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

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evidence of caretaker status.

	Reg. No.: Issue No(s) .: Case No.: Hearing Date: County:	201417733 2007;3007 January 15, 2014 Wayne (49)				
ADMINISTRATIVE LAW JUDGE: Robert J.	Chavez					
HEARING I	DECISION					
Following Claimant's request for a hearing Administrative Law Judge pursuant to MCL 442 CFR 431.200 to 431.250; 45 CFR 99.1 notice, a telephone hearing was held on Participants on behalf of Claimant included the Department of Human Services (Department)	100.9 and 400.37; 7 CF to 99.33; and 45 CFF January 15, 2014, from Part	R 273.15 to 273.18; R 205.10. After due				
ISSI	<u>JE</u>					
Due to a failure to meet income requirement of primary caretaker status, did the Department of close Claimant's case ☑ reduce Claiman	ent properly 🔲 deny C					
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)?		ogram (AMP)? ssistance (SDA)? ent and Care (CDC)?				
FINDINGS OF FACT						
The Administrative Law Judge, based upor evidence on the whole record, including testing	•	-				
Claimant ☐ applied for ☒ received: ☐FIP ☒FAP ☒MA ☐ AMP benefits.	□SDA □CDC					
2. The father of claimant's child request	ed primary caretaker	status and provided				

3.	Claimant alleged that the father was not the primary caretaker.
4.	On
4.	On 2013, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
5.	On 2013, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's action.
	CONCLUSIONS OF LAW
Adm	artment policies are contained in the Department of Human Services Bridges hinistrative Manual (BAM), Department of Human Services Bridges Eligibility Manual M), and Department of Human Services Reference Tables Manual (RFT).
Res _l USC Age	The Family Independence Program (FIP) was established pursuant to the Personal ponsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 601 to 679c. The Department (formerly known as the Family Independence ncy) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, 00.3101 to .3131.
is es is in Dep	The Food Assistance Program (FAP) [formerly known as the Food Stamp program] stablished by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and applemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The artment (formerly known as the Family Independence Agency) administers FAP suant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.
Secu 1008 Inde	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 inistered by the Department pursuant to MCL 400.10.
Act, Fam	The State Disability Assistance (SDA) program is established by the Social Welfare MCL 400.1119b. The Department of Human Services (formerly known as the nily Independence Agency) administers the SDA program pursuant to MCL 400.10 Mich Admin Code, R 400.31513180

☐ 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 400.5001-.5020.

The primary caretaker is the person who is primarily responsible for the child's day-to-day care and supervision, in the home where the child sleeps more than half of the days in a calendar month, on average, in a twelve-month period. BEM 211.

Only one person can be the primary caretaker and the other caretaker is considered the absent caretaker, even if the absent caretaker cares for the child an equal amount of time. A child must always be in the MA group of the primary caretaker. BEM 211.

The primary caretaker is determined by using a twelve month period. The twelve month period begins when a primary caretaker determination is made. The case worker should ask the client how many days the child sleeps at his/her home in a calendar month. BEM 211. This statement should be accepted without verification unless questionable or disputed by another caretaker.

Primary caretaker status is re-evaluated when a new or revised court order changing custody or visitation is provided, there is a change in the number of days the child sleeps in another caretaker's home and the change is expected to continue, on average, for the next twelve months, or a second caretaker disputes the first caretaker's claim that the child sleeps in his/her home more than half the nights in a month, when averaged over the next 12 months. Primary caretaker status is also re-evaluated when a second caretaker applies for assistance for the same child. BEM 211.

When primary caretaker status is re-evaluated, and becomes questionable or disputed, the final determination is based on the evidence provided by the caretakers. BEM 211.

In the current case, claimant alleged guardianship of a minor child in the home. The father of this child claimed primary caretaker status at another DHS district, and provided supporting evidence to buttress his claim. Claimant was not notified that evidence had been provided, and was not given an opportunity to provide rebuttal evidence.

Per policy in BEM 211, when a dispute arises with regard to which party is the primary caretaker, the Department must allow evidence submission to make a determination. The Department did not notify claimant of the alleged change, or allow or give claimant a chance to provide rebuttal evidence once the change was alleged by the other party. As such, claimant was not allowed to provide evidence as required by BEM 211. By failing to do so, the Department erred when it moved the child in question to another

Date Mailed: <u>1/24/2014</u>

party's benefit case. Per policy, claimant should have been given a chance to submit rebuttal evidence before any change was processed.

		above Findings of Fact and Conclu , if any finds that the Department	sions of
did not act in accordispute a requested	change in caretaker st	nt policy when it failed to allow clai	
	DECISION AN	ID ORDER	
Accordingly, the Depart	ment's decision is		
☐ AFFIRMED. ☑ REVERSED. ☐ AFFIRMED IN PAR to .	T with respect to	and REVERSED IN PART with	respect
ACCORDANCE WI	TH DEPARTMENT P ON, WITHIN 10 DAYS	BEGIN DOING THE FOLLOWING POLICY AND CONSISTENT WITH SOFTHE DATE OF MAILING O	H THIS
	's original group collate of negative action.	omposition and FAP and MA	benefits
2. Allow claimant to s	submit rebuttal evidence	e with regard to primary caretaker	status.
	e is submitted by both or the minor child in que	n parties, make a decision as to estion.	primary
Date Signed: <u>1/24/201</u>	<u>4</u>	Administrative Law for Maura Corrigan, Department of Human S	v Judge Director

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

RJC/hw

