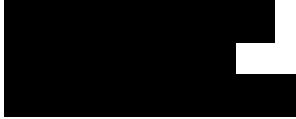


**STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES**

IN THE MATTER OF:



Reg. No.: 201421537
Issue No(s): 1011, 2011
Case No.: [REDACTED]
Hearing Date: April 15, 2014
County: Macomb County DHS #20

ADMINISTRATIVE LAW JUDGE: Gary F Heisler

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 April 15, 2014, from Lansing, Michigan. Participants on behalf of Claimant included herself. Participants on behalf of the Department of Human Services (Department) included JET C/M [REDACTED] and Lead CSS [REDACTED].

ISSUE

Did the Department properly close Claimant's Family Independence Program and Medical Assistance for failure to cooperate with the Office of Child Support?

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 was an ongoing recipient of Medical Assistance and Family Independence Program benefits.
2. On November 13, 2013, the Office of Child Support placed Claimant in non-cooperation status because she had not responded to a contact letter sent September 22, 2013 and October 25, 2013.
3. On December 7, 2013, Claimant was sent a Notice of Case Action (DHS-1605) which stated her Medical Assistance would close due to non-cooperation with Office of Child Support.

4. On December 13, 2013, Claimant provided information to the Office of Child Support which could not be verified or used to locate the non-custodial parent of Claimant's child. Claimant remained in non-cooperation status.
5. On December 27, 2013, Claimant submitted a hearing request.

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).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131.

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105.

In this case Claimant has provided some information but none of it can be verified as accurate or used to locate the non-custodial parent. Claimant asserts she has told OCS everything she knows about him. Bridges Eligibility Manual (BEM) 255 (2013) page 9 includes "providing all know information about the absent parent" in the definition of cooperation.

Claimant told the OCS that while she was living with a relative in California for about 1 year when she met the non-custodial parent. His name is [REDACTED], he lived next door to Claimant's relative, was 28 years old with a birthday of August 25. Claimant also stated she moved back to Michigan before the child was born and the last contact with the non-custodial parent was 4 months after the baby was born. Claimant asserts she is no longer in contact with the relative she lived with and has no way to get ahold of the relative.

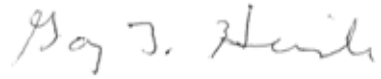
The circumstance Claimant describes, living next door to someone while having an intimate relationship, does not credibly support such a small and unverifiable amount of information. This Administrative Law Judge is not convinced that Claimant has provided all know information about the non-custodial parent.

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 closed Claimant's Family Independence Program and Medical Assistance for failure to cooperate with the Office of Child Support.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED**.



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

Date Signed: May 7, 2014

Date Mailed: May 7, 2014

NOTICE OF APPEAL: The claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

A Request for Rehearing or Reconsideration may be granted 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 Department, AHR or the claimant 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 the hearing decision is mailed.

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

201421537/GFH

GFH/hj

cc:

