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: 2014-14248 1002, 3002

January 8, 2014 Macomb-20

ADMINISTRATIVE LAW JUDGE: Darryl T. Johnson

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 CF R 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 January 8, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant, **Comparison**. Participants on behalf of the Depar tment of Human Serv ices (Department) included Case Manager

ISSUE

Did the Department properly deny Claimant's applic ation for Family Independence Program (FIP) and Food Assistance Program (FAP) benefits?

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. Claimant applied for FIP (cash assistance) and FAP benefits.
- 2. A verification checklist was mailed to Claimant on November 1, 2013.
- 3. Claimant did not provide a copy of the Social Secur ity card for her infant daughter who was born Sept ember 8, 2013, or verification of wages earned by her daughter's father who also lives in the home, by the November 12, 2013 deadline.
- 4. On November 13, 2013, the Department mailed a Notice of Case Action advising Claimant that her application was denied.
- 5. On November 21, 2013, Claimant requested a hearing.

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 Depart tment (formerly known as the Family Independence 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) [formerly known as the Food Stamp program] i s established by the Food Stamp Act of 197 7, as amended, 7 US C 2011 to 2036a and is implemented by the federal regulations c ontained 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 Medic al Assistance (MA) program is est ablished by the Title XIX of the Socia I 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.

It will be noted that Claimant's Request for H earing does not identify any issue she has with respect to any medical benefits, and t he Claimant affirmed during the hearing th at she was not disputing any decision made by the Department r egarding any medical benefits. Therefore, no decision is made herein with respect to any action taken by the Department relative to medical benefits programs.

The Department denied Claimant's application for FIP and FAP because she (a) did not provide a copy of her inf ant daughter's Social Sec urity card, and did not provid e verification of her roommate's (the father of her inf ant daught er) wages. Claimant explained that she is in t he process of a divorce and she has three children (ages 13, 12, and 10) from her marriage w ho are all living with her. Her youngest daughter (age four months) was born while her divorce has been pending and she did not name her husband as the father. The child's father is her roommate. She has not b een able to obtain a copy of the child's birth certificate because it is ensnarled in some bureaucracy in Lansing. Without a birth certifi cate she cannot obtain a Social Security card for the daughter. She also testified that her roommate has refused to provide verification of his income.

If this were a Medicaid case, "Refusal to pr ovide necessary eligibility information or to cooperate with a QC review results in ineligibility for:

- The person about whom information is refused, and
- That person's spouse if living in the home, and
- That person's unmarried children under 18 living in the home.

"Note: Failure to c ooperate with Soc ial Security numbers (BEM 223), Child Support (BEM 255) or Third Party Res ource Liability (BEM 257) requiremen ts might disqualify a person but is **not** a refusal of necessary eligibility information." (Emphasis in original.) BAM 105, p. 8.

Since this is not a Medicaid case, guidance must be found elsewhere.

As stated on page 7 of BAM 105, "Clients who are able but refuse to provide n ecessary information or take a required ac tion are subject to penalties." However, BAM 130 at page 3 states, "The client must obtain required verification, but you must assist if they need and request help. If neither the client nor you can obt ain verification despite a reasonable effort, use the best available information. If no evidence is available, use your best judgment."

The Claimant testified convincingly that she is unable to obtain a Soc ial Security car d because she is unable to obtain a birth certif icate. She also was persuasive with her testimony that her roommate refuses to provide information that will allow her to verify his income. Because she is unable t o provide the requested verification, the Department must use its "best judgment". In this case, "best judgment" would be to process Claimant's applic ation using the information that is available, rather than denying her application due to circumstances beyond her control.

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 did not act in accordance with Department policy when it denied Claimant's application for FIP and FAP.

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

THE DEP ARTMENT IS ORDERE D TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WIT H DE PARTMENT P OLICY AND CONS ISTENT WITH THIS HEARING DECISION, WITHIN 10 DAY S OF THE DA TE OF MAILING OF THIS DECISION AND ORDER:

1. Redetermine Claimant's FI P and FAP benefit eligibilit y, effective November 1, 2013;

2. Issue a supplement to Claimant for any benefits improperly not issued.

Darryl T. Johnson Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: January 9, 2014

Date Mailed: January 9, 2014

NOTICE OF APP EAL: The claimant may appea I the Dec ision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, i f 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 order 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 disc overed 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

DTJ/las

