

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201425984
Issue No(s) : 3002
Case No.: [REDACTED]
Hearing Date: March 6, 2014
County: SSPC-East

ADMINISTRATIVE LAW JUDGE: Robert J. Chavez

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 6, 2014, from Detroit, Michigan. Participants on behalf of Claimant included [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED] APS and [REDACTED] APW.

ISSUE

Due to a failure to comply with the verification requirements, did the Department properly deny Claimant's application close Claimant's case reduce Claimant's benefits for:

- | | |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)? | <input type="checkbox"/> Adult Medical Program (AMP)? |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP)? | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input type="checkbox"/> Medical Assistance (MA)? | <input type="checkbox"/> Child Development and Care (CDC)? |

FINDINGS OF FACT

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

1. Claimant applied for received:
 FIP FAP MA AMP SDA CDC
benefits.
2. Claimant was required to submit requested verification by [REDACTED].

3. On [REDACTED], the Department
 denied Claimant's application.
 closed Claimant's case.
 reduced Claimant's benefits.
4. On [REDACTED], the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
5. On [REDACTED], Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's action.

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), and Department of Human Services Reference Tables Manual (RFT).

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 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.

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 Adult Medical Program (AMP) is established by 42 USC 1315 and is administered by the Department pursuant to MCL 400.10.

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

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.

Claimant initially applied for FAP benefits on January 6, 2014 and was mailed a verification checklist on [REDACTED], with a due date of [REDACTED]. On [REDACTED], the Department received verifications from the claimant, which included two pay stubs and the front page of a rental agreement. With this submission, claimant sent a note indicating that she thought the verifications sent were complete and also requesting help obtaining other verifications requested by the Department.

Verifications supplied by the claimant at this time were incomplete; claimant needed to submit two more pay stubs, and the remaining part of the rental agreement, per Department testimony and policy found at BEM 505.

In response to this request for assistance, the Department called claimant on [REDACTED], [REDACTED]. This was three hours before the end of office hours, on the day after the requested verifications were due; this was three full three days after the claimant had requested assistance.

When the claimant did not answer the phone, the Department proceeded to leave a voice mail; sometime within the next three hours, the Department then denied claimant's FAP application, not having heard back from the claimant in this short period of time.

Claimant subsequently returned the phone call from the Department on [REDACTED] [REDACTED] as acknowledged by the Department.

The Department must assist in obtaining verifications if a client needs and requests help. BAM 130, pg. 3.

In the current case, the Department failed to follow that policy. Claimant requested help obtaining verification on [REDACTED]. The Department then proceeded to ignore this request for help for three days, and only attempted to provide cursory assistance on [REDACTED], the day after the verifications in question were due. When the claimant did not return a phone call in less than three hours, the Department made no further effort to assist the claimant and proceeded to deny the application in question.

This was an unreasonable attempt to provide assistance. Even discounting the fact that the Department failed to make any attempt to provide assistance until after the deadline, the Department then only gave claimant three hours to return a phone call, an amount of time that can most graciously be called insufficient. For this reason alone, the undersigned would reverse the Department, as policy with regards to verification assistance was not followed under a plain reading of said policy.

That being said, the undersigned does not believe that the Department properly applied BAM 130 with regards to the denial of the application due to insufficient verifications.

BAM 130 states that the Department may only send a negative action notice when a) the client indicates refusal to provide a verification, or b) the time period given has elapsed and the client has not made a reasonable effort to provide it.

Neither of the situations above applies in the current case. Claimant never refused to provide verifications, and in fact, attempted to provide verifications on [REDACTED]. Furthermore, while the time period had elapsed, it would be a stretch to say that claimant did not make a reasonable effort to provide verification.

The note accompanying the verifications submissions indicated that claimant thought the submitted verifications were sufficient to show wages and rental expenses. While these verifications were insufficient, at no point did the Department alert claimant to the fact that they were insufficient. If the Department was not satisfied as to the sufficiency of submitted verifications, the Department has a duty to inform the claimant of such; otherwise, the Department cannot argue that claimant did not make a reasonable attempt to submit verifications, especially when a claimant submits a note indicating that they believed the submitted verifications were sufficient.

As such, the undersigned must reverse the Department. There is no evidence in the case record that shows that claimant did not make a reasonable attempt to submit adequate verification. Furthermore, claimant requested assistance with securing verification and at no time did the Department offer assistance as required by policy.

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

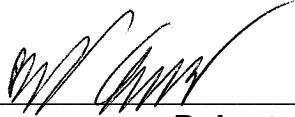
- acted in accordance with Department policy when it .
- did not act in accordance with Department policy when it denied claimant's [REDACTED] FAP application.
- failed to satisfy its burden of showing that it acted in accordance with Department policy when it .

DECISION AND ORDER

Accordingly, the Department's decision is

- AFFIRMED.
- REVERSED.
- AFFIRMED IN PART with respect to and REVERSED IN PART with respect to .
- THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reprocess claimant's [REDACTED], FAP application.



Robert J. Chavez
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 3/14/2014

Date Mailed: 3/14/2014

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

RJC/hw

2014-25984/RJC

cc:

