

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

**IN THE MATTER OF:**



Reg. No.: 14-005396  
Issue No.: 3002  
Case No.:   
Hearing Date: July 30, 2014  
County: DHS SSPC-WEST

**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, a telephone hearing was held on Wednesday, July 30, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included , HF.

**ISSUE**

Due to a failure to comply with the verification requirements, did the Department properly  deny Claimant's application  close Claimant's case  reduce Claimant's benefits for:

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)?        | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP)? | <input type="checkbox"/> Child Development and Care (CDC)?  |
| <input type="checkbox"/> Medical Assistance (MA)?                  |   |

**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:

1. Claimant  applied for:  FAP benefits.
2. Claimant was required to submit requested verification by May 8, 2014.
3. On May 12, 2014, the Department  denied Claimant's application.

4. On May 12, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
5. On June 18, 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 400.1-.119b, and Mich Admin Code, R 400.3001 to .3015.

Additionally, the Claimant applied for FAP on April 15, 2014. On April 28, 2014, the Department Caseworker sent the Claimant a Verification Checklist for written verification of that was due May 8, 2014. Department Exhibit 6-7. The Claimant failed to provide the required verification of her asset verifications of her [REDACTED] and [REDACTED] that was due on May 8, 2014. As a result, the Department Caseworker sent the Claimant a notice on May 12, 2014 that her FAP application would be denied effective April 15, 2014 due to failure to provide verification. Department Exhibit 10-11. BEM 400. BAM 115, 130, and 600.

During the hearing, the Claimant stated that she had sent the requested information by [REDACTED]. The current Department Caseworker checked with other workers, but no one had the verifications. The Department Caseworker requested that the Claimant send the proofs directly to her during the meaningful prehearing conference on July 1, 2014, but at the date of this hearing the Claimant has failed to submit the required proofs to determine eligibility for FAP. The Claimant was given additional time by this Administrative Law Judge of July 31, 2014 to provide the required proofs. On July 31, 2014, the Claimant faxed a [REDACTED]. Department Exhibit A-C. The Department should be able to process the Claimant's FAP eligibility retroactive to her application date of April 15, 2014.

The Department met their burden that the Claimant's FAP case can now be processed since the required verifications have been submitted to her Department Caseworker.

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 agreed to reprocess the Claimant's FAP applications because the Claimant testified credibly that she had submitted the required verification previously and resubmitted the required verifications so that FAP eligibility could be determined retroactive to [REDACTED].

**DECISION AND ORDER**

Accordingly, the Department's decision is  AFFIRMED.

*Carmen G. Fahie*

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Carmen G. Fahie  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: **8/8/2014**

Date Mailed: **8/8/2014**

**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 Claimant;
- 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

CGF/tb

cc:

