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

IN THE MATTER OF:



Reg. No.: 2014-5438

Issue No(s).: 1007

Case No.: Hearing Date:

December 11, 2013

County: Jackson

ADMINISTRATIVE LAW JUDGE: Michael S. Newell

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, a telephone hearing was held on December 11, 2013, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included Independence Manager, Jet Worker.

ISSUE

Did the Department properly deny Claimant's FIP application, CDC and convert her LIF MA to a G2 deductible?

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 August 16, 2013, Claimant applied for CDC assistance.
- On September 24, 2013, the Department denied Claim ant's FIP application for excess inc ome and her CDC application fo r failure to submit a Verific ation Checklist as requested.
- 3. The Department also changed Claimant's LIF MA to a G2 deductible.
- 4. The Department did not provide a copy of the Verification Checklist for the hearing that was allegedly sent to the Claimant.

- 5. Claimant's FIP group size is two.
- 6. On September 27, 2013, Claimant re-applied for CDC.
- 7. On October 8, 2013, the Department denied Claimant's S eptember 27, 2013 CDC request due to excess income.

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 Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Depar tment (formerly known as the Family Independenc Agency) administers FIP pursuant to MC L 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131. The Food Assistance Program (FAP) [fo rmerly known as the Food Stamp program] is established by the Food St amp Act of 1977, as amended, 7 USC 2011 to 2036a and is implemented by the feder all regulations contained 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. The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105. The Adult Medical Program (AMP) is USC 13 15 and is established by 42 administered by the Department pursuant to MCL 400.10. The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The D epartment of Human Services (f ormerly known as the Family Independence Agency) administers the SDA pr ogram pursuant to MCL 400.10 and Mich Admin Code, R 400.3151-.3180. The Child Development and Care (CDC) program is established by Titles 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 9858 to 9858q; and the Personal Res ponsibility 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 purs uant to MCL 400.10 and provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.50015020.
☐ The Stat e Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1119b. The SER program is administered by the Department (formerly known as the Family Independence Agency) pursuant to MCL 400.10 and by Mich Admin Code, R 400.7001 through R 400.7049.
☐ Direct Support Services (DSS) is established by the Social Welfare Act, MCL 400.1119b. The program is administered by the Departm ent pursuant to MCL 400.10 and 400.57a and Mich Admin Code R 400.3603.
☐ The State SSI Payments (SSP) program is established by 20 CFR 416.200 12099 and the Social Security Act, 42 USC 1382e. The Department administers the program pursuant to MCL 400.10.
Additionally, the Department did not meet its burden of proof with respect to the closure of Claiman t's August 16, 2013, CDC ap plication, which occurred on September 24, 2013, because it did not provide a copy of the Verification Checklist which was allegedly sent to the Claimant. With respect to all ot her relevant actions the Department did not err.
The Department properly determined that Claimant earned a gross average of \$\) monthly by taking the average of the mont h's pay checks and mult iplying that amount by 4.3. RFT 505. The Department also properly determined Claimant's NET monthly income after deductions to be \$\) Claimant's Standard Deduction of \$\) was appropriate and BEM 554 requires a standard heat/utility deduction of \$\) in this case.
Claimant's countable income for FIP of \$1079 exceeds the FIP grant amount of \$ a FIP group size of two. Bec ause Claimant has income, she is no longer eligible for Low Income Family
Claimant also testified that the Department erred in not providing assistance through PATH for Claimant to purchase a car. Bec ause Claimant admittedly did not submit the appropriate purchase documents, the Departm ent did not issue a decision in this regard, and this Administrative Law Judge does not have the jurisdic tion (authority) to address the matter.
This Administrative Law Judge, based on the above Findings of Fact and Conclus ions of Law, and for the reasons stated on the record, if any, finds that the Department
The Department also changed Claimant's LIF MA to a G2 deductible
□ acted in accordance wi th Department policy when it denied Claimant's FIP application on September 24, 2013 for excess income, changed her LIF MA to a G2 deductible, and denied her FIP application on October 8. 2013 for excess income.

☐ failed to s atisfy its burden of s howing that it acted in accor dance with Department policy when it closed Claimant's CDC application on September 24, 2013. .

DECISION AND ORDER

Accordingly, the Department's decision is

- AFFIRMED IN PART with respect to Sept ember 24, 2013 FIP cl osure, MA changes and the October 8, 2013 CDC denial and REVERSED IN PART with respect to September 24, 2013 CDC closure
- 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 Claimant's August 16, 2013 CDC application,
 - 2. Resend to Claimant any Verification Checklists that may be necessary to process the application, and
 - 3. Determine eligibility from the application date.

Michael S. Newell

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

Michael &. Newell

Date Signed: January 3, 2014

Date Mailed: January 3, 2014

NOTICE OF AP PEAL: The claimant may appeal the Dec ision and Order to Circu it 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 or der 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 discovered 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.

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

MSN/pw

