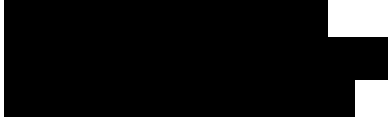


**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES**

**IN THE MATTER OF:**



Reg. No.: 201423775  
Issue No.: 3002; 5004  
Case No.: [REDACTED]  
Hearing Date: February 20, 2014  
County: Kalamazoo

**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, telephone hearing was held on Thursday, February 20, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED], ES.

**ISSUE**

Did the Department properly process Claimant's request for State Emergency Relief (SER) assistance with shelter emergency?

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

**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. On August 16, 2013, Claimant applied for SER assistance with shelter emergency.
2. Claimant applied for FAP benefits.
3. On January 9, 2014, the Department approved the Claimant's FAP benefits.

4. On January 9, 2014, the Department sent Claimant notice of its action.
5. On January 16, 2014, Claimant 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 271.1 to 285.5. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.

The State Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1-.119b. The SER program is administered by the Department (formerly known as the Family Independence Agency) pursuant to MCL 400.10 and by Mich Admin Code, R 400.7001 through R 400.7049. Department policies are found in the Department of Human Services State Emergency Relief Manual (ERM).

Additionally, the Claimant applied for FAP and SER. Department Exhibit 51-55 and 5-20. The Department did not submit a verification checklist or a SER budget and notice as part of the hearing packet. On January 9, 2014, the Department Caseworker sent the Claimant a notice that FAP was approved. Department Exhibit 43-50. The Department failed to provide manual items used in taking this action.

During the hearing, the Claimant stated that her landlord had still not been paid by the Department for her SER even though she had been approved. The Department Caseworker stated the Claimant's check was still pending and that it had been returned because it had been sent to the wrong address. The Accounting Department was going to resend the check out today to the landlord with the correct address.

In addition, the Claimant's rent is not [REDACTED] as started in the hearing notice. She moved, but her son paid her first month on his credit card. As a result, the landlord would not give her verification because her room was in her son's name.

The Department has not met their burden that the Claimant's FAP case should be reduced. The Department is sending a new check for SER to the Claimant's landlord.

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

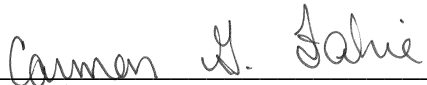
satisfy its burden of showing that it acted in accordance with Department policy when it did not get the correct shelter verification amount for FAP benefits.

**DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED IN PART with respect to SER and REVERSED IN PART with respect to FAP.

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 by sending a DHS-3503 for the Claimant to provide verification of shelter expense retroactive to December 2013.
2. Provide the Claimant with written notification of the Department's revised eligibility determination.
3. Issue the Claimant any retroactive benefits she may be eligible to receive.

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

Date Signed: February 27, 2014

Date Mailed: February 27, 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.

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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

CGF/aca

cc:

