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

IN THE MATTER OF:



Reg. No.: 201420776 Issue No.: 2003, 3003

Case No.:

Hearing Date: February 4, 2014 County: Kent County DHS

ADMINISTRATIVE LAW JUDGE: Kevin Scully

HEARING DECISION

Following Claimant's r equest 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 wa s held on February 4, 2014, fr om Lansing, Michigan. Participants on behalf of Claimant included participants on be half of the Department of Hum an Services (Department) included and and

ISSUE

Whether the Department of Human Se rvices (Department) properly closed the Claimant's Medical Assistance (M.A.) and Food Assistance Program (FAP) benefits?

FINDINGS OF FACT

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

- 1. The Claimant was an ongoing Medica I Assistance (M.A.) and Food Assis tance Program (FAP) recipient.
- 2. On October 15, 2013, the Department sent the Claimant a Redetermination (DHS-1010) with a due date of November 4, 2013.
- On November 4, 2013, the Department sent the Claimant a Notice of Missed Interview.
- On November 16, 2013, the Department notified the Claimant that it would close his Medic al Assistance (M.A.) and Food Assistance Program (FAP) as of December 1, 2013.

5. The Department received the Claimant's request for a hearing on December 30, 2013, prot esting the closure of his Medical Ass istance (M.A.) and F ood Assistance Program (FAP) benefits.

CONCLUSIONS OF LAW

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.

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.

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (March 1, 2013), p 5. Verification means documentation or other evidence e to establish the accuracy of the client's verbal or written statements. Department of Human Services Bri dges Assistance Manual (BAM) 130 (May 1, 2012), p 1. Verific ation is usually required at application/redetermination and for a reported change affecting elig ibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradi ctory. BAM 130. The Department uses documents, collateral contacts, or home calls to verify information. BAM 130. collateral contact is a direct contact with a person, organization, or agency to verify information from the client, BAM 130, W hen documentation is not available, or clarification is needed, collateral contact may be necessary. BAM 130.

The Claimant was an ongoing Medical Assistance (M.A.) and Food Assistance Program (FAP) recipient when the Depar tment conducted a routine review of his eligibility to receive continued benefits. On October 15, 2013, the Depar tment sent the Claimant a Redetermination (DHS-1010) with a due date of November 4, 2013. On November 4, 2013, the Department had not received the Claimant's completed Redetermination form and sent him a Notice of Missed Interview. This Notice of Missed Interview for minstructed the Claimant that it was his responsibility to reschedule his redetermination interview to avoid a lapse in benefits.

On November 16, 2013, the Department notified the Claimant that it would close his Medical As sistance (M.A.) and Food Assistance e Program (FAP) as of December 1, 2013, due to his failure to participate in the redetermination process.

The Claimant testified that he misplaced the Redetermination form and dis covered that he had received it late in the process.

Based on the evidence and testimony available during the hearing, the Department has established that it properly closed the Claimant's Medical Ass istance (M.A.) and F ood Assistance Program (FAP) benefits for fa ilure to provide the Department with information necessary to determine his eligibility to receive benefits.

DECISION AND ORDER

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 acted in accordance with Department policy when it closed the Claimant's Medical Assistance (M.A.) and Food Assistance Program (FAP) benefits.

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

	John Coly
Kevin	Scully
	Administrative Law Judge
	for Maura D. Corrigan, Director
	Department of Human Services

Date Signed: February 6, 2014

Date Mailed: February 6, 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

KS/hj

CC:

