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

#### IN THE MATTER OF:

Reg. No.: 2014-19140

Issue No.: Case No.: 2002

Hearing Date: County: April 1, 2014 Macomb(20)

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

#### **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, telephone hearing was held on Tuesday, April 1, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant's and Authorized Representative, Participants on behalf of the Department of Human Services (Department) included HC.

Due to a failure to comply with the verif properly ⊠ close Claimant's case for:	fication requirements, did the Department
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)?	<ul><li>☐ Adult Medical Program (AMP)?</li><li>☐ State Disability Assistance (SDA)?</li><li>☐ Child Development and Care (CDC)?</li></ul>

## 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:

- Claimant ⊠ received: ⊠MA benefits.
- 2. Claimant was required to submit requested verification by December 2, 2013.
- 3. On December 13, 2013, the Department ⊠ closed Claimant's case.
- 4. On December 13, 2013, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
- 5. On December 18, 2013, 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 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.

Additionally, the Claimant was a recipient of MA and the MA savings program. On November 12, 2013, the Department Caseworker sent the Claimant a Redetermination Application, DHS-1010, for written verification to determine continued MA eligibility that was due December 2, 2013. Department Exhibit's 1-4. The Claimant failed to provide the required completed Redetermination Application that was due on December 2, 3013 to the Department. As a result, the Department Caseworker sent the Claimant a notice on December 13, 2013, that MA and the MA savings program would be closing January 1, 2014 due to failure to provide verification. Department Exhibit's 5-11. BEM 105, 130, and 210.

The Department met their burden that the Claimant's MA and the MA savings program cases should be closed because the Claimant failed to provide the required verification to determine continued MA.

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 MA and the MA savings program cases because the Claimant failed to provide the required verification to determine continued MA.

# **DECISION AND ORDER**

Accordingly, the Department's decision is  $\boxtimes$  AFFIRMED.

Carmen G. Fahie

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Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: 4/18/14

Date Mailed: 4/18/14

**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 Claimant;
- 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

### CGF/tb

