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

IN THE MATTER OF:



Reg. No.: 2014-24401 Issue No(s).: 2002, 3002

Case No.: Hearing Date:

February 26, 2014

County: Allegan

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 MCL 400.37, and 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 three-way telephone hearing was held on February 26, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant and Allegan County Seni or Services employee Participants on behalf of the Department of Human Services (Department) included Eligibility Specialist and Family Independence Manager

ISSUE

Did the Department properly close Claimant's application for Food Assistance Program (FAP) and Medical Assistance (MA) 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:

- Claimant was an on -going F ood Ass istance Program (FAP) and Medical Assistance (MA) recipient.
- 2. On December 16, 2013 the Department mailed Claimant a notice that he was scheduled for a Redetermination Telephon e Interview and Redetermination form (Exhibit 1 Pages 5-9) which also in structed him to submit a completed redetermination form before his January 3, 2013 interview. Claimant had moved, and did not receive the form.
- 3. On January 3, 2014, when Claimant did not appear for the scheduled interview, the Department attempted to contact him by telephone without success, and then sent him a Notice of Missed Interview and instructed him to update his address.
- 4. On January 14, 2014, Claimant updated his address with the Department.

- 5. In a Notice of Case Action dated January 18, 2014 (Exhibit 1 Pages 2-5), Claimant was notified that his benefit s were clos ed becaus e he "failed to return the redetermination form mailed or given to you".
- 6. On January 24, 2014 Claimant requested a hearing.
- 7. During a January 27, 2014 pre-hearing conference Claimant was reminded that he needed to provide the information for the D epartment to redetermine his eligibility, and if not received by the end of the month his benefits would be closed.
- 8. Claimant did not provide the information needed for his redetermination.

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 Service 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] 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. It 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 completion of necessary forms; see Refusal to Cooperate Penalties in this item. Clie nts must complete ly and truthfully ans wer all questions on forms and in interviews." BAM 105.

Per BAM 130, at page 6, says:

Verifications are considered to be time ly if received by the date they are due. For electronically transmitted verifications (fax, email or Mi Bridges document upload), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a negative 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.

The iss ue is whether the Claim ant provided timely verification in response to the request. The evidence is persuasive that the Redetermination form was mailed to the Claimant at his address of record. The evidence also establishes that the Claimant did not fully respond or make a reasonable effort to respond by the deadline.

Because he did not comply by timely providing her verification, the Department properly closed his MA and FAP benefits.

Law, and for the reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it closed Claimant's MA and FAP benefits.

DECISION AND ORDER

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

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

Date Signed: February 28, 2014

Date Mailed: February 28, 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 Reconsiderati on 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 o r 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

DJT/las

