

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 14-008800  
Issue No.: 2002; 3002  
Case No.: [REDACTED]  
Hearing Date: September 09, 2014  
County: DHS SSPC-WEST

**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 3-way telephone hearing was held on Tuesday, September 09, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant and his

[REDACTED]  
Participants on behalf of the Department of Human Services (Department) included [REDACTED] HF.

**ISSUE**

Due to a failure to comply with the verification requirements, did the Department properly deny Claimant's application for Food Assistance Program (FAP)? 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 and MA benefits.
2. Claimant was required to submit to a telephone interview on June 27, 2014.
3. On July 21, 2014, the Department denied Claimant's application.
4. On July 21, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) notice of its action.
5. On July 24, 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.

☒ 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.

Additionally, the Claimant applied for FAP and MA. On June 20, 2014, the Department Caseworker sent the Claimant an Appointment Notice, DHS 170, for a telephone interview. Department Exhibit 10. In addition, the Claimant was sent a Verification Checklist, DHS 3503 and a Health Care Coverage Supplemental Questionnaire for written verifications that were due [REDACTED]. Department Exhibit 11-12 and 7-9. The Claimant failed to complete the required phone interview on [REDACTED] where the Department Caseworker called at 8:30 a.m. and left a message. Department Exhibit 6. She called again on [REDACTED], but was unable to leave a message. Department Exhibit 6. As a result, the Department Caseworker sent the Claimant a notice that the Claimant's FAP application was denied for failure to submit to a telephone interview, but MA was approved. Department Exhibit 14-19. BEM 163 and 220. BAM 115, 130, and 600. MSA 13-35.

During the hearing, the Claimant stated that he was at home waiting for the call, but did not receive a call from his Department Caseworker on [REDACTED]. After he did not receive a call, he called his Department Caseworker and left a message. The Claimant's authorized representative and the Claimant stated that he had called the Department Caseworker every day and left a message. The Department did not present the Department's [REDACTED]. Therefore, this Administrative Law Judge finds that the Department has not met its burden that it correctly followed policy in determining the Claimant's eligibility for benefits.

The Department has not met their burden that the Claimant's FAP application should be denied because the Claimant failed to submit to a telephone interview required to determine FAP eligibility. The Claimant was approved for full MA.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it could not produce the Department Caseworker phone logs to determine whether or not the Claimant or his authorized representative or the Department Caseworker called, which resulted in the denial of the Claimant's FAP application.

### **DECISION AND ORDER**

Accordingly, the Department's decision is 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 FAP retroactive to [REDACTED] by sending out a new Appointment Notice, DHS 170, for a telephone interview, with a copy to [REDACTED], the Claimant's authorized representative.
2. Provide the Claimant and his authorized representative 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.



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

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

cc:

