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

IN THE MATTER OF:



Reg. No.: 201423738 Issue No.: 1002, 3002

Case No.:

Hearing Date:

February 25, 2014

County: Oakland County DHS #3

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 was held on F ebruary 25, 2014, from Lansing, Michigan. Participants on behalf of Claimant included Participants on behalf of the Department of Human Services (Department) included

<u>ISSUE</u>

Whether the Department of Human Services (Departm ent) properly close Foo d Assistance Program (FAP) benefits and deny the Family Independence Program (FIP) application because of the Claimant's failure to provide the Department with information necessary to determine her eligibility to receive benefits?

FINDINGS OF FACT

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

- The Claimant was an ongoing Food Assistance Program (FAP) recipient.
- 2. The Claimant submitted an application for Family Independence Program (FIP) benefits on December 20, 2013.
- On December 23, 2013, the D epartment sent the Claimant a
 Verification Checklist (DHS-3503) requesting that the Claimant provide
 verification of her residential address, her child's attendance in s chool, and the
 balance of her checking account by January 2, 2014.
- 4. On December 23, 2013, the Department sent the Clai mant notice that she had been scheduled for an in-person appointment to take place on January 2, 2014, to discuss the Claimant's application for benefits.

- 5. On January 13, 2014, the D epartment notified the Cla imant that it would c lose her Food Assistance Program (FAP) be nefits and had deni ed her Family Independence Program (FIP) application.
- 6. The Department received the Claimant's request for a hearing on January 23, 2014, protesting the closure of her Food Assistance Program (FAP) benefits and denial of her Family Independence Program (FIP) application.

CONCLUSIONS OF LAW

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Depar tment (formerly known as the Family Independenc e Agency) administers FIP pursuant to MC L 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 Fam ily 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 el igibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130. The Department uses documents, collateral contacts, or home calls to verify information. BAM 130. A 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 Food Ass istance Program (FAP) recipient when she submitted an application for Family I ndependence Program (FIP) benefits. On December 23, 2013, the Department sent the Claimant a Verification Checklist (DHS-3503) requesting that the Claimant provide verification of her residential address, her child's attendance in school, and the balance of her checking account by January 2, 2014. On December 23, 2013, the Department sent the Claimant notice that she had been scheduled for an in-person appointment to take place on January 2, 2014, to discuss the Claimant's application for benefits.

On January 13, 2014, the Department had not received the information it had requested the Claimant provide. The Department then sent the Claimant notice that it would close her Food Assistance Program (FAP) benefits and that it had denied her Family Independence Program (FIP) application for failure to provide the Department with information necessary to determine her eligibility to receive benefits.

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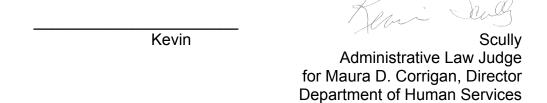
This Administrative Law Judge finds that D epartment policy places a duty on its clients to provide the Department with information that is needed to determine their eligibility to receive benefits. Clients also have a duty to notify the Department of any changes to their circumstances that may affect their eligibility to receive continued benefits, as well as promptly respond to the Department requests for more information.

Therefore, the Department has established that it was ac ting in accordance with policy when it closed the Claimant's Food Assistance Program (FAP) benefits and denied her application to the Family Independence Program (FIP).

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 Food Assistanc e Program (FAP) benefits and denied her Family Independence Program (FIP) application.

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



Date Signed: February 28, 2014

Date Mailed: March 3, 2014

NOTICE OF APP EAL: The claimant may appeal 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 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;

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- 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 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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