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

| IN THE MATTER OF: | | | | | |
|--|---|---|--|--|--|
| | Reg. No.: Issue No(s).: Case No.: Hearing Date: County: Oakland | 2014-3676 2011 December 16, 2013 Oakland | | | |
| ADMINISTRATIVE LAW JUDGE: Michael S. Newell | | | | | |
| HEARING DEC | ISION | | | | |
| 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 16, 2013, from Lansing, Michigan. Participants on behalf of Claimant included Claimant, and her husband, Participants on behalf of the Department of Human Services (Department) included. Etivia Thomas, JET Worker, Imojene Freeman, Office of Child Support, and Tamika Parks, Family Independence Manager. | | | | | |
| <u>ISSUE</u> | | | | | |
| Did the Department properly deny Claimant for: | s application ⊠ c | lose Claimant's case | | | |
| ☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? ☐ | | Assistance (SDA)? ent and Care (CDC)? services (DSS)? | | | |

FINDINGS OF FACT

☐ Adult Medical Assistance (MA)? ☐ State SSI Payments (SSP)?

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

| 1. | Claimant | t 🔙 applie | d for \boxtimes | received: | | | |
|----|-----------|------------|--------------------|-----------|--|-------|--|
| | ☐ FIP | FAP | $oxed{oxtrack}$ MA | | | ☐ DSS | |
| | benefits. | | | | | | |

2. On November 1, 2013, the Department

| | ☐ denied Claimant's application ☐ closed Claimant's case due to alleged noncompliance with the Office of Child Support (OCS). | | | |
|--|--|--|--|--|
| 3. | On September 25, 2013, the Department sent Claimant/Claimant's Authorized Representative (AR) its decision, labeled a Notice of Case Action (Notice). | | | |
| 4. | On October 1, 2013, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's actions. | | | |
| 5. | The OCS Worker found Claimant to be in cooperation with OCS as of October 17, 2013. | | | |
| 6. | The September 25, 2013 notice originated in Macomb County. | | | |
| 7. | At some point, Claimant moved and her case was transferred to Oakland County. | | | |
| 8. | The DHS Workers from both counties involved testified that Claimant's case should not have been closed on November 1, 2013, because she became complaint with OCR before that. | | | |
| | CONCLUSIONS OF LAW | | | |
| Adm | artment policies are contained in the Department of Human Services Bridges inistrative Manual (BAM), Department of Human Services Bridges Eligibility Manual M), and Department of Human Services Reference Tables Manual (RFT). | | | |
| ☐ 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. | | | | |
| ☐ The Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015. | | | | |
| Section 1008 | 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 3.59. The Department of Human Services (formerly known as the Family pendence Agency) administers the MA program pursuant to MCL 400.10 and MCL 105. | | | |
| | The Adult Medical Program (AMP) is established by 42 USC 1315 and is administered by the Department pursuant to MCL 400.10. | | | |

| ☐ The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.31513180. |
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| ☐ 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 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 400.50015020. |
| ☐ Direct Support Services (DSS) is established by the Social Welfare Act, MCL 400.1119b. The program is administered by the Department 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 416.20012099 and the Social Security Act, 42 USC 1382e. The Department administers the program pursuant to MCL 400.10. |
| Additionally, it is clear from the testimony of the Department and OCS that the case closed in error because Claimant's case was transferred. The closure was an oversight. |
| The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department |
| ☑ did not act in accordance with Department policy when it closed Claimant's MA case. |
| DECISION AND ORDER |
| Accordingly, the Department's decision is |
| ⊠ REVERSED. |
| ☑ THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER: |

1. Reinstate Claimant's case from the closure date if it has not already done so.

Michael &. Newell

MICHAEL S. NEWELL

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

Date Signed: 01/08/2014

Date Mailed: 01/08/2014

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

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