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

IN I	HE MATTER OF:		
		Reg. No.: Issue No(s).: Case No.: Hearing Date: County:	201431348 3001 April 10, 2014 Macomb County DHS #20
ADN	INISTRATIVE LAW JUDGE: Kevin Scully		
	HEARING DECIS	SION	
Adm 42 ( notice Part the	owing Claimant's request for a hearing, this ninistrative Law Judge pursuant to MCL 400.9 CFR 431.200 to 431.250; 45 CFR 99.1 to 99 ce, a telephone hearing was held on Aprilicipants on behalf of Claimant included Department of Human Services (Department) held simultaneously with a debt collection hear	and 400.37; 7 CF 0.33; and 45 CFF 10, 2014, from . Part included	R 273.15 to 273.18; R 205.10. After due Lansing, Michigan. icipants on behalf of . This hearing
	<u>ISSUE</u>		
	Claimant receive an overissuance of progr led to recoup?	am benefits that	the Department is
	FINDINGS OF FA	<u>ACT</u>	
The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:			
1.	Claimant received benefits for:		
	☐ Family Independence Program (FIP). ☐ Food Assistance Program (FAP). ☐		Assistance (SDA). nent and Care (CDC).
2.	The Department determined that Claimant red ☐ FIP ☐ FAP ☐ SDA ☐ CDC overissuand period of October 1, 2011, through September	ce in the amount	of \$ during the
3.	The overissuance was due to 🛛 Departmen	nt error.	nt error.
4.	On February 25, 2014, the Department ser	nt notice of the	overissuance and a

repayment agreement to Claimant/Claimant's Authorized Representative (AR).

5. On March 10, 2014, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's recoupment 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 State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1119b. 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 400.31513180.
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 400.50015020.

An agency error is caused by incorrect actions (including delayed or no action) by the Department of Human Services (Department) staff or Department processes. Some examples are:

- Available information was not used or was used incorrectly.
- Policy was misapplied.
- Action by local or central office staff was delayed.
- Computer errors occurred.
- Information was not shared between department divisions such as services staff.
- Data exchange reports were not acted upon timely (Wage Match, New Hires, BENDEX, etc.). Department of Human Services Bridges Administrative Manual (BAM) 705 (July 1, 2012).

The amount of the overissuance is the benefit amount the group actually received minus the amount the group was eligible to receive. BAM 705.

### 201431348/KS

In this case, the Department has established that it did not account for all Retirement, Survivors, and Disability Insurance (RSDI) benefits received by group members when it determined their eligibility for the Food Assistance Program (FAP).

The Claimant testified that the overissuance was already collected by the Social Security Administration when it issued her an award of retroactive Supplemental Security Income (SSI) benefits.

However, the amount withheld by the Social Security Administration was to reimburse the Department for State Disability Assistance (SDA) already received, and not Food Assistance Program (FAP) benefits issued due to the Department's error.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, the Administrative Law Judge concludes that Claimant			
<ul> <li>☑ did receive an overissuance for ☐ FIP ☑ FAP ☐ SDA ☐ CDC benefits in the amount of \$ that the Department is entitled to recoup.</li> <li>☐ did not receive the overissuance for which the Department presently seeks recoupment.</li> </ul>			
DECISION AND ORDER			

Accordingly, the Department's action seeking recoupment is:

**AFFIRMED**.

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

Date Signed: April 15, 2014

Date Mailed: April 15, 2014

#### 201431348/KS

**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

## KS/hj

cc: