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

IN THE MATTER OF:



Reg. No.: 2014-34247

Issue No.: 1002

Case No.: Hearing Date:

County:

May 1, 2014 Genesee #6

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 Thursday, May 1, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included HF.

<u>ISSUE</u>

Due to a failure to comply with the verif properly ⊠ close Claimant's case for:	ication requirements, did the Departmen
☐ Family Independence Program (FIP)?☐ Food Assistance Program (FAP)?☐ Medical Assistance (MA)?	☐ Adult Medical Program (AMP)?☐ State Disability Assistance (SDA)?☐ 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:

- Claimant ⊠ received: ⊠FIP benefits.
- 2. Claimant was required to submit requested verification by February 10, 2014.
- 3. On February 11, 2014, the Department ⊠ closed Claimant's case.
- 4. On February 11, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.

 On March 25, 2014, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's action for the FIP closing.

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.

Additionally, the Claimant was a recipient of FIP. On January 31, 2014, the Department Caseworker sent the Claimant a Verification Checklist for written verification that the Claimant was still at the same address that was due February 10, 2014. Department Exhibit's 14-15. The Claimant failed to provide the required verification of her sent the Claimant notice on February 11, 2014, that FIP and FAP would be closing effective March 1, 2014 due to failure to provide verification. Department Exhibit 7-15. BEM 220. BAM 115 and 130.

During the hearing, the Claimant stated that she is still in the house at the She doesn't know why her mail is being returned. The Claimant was not aware that her mail was being returned to the Department until her case for FIP closed. Her phone number was still valid, but the Department Caseworker did not call her. She reapplied for benefits during the first week of April 2014. The Department Caseworker stated that the Claimant's mail is still being returned. The Department needs to initiate a FEE investigation to make sure that the Claimant is at the stated address. In addition, the Claimant may have to get a if her mail continues to be returned to the Department as "moved, unable to forward".

Therefore, the Department has not met their burden because the Claimant was not aware that her mail was being returned to the Department and the Department Caseworker could have called her because her number was the same and available to the Department.

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 \boxtimes did not act in accordance with Department policy when it closed the Claimant's FIP case because her mail from the Department was being returned even though the Department had a working phone number for the Claimant.

DECISION AND ORDER

Accordingly, the Department's decision is \boxtimes REVERSED.

- 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. Initiate a redetermination of the Claimant's eligibility for FIP by determining that the Claimant is residing at that address through a FEE investigation. If the FEE investigation proves that the Claimant is at that address, then restore FIP benefits lost for the month of March 2014.
 - 2. Provide the Claimant with written notification of the Department's revised eligibility determination.
 - 3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if any.

Carmen G. Fahie

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

Date Signed: <u>5/20/14</u>

Date Mailed: 5/21/14

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

