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

IN THE MATTER OF:



Reg. No.: 14-008844

Issue No.: 3002

Case No.:

Hearing Date:

September 10, 2014

County: WASHTENAW (DISTRICT 20)

ADMINISTRATIVE LAW JUDGE: Carmen 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, September 10,2014, from Lansing , Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included Isan, APW and Isan, APW

<u>ISSUE</u>

Due to a failure to comply with the verification requirements, did the Department properly reduce Claimant's benefits for Food Assistance Program (FAP)?

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 FAP benefits.
- 2. Claimant was required to submit requested verification by July 7, 2014.
- 3. On July 9, 2014, the Department reduced Claimant's benefits.
- 4. On July 9, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
- 5. On July 21, 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	Departm	nent	of	Human	Services	Bridges
Administrativ	e Manua	I (BA	M), Depart	tme	ent of	Human	Serv	ices	Bridges	Eligibility	Manual
(BEM), and [Departme	ent of	Human Se	ervi	ces F	Referenc	e Tal	bles	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 was a recipient of FAP. On June 25, 2014, the Department Caseworker sent the Claimant a Verification Checklist for written verifications that were due Department Exhibit 33-34. The Claimant failed to provide the required verifications that were due on Sent the Claimant a notice that FAP would be reduced on Provide verification. Department Exhibit 35-37. Subsequently, the Claimant submitted the required verifications, which resulted in an increase in FAP to \$100.000.

The Department met their burden that the Claimant's FAP benefits should be reduced because the Claimant failed to provide the required verifications to determine continued FAP eligibility.

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 reduced the Claimant's FAP benefits for failure to provide the required verifications to determine continued eligibility for FAP.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

Carmen Fahie

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

Carmon II. Lahie

Date Signed: 9/23/2014

Date Mailed: 9/23/2014

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 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

CGF / tb

