, Claimant contends that she is disabled and provided verification of her disability to the PATH worker at the September 20, 2013, meeting. The PATH program representative at the hearing acknowledged that Claimant submitted a Medical Needs form signed by her doctor but the form was returned to Claimant because the doctor did not identify the length of Claimant's incapacity.

Under Department policy, when a client alleges either a short-term or long-term incapacity, the verification of disability must indicate the length of the disability. BEM 230A (October 2013), pp. 11-12, provides that persons with a mental or physical illness,

limitation, or incapacity expected to last less than three months and which prevents participation may be deferred for up to three months if the client verifies the short-term disability and the length of the disability using a DHS-54A or DHS-54E or other written statement from the doctor. If a client claims a disability or an inability to participate in work or PATH for more than 90 days because of a mental or physical condition, the Department must provide the Department with verification of the disability and the verification must indicate that the disability will last longer than 90 calendar days. BEM 230A, p. 12.

In this case, Claimant concedes that her doctor did not identify the length of her incapacity in the DHS-54E he completed on August 26, 2013, and Claimant provided to her PATH worker. Claimant testified that her doctor did not identify the length her disability was anticipated to last until November 12, 2013, when she reapplied for FIP. Because the August 26, 2013, verification did not comply with Department policy, the Department acted in accordance with Department policy when it did not continue processing the PATH deferral.

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 denied Claimant's August 9, 2013, FIP application.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

Alice C. Elkin Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: December 17, 2013

Date Mailed: December 17, 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;
- 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

ACE/pf

