

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2013-51723
Issue Nos.: 2006, 3008, 6019
Case No.: [REDACTED]
Hearing Date: July 10, 2013
County: Wayne (82-19)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's request for a hearing. After due notice, a telephone hearing was held on July 10, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Did the Department properly deny Claimant's application close Claimant's case for:

- | | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> Family Independence Program (FIP)? | <input type="checkbox"/> Adult Medical Assistance (AMP)? |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP)? | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA)? | <input checked="" type="checkbox"/> Child Development and Care (CDC)? |
| <input type="checkbox"/> Direct Support Services (DSS)? | |

FINDINGS OF FACT

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

1. Claimant applied for benefits received benefits for:

- | | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> Family Independence Program (FIP). | <input type="checkbox"/> Adult Medical Assistance (AMP). |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP). | <input type="checkbox"/> State Disability Assistance (SDA). |
| <input checked="" type="checkbox"/> Medical Assistance (MA). | <input checked="" type="checkbox"/> Child Development and Care (CDC). |
| <input type="checkbox"/> Direct Support Services (DSS). | |

2. On March 27, 2013, Claimant filed a change report requesting that her newborn, [REDACTED] be added to her cases.
3. On March 27, 2013, Claimant also filed an application for FAP, MA, and CDC, which indicated that [REDACTED], also lived in the household with Claimant and the child.
4. On April 23, 2013, the Department sent Claimant a Quick Note requesting a copy of her and [REDACTED] driver's license and Social Security card, a copy of the marriage license, and proof of employment by April 30, 2013.
5. The Department did not receive the requested documents by the due date.
6. On May 2, 2013, the Department sent Claimant a Notice of Case Action informing her that (i) her CDC application for [REDACTED] was denied, (ii) her CDC case for her two other children was closed effective May 5, 2013, due to lack of need, and (iii) her FAP case and the MA cases for her and all three children were closing effective June 1, 2013, ongoing, because Claimant had failed to provide requested information.
7. On June 10, 2013, Claimant filed a request for hearing disputing the Department's actions concerning her CDC, FAP and MA cases.

CONCLUSIONS OF LAW

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

The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, R 400.3001 through R 400.3015.

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990,

and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.5001 through R 400.5015.

On March 27, 2013, Claimant filed a change report to notify the Department of the birth of her daughter, [REDACTED], and have her added to her cases. To ensure that her daughter was added to her active FAP, MA and CDC cases, Claimant testified that, at the recommendation of the front desk worker at the local Department office, she also completed an application for FAP, MA and CDC. The March 27, 2013, application identified [REDACTED] and indicated that he resided in the household with Claimant, [REDACTED] and Claimant's two other children.

At the hearing, the Department testified that, because Claimant indicated in her application that [REDACTED] lived in her household and implied that she was married to him, the father was a mandatory FAP and MA group member and it needed to verify the father's identify through a copy of his driver's license and Social Security card. See BEM 211 (November 2012), pp. 4-5; BEM 212 (November 2012), p. 1; BEM 205 (December 2011), p. 1; BEM 223 (April 2012), pp. 1, 7; BEM 220 (March 1, 2013), p. 6. The Department also concluded that, because there was no evidence on its system indicating that Claimant was employed or attending school, it needed proof of Claimant's need for CDC benefits. BEM 703 (October 2012), pp. 1, 10.

When the Department needs verifications, it must tell the client what verification is required, how to obtain it, and the due date. BAM 130 (May 2012), p. 2. Department policy specifies that the Department must use the DHS-3503, Verification Checklist (VCL) to request verification, unless, for FAP only, there is a system-generated due date on the verification form such as the DHS-3688, Shelter Verification. BAM 130, pp. 2-3. The Department must allow the client 10 calendar days (or other time limit specified in policy) to provide the verification requested. BAM 130, p. 5.

In this case, the Department testified that it sent Claimant a Quick Note on April 23, 2013, requesting the documents specified above by April 30, 2013. The Department testified that its system would not enable it to issue a VCL requesting information concerning the child's father because it did not have a Social Security number for the father. However, Department policy does not provide that the Department may substitute a Quick Note for the VCL. Furthermore, the Department did not grant Claimant ten days to provide the requested documents, as provided by policy. Thus, the Department did not act in accordance with Department policy when it processed Claimant's member add request.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department did not act

in accordance with Department policy when it closed Claimant's CDC, FAP, and MA cases.

Accordingly, the Department's decision is REVERSED.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reinstate Claimant's CDC cases for her children, [REDACTED], effective May 5, 2013;
2. Reinstate Claimant's FAP case and the MA cases for Claimant and her children effective June 1, 2013;
3. Begin reprocessing Claimant's March 27, 2013, member add request for the CDC, FAP and MA programs, in accordance with Department policy, provided Claimant provides any requested proofs;
4. Issue supplements to Claimant for any FAP benefits she is eligible to receive but did not from March 27, 2013, ongoing;
5. Authorize Claimant's provider to bill for CDC benefits Claimant is eligible to receive but did not from March 27, 2013, ongoing and issue supplements to the provider, if any;
6. Provide Claimant and her children with MA coverage they are eligible to receive from March 1, 2013, ongoing; and
7. Notify Claimant in writing of its decision in accordance with Department policy.



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

Date Signed: July 15, 2013

Date Mailed: July 16, 2013

NOTICE: 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)

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 was made, within 30 days of the receipt date of the rehearing decision.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
 - misapplication of manual policy or law in the hearing decision,
 - typographical errors, mathematical error, or other obvious errors in the hearing decision that affect the substantial rights of the claimant,
 - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at
Michigan Administrative Hearings
Reconsideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

ACE/pf

cc:

