#### 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:



March 11, 2014 Oakland – 03

ADMINISTRATIVE LAW JUDGE: Gary F. Heisler

# 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 CFR 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 March 11, 2014, from Lansing, Michigan. Participants on behalf of Claimant included herself and her friend to the Department of Human Services (Department) included to the department.

### **ISSUE**

Did the Department properly deny Claimant's December 16, 2013 application for Family Independence Program (FIP), Medical Assistance (MA) and Food Assistance Program (FAP) benefits?

# FINDINGS OF FACT

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

- 1. On December 16, 2013, Claimant submitted an application for Family Independence Program (FIP), Medical Assistance (MA) and Food Assistance Program (FAP) benefits.
- 2. On December 27, 2013, Claimant was sent a Notice of Case Action (DHS-1605) which stated her application for Family Independence Program (FIP) and Medical Assistance (MA) were denied.
- 3. On December 27, 2013, Claimant was also sent a Verification Checklist (DHS Form 3503) for her Food Assistance Program (FAP) application. One of the necessary and requested verifications was for Claimant's past 30 days earned income. The verifications were due on January 6, 2014.

- 4. On January 6, 2014, Claimant submitted two paycheck stubs. One was for the pay period starting September 4, 2013 and ending September 17, 2013. The second paycheck stub was for the period starting October 30, 2013 and ending November 12, 2013.
- 5. On January 14, 2014, Claimant was sent a Notice of Case Action (DHS-1605) which stated her Food Assistance Program (FAP) application was denied for failure to provide required verifications.
- 6. On February 5, 2014, Claimant submitted a request for hearing.

## CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), Department of Human Services 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 Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131.

The Medical Assistance (MA) program is established by the Title XIX of the Social 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.

Claimant's benefit group consisted of herself and her two adult daughters. Both of Claimant's daughters are over 18 years old and out of high school. In accordance with Department of Human Services Bridges Eligibility Manual (BEM) 210 FIP Group Composition (2013) eligibility for Family Independence Program (FIP) benefits requires that the benefit group include a dependent child. Denial of the Family Independence Program (FIP) application was correct.

Because of Claimant's benefit group composition, the only Medical Assistance (MA) category she was eligible for was the Adult Medical Program (AMP). The Adult Medical Program (AMP) was closed to new enrollments at the time. Denial of Claimant's Medical Assistance (MA) application was correct.

The paycheck stubs Claimant submitted do not cover the 30 days preceding the application. During this hearing Claimant testified that her employment is not consistent. Claimant was worked if she had worked during other two week pay periods prior to the application and testified that she could not remember.

Department of Human Services Bridges Administration Manual (BAM) 130 Verification and Collateral Contacts (2013) under Obtaining Verification on 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 obtain verification despite a reasonable effort, use the best available information. If **no** evidence is available, use your best judgment.

Under Timeliness of Verifications on page 6, BEM 130 states a negative action notice should be sent when the client indicates refusal to provide a verification or the time period given has elapsed and the client has not made a reasonable effort to provide the verification.

In this case Claimant did not request assistance or indicate there was any difficulty in obtaining income verification for the last 30 days prior to the application. Denial of Claimant's Food Assistance Program (FAP) application was correct.

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 denied Claimant's December 16, 2013 application for Family Independence Program (FIP), Medical Assistance (MA) and Food Assistance Program (FAP) benefits.

# **DECISION AND ORDER**

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

Bay J. Hank

Gary F. Heisler Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: March 14, 2014

Date Mailed: March 17, 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 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

#### GFH/nk

