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:

2014-24121 2002, 2003, 3002,

February 20, 2014 Oakland County DHS #2

ADMINISTRATIVE LAW JUDGE: Colleen Lack

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 F ebruary 20, 2014, from Lansing, Michigan. Participants on behalf of Claimant included for the Claimant, and for the Claimant and for the Department of H uman Services (Depart tment) included for the Department

<u>ISSUE</u>

Did the Department properly cl ose the Claimant's Medical Ass istance (MA) and Food Assistance Program (FAP) cases based on a failure to comply with verification requirements?

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 was an ongoing reci pient of FAP, MA (Medica id and Medicare Savings Program) benefits.
- 2. On October 15, 2013, a Redetermination form was issued to Claimant for the MA program cases, whic h was to be comp leted and returned with proofs by the November 1, 2013 due date.
- 3. On November 1, 2013, a Verific ation Checklist for the MA and FAP cases was issued to Claimant stating ve rification of his checking account was needed by the November 12, 2013, due date.
- 4. Claimant submitted a Social Security Statement rather than the checking account statement.

- 5. The Department extended the due date based on telephone c onversations with Claimant's mother explaining how to obtain the needed verification.
- 6. On November 26, 2013, a Notice of Ca se Action was issued to Claimant stating the MA and FAP cas es would close effect ive January 1, 2014, because Claimant failed to return the requested checking account verification.
- 7. On January 29, 2014, Claim ant fil ed a request for heari ng protesting the Department's action.

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 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 USC 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.

Additionally, a Claimant must cooperate wit h the local office in determining initia I and ongoing eligibility, including c ompletion of necessary forms, and must completely and truthfully answer all questions on forms and in interviews. BAM 105.

Verification is usually required upon application or redetermination and for a reported change affecting eligibility or benefit level. Verifications are considered timely if received by the date they are due. The Department must a llow a client 10 calendar days (or other time limit specified in policy) to provide the requested verification. The Department worker must tell the client what verification is required, how to obtain it, and the due date. The client must obtain required edverification, but the Department must assist if the client needs and requests help. If neither the client nor the Department can obtain verification. If no evidence is available, the Department worker is to use their best judgment. The Depart tent is to s end a case action notice when the client indicates refusal to provide a verification, or the time period given has elaps ed and the client has not made a reasonable effort to provide it. BAM 130.

For MA, up to three extensi ons of the due date can be granted. For FAP, if the client contacts the Department prior to the due date requesting an extension or as sistance in

obtaining verifications, the Department must a ssist them with the verifications but not grant an extension. The Department worker must explain to the client they will not be given an extension and their case will be denied once the due date is passed. Also, the Department worker shall explain their eligibility and it will be determined bas ed on their compliance date if they return required verifications. BAM 130.

Benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. If a client files an application for redetermination before the end of the benefit period, but fails to take a required action, the case is denied at the end of the benefit period. BAM 210.

In this case, Claimant's MA benefit cases were due for redetermination. On October 15, 2013, a Redetermination form was issued to Cla imant for the MA program cases to be completed and returned with proofs by the November 1, 2013 due date.

On November 1, 2013, the Department det ermined bank account verification was still needed for the account the Claimant's Social Security payments are deposited into. The bank account verification would also be relevant for the FAP case. Accordingly, on November 1, 2013, a Verification Checklis t for the MA and FAP cases was issued to Claimant stating verification of his checking account was needed by the Nov ember 12, 2013, due date. The Eligibility Specialist te stified he had several conversations with Claimant after the due date r egarding the needed verification. Claimant then submitted a Social Security statement rather than the needed checking account verification. The Eligibility Specia list testified h e e xtended the du e date b ased on a telepho ne conversation with Claimant's mother expl aining what was needed and how to retrieve h Claimant's Social Security payments are the statement of the account in whic deposited. However, the Eligibility Specialist could not state the extended due date for providing the verification.

On November 26, 2013, a Notice of Case Action was issued to Claimant stating the MA and FAP cases would close effective January 1, 2014, because Claimant failed to return the requested checking account verification.

Claimant and his mother expl ained that the Claimant has been going through medic al treatment, could not walk in November 2013, did not have transportation for a while and did not even have a phone for a while. When Claimant got the letter, he misunderstood what the Department wanted. Cl aimant had his mother go to the Social Security office to get a statement from them because het hought that was what was needed. Next, Claimant's mother tried to follo w how the Eligibility Spe cialist explained they could get the needed account statement, but there was an error with the computer system and it did not allow the online acce ss. Claimant's mother called the bank and the glitch with Claimant's account statement it was a few days beyond the time the Eligibility Specialist had allowed. Claimant 's mother had called the Eligibility Specialist to let him know it would be late due to the bank system issue, but she did not get a return call. Claimant's mother testified she drove the statement to the Department office just prior to Claimant's December 3, 2013 hospitalization.

The Eligibility Spec ialist noted that the account stat ements Claimant had at the February 20, 2014 hearing had pr int dates from December 10, 2013 and in several dates January 2014. Claimant 's mother explained the acc ount statements printed earlier were left at the Departm ent office just before Clai mant's December 3, 201 3 hospitalization.

The Department provided sufficient evidence that they told Claimant what verification is required, how to obtain it, and t he due date al lowing at least 10 days. Further the Eligibility Specialist credibly testified he had phone conversations with Claimant and his mother further clarifying what was needed and gave one extension of the due date. However, Cla imant's mother credibly tes tified she tried to contact the Eligibility Specialist to explain more time was needed due to the bank computer system error, but she never got a call back. Claimant did not i ndicate a refusal to provide the verification and was making a reasonable effort to provi de it. For MA, the BAM 130 policy a llows for up to three extensions, and only one had been granted by the Department. For FAP eligibility is to be determined based on t he date of complianc e with providing the verification. Claimant's mother credibly testified once they obtained the needed account statement, it was dropped it off at the Department office. Claimant's mother's testimony indicates this was dropped off just before Cl aimant's December 3, 2013 hospitalization, which was before the FAP and MA benefit ca ses closed effective January 1, 2014. Accordingly, the determination to close Claimant's MA and FAP benefit cases cannot be upheld.

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 closed Claimant's MA and FAP cas es based on a failure to comply with verification requirements.

DECISION AND ORDER

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

THE DE PARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WIT H DE PARTMENT P OLICY AND CONSISTENT WIT H THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reinstate Claimant's MA and FAP cases and re-determine eligibility, to include requesting any verific ations still needed, re troactive to the January 1, 2014 due date.

2. Issue Claimant any supplement he may thereafter be due.

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

Date Signed: February 28, 2014

Date Mailed: February 28, 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 ti mely Request for Rehearing or Reconsideration was made, within 30 days of the receipt d ate of the Decision and Order of Rec onsideration or Rehearing Decision.

Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the req uest of a p arty within 30 days of the mailing date of this De cision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final deci sion 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 existe d 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 a ddress in the hearing d ecision 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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