

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

IN THE MATTER OF:

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████████████████████
████████████████████

Reg. No.: 14-008684
Issue No(s): 2002;3000
Case No.: ██████████
Hearing Date: September 8, 2014
County: Wayne (41)

ADMINISTRATIVE LAW JUDGE: Zainab Baydoun

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 September 8, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included ██████████
██████████

ISSUE

Did the Department properly process Claimant's Food Assistance Program (FAP) and Medical Assistance (MA) benefits?

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. Claimant's FAP case closed in 2013 and Claimant did not submit a new application for FAP benefits subsequent to the closure.
2. Claimant was an ongoing recipient of MA benefits.
3. On April 16, 2014, the Department sent Claimant a Wage Match Client Notice (Wage Match) seeking verification of a group member's employment ██████████ ██████████ by May 16, 2014. (Exhibit 1)
4. On May 23, 2014, the Department sent Claimant a Health Care Coverage Determination Notice informing her that effective July 1, 2014, she would be

ineligible for MA benefits on the basis that she is not under age 21, pregnant, or a caretaker of a minor child in her home, that she is not over age 65, blind or disabled. The Notice also stated that Claimant was ineligible on the basis that she failed to verify or allow the Department to verify information necessary to determine eligibility for MA. (Exhibit 2)

5. On August 5, 2014, Claimant submitted a hearing request disputing the Department's actions with respect to her FAP and MA cases.

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), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

FAP

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.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 400.901 through R 400.951. Rule 400.903(1) provides as follows:

An opportunity for a hearing shall be granted to an applicant who requests a hearing because [a] claim for assistance is denied or is not acted upon with reasonable promptness, and to any recipient who is aggrieved by a Department action resulting in suspension, reduction, discontinuance, or termination of assistance.

A request for hearing must be in writing and signed by the claimant, petitioner, or authorized representative. Rule 400.904(1). Moreover, the Department of Human Services Bridges Administrative Manual (BAM) 600 (July 2014), p. 6, provides in relevant part as follows:

The client or authorized hearing representative has *90 calendar days from the date of the written notice of case action to request a hearing*. The request must be received anywhere in DHS within the 90 days. [Emphasis added.]

In this case, the Department testified and Claimant confirmed that her FAP case closed in 2013 and that she has not received FAP benefits since the case closure. Claimant stated that she did not submit a new application for FAP benefits after her case closed and that she did not request a hearing prior to the one submitted on August 5, 2014.

Because Claimant's FAP case closed in 2013, she was not an active and ongoing recipient of FAP benefits, and because she had not submitted an application for FAP prior to her filing of a hearing request, the Department had neither determined Claimant's eligibility for FAP nor had the Department taken any negative action with respect to Claimant's FAP benefits prior to her hearing request; therefore, Claimant's hearing request with respect to FAP is **DISMISSED** for lack of jurisdiction. BAM 600 (July 2014).

MA

The 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.

The Department routinely matches recipient employment data with the Michigan Department of Energy, Labor & Economic Growth Unemployment Insurance Agency (UIA) through computer data exchange processes. These data exchanges assist in the identification of potential current and past employment income. BAM 802 (December 2013), p 1. When there is a discrepancy between the wage match information and the client's work history stated on an application or other information in the client's case record, the Department must request verification from the client by sending a Wage Match Client Notice (Wage Match). BAM 802, p. 2. If verifications are not returned by the 30th day, the case will close for a minimum of 30 days after appropriate actions are taken in the Department's system unless the client returns verifications. BAM 802, p 2.

In this case, the Department testified that because it became aware via a wage match that a member of Claimant's FAP group had unreported earned income from ██████████ it sent Claimant a Wage Match, requesting that she submit verification of the earned income and employment by May 16, 2014. (Exhibit 1). The Department testified that because it did not receive the requested verifications by the due date and because it did not receive any communications from Claimant indicating an inability to submit the requested verifications, on May 23, 2014, it sent Claimant a Health Care Coverage Determination Notice informing her of the closure of her MA case effective July 1, 2014. (Exhibit 2).

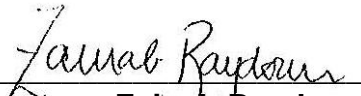
At the hearing, Claimant confirmed that she received the Wage Match and stated that she did not understand what information was being requested of her. Claimant confirmed that a group member is employed ██████████ and that he is earning income.

Claimant further testified that although she did not submit the completed Wage Match, she submitted pay stubs verifying the employment and income to the Department, as the Wage Match indicates pay stubs were sufficient verification. Claimant stated that she dropped off the paystubs to the local Department office within the time frame allotted and signed her name to the log. Claimant could not recall the exact date or date range in which she submitted the paystubs, so the logs were not reviewed at the hearing.

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 because the Department did not receive a completed Wage Match or other proof of employment and income by the due date, the Department acted in accordance with Department policy when it closed Claimant's MA case effective July 1, 2014.

DECISION AND ORDER

Accordingly, the hearing request with respect to FAP is DISMISSED and the Department's MA decision is AFFIRMED.



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

Date Signed: September 12, 2014

Date Mailed: September 12, 2014

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides or has its principal place of business in the State, 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.

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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

ZB/tlf

cc: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]