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

IN THE MATTER OF:											
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	14-004539 2002; 3002 July 23, 2014 SAGINAW (73)									
ADMINISTRATIVE LAW JUDGE: ROBERT J. CHAVEZ											
HEARING DECIS	SION										
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, an in-person hearing was held on July 23, 2014, from Saginaw, Michigan. Participants on behalf of Claimant included and and Participants on behalf of the Department of Human Services (Department) included Hearings Facilitator.											
ISSUE											
Due to a failure to comply with the verification properly \boxtimes deny Claimant's application \boxtimes close 6 benefits for:											
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? (CDC)? ☐ Medical Assistance (MA)?		/ Assistance (SDA)? opment and Care									
FINDINGS OF FA	<u>ACT</u>										
The Administrative Law Judge, based upon the evidence on the whole record, including testimony											
Claimant ⊠ applied for ⊠ received: □FIP ⊠FAP ⊠MA □SDA □CD0 benefits.											

Claimant was required to submit requested verification by March 31, 2014 for FAP benefits, and May 9, 2014 for a Healthy Michigan Plan application.

On March 31, 2014 for FAP and May 13, 2014, the Department
denied Claimant's application.
☐ closed Claimant's case.
reduced Claimant's benefits.

- 4. On April 4, 2014 and May 13, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
- 5. On May 8, 2014, 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 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 273. The Department
(formerly known as the Family Independence Agency) administers FAP pursuant to
MCL 400.10, the Social Welfare Act, MCL 400.1119b, and Mich Admin Code, R
400.3001 to .3015.

Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

Additionally, with regard to claimant's FAP benefit closure, claimant testified that he had returned the documents in question. There was no dispute that the documents in question were needed to determine eligibility. Claimant specifically testified that the documents were returned on March 27, 2014, and that claimant had signed the DHS logbook when dropping off the documents.

No such documents were found in the claimant's file, and a review of the logbook for March 27, 2014 does not reveal claimant's signature. Therefore, as there is no evidence that claimant returned the verifications in question, the undersigned holds that the Department properly closed claimant's FAP benefits.

With regards to the denial of claimant's HMP application, BAM 130 states that verifications can be required when required by policy.

The form that claimant was required to return appeared to ask questions regarding assests and income, which should have already asked by the application in question.

However, the undersigned notes that as of yet, there does not appear to be published policy or procedures with regards to HMP. The undersigned cannot make a definitive determination as to whether the form in question, the DHS-1004, is required by policy, what triggers the sending of the form, or what the time limit is for returning such a form. The Department representative was not able to offer substantive information with regards to this form, though the representative could not be faulted, given that there does not appear to be policy with regards to HMP requirements.

Therefore, as the undersigned is unable to make a determination as to what information claimant was required by policy to return with regards to HMP, as there is no published policy available, the undersigned holds that the Department improperly required claimant to provide verification, in violation of BAM 130, and the application in question should be reprocessed.

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	acted	in a	accorda	nce	with D	epa	artment p	olicy	whe	n it clo	osed	claima	ant'	s FA	P bene	efits.
\boxtimes	failed	to	satisfy	its b	ourden	of	showing	that	it ac	cted in	acc	ordan	ce	with	Depai	rtment
	policy	wł	nen it de	enied	d claima	ant'	's HMP a	pplic	ation	١.						

DECISION AND ORDER

Accordingly, the Department's decision is

\boxtimes	AFFIRMED	IN PART	with	respect to	FAP	benefits	and	REVERSED	IN	PART	with
	respect to H	MP benefi	ts.								

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	ACC	ORDAN	NCE W	ITH [DEPAR	TMEN [®]	T PO	DLICY	AND	CON	ISIS	ΓENT	WITH	THIS
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1. Reprocess claimant's March 31, 2014 HMP application.

WI GM

ROBERT J. CHAVEZ

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

Date Signed: August 5, 2014
Date Mailed: August 5, 2014

RJC/tm

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration 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 party requesting a rehearing or reconsideration 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 this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, 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

