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

IN THE MATTER OF:

Reg. No.: 14-016739

Issue No.: 1004; 2004; 3008; 5000; 6000

Case No.:

Hearing Date: January 05, 2015

County: WAYNE PATH TO POTENTIAL

ADMINISTRATIVE LAW JUDGE: Robert Chavez

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 January 5, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Participants on behalf of the Department of Human Services (Department) included Successive Coach, Pathways to Potential.

ISSUE

Did the Department properly process Claimant's FIP, CDC and MA application?

Did the Department properly allot Claimant's FAP benefits?

FINDINGS OF FACT

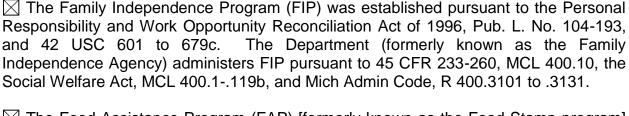
The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

- 1. Claimant applied for FIP, MA, and CDC benefits in August 18.
- 2. While the CDC application was processed, Claimant's FIP application was not processed, and Claimant's MA application was not processed fully.
- 3. Claimant's earned income decreased on October 17, 2014.
- 4. Claimant reported this decrease to the Department on November 18, 2014.
- 5. Claimant's FAP benefits did not increase until December, 2014.

- 6. On August 26, 2014, Claimant was sent a Health Care Coverage Determination notice that approved MA coverage for some members of her family, but not for the Claimant or two others.
- 7. On November 18, 2014, Claimant requested a hearing.

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 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.

∑ The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, 42 USC 601-619, 670-679c, and 1397-1397m-5; the Child Care and Development Block Grant of 1990, PL 101-508, 42 USC 9858 to 9858q; and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193. The program is implemented by 45 CFR 98.1-99.33. The Department administers the program pursuant to MCL 400.10 and provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.5001-.5020.

☐ 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 Mich Admin Code, R 400.7001 through R 400.7049.

Claimant stated during the hearing that she had no grievance with regard to the SER program. As such, the request for hearing with regard to the SER program is DISMISSED.

With regards to the FIP, MA, and CDC application, the Department could not testify either way as to whether the Claimant applied for benefits in these programs, and for who benefits were applied. The Department could not locate the application in question. Given that Claimant received a Health Care Coverage Determination Notice was sent to the Claimant in August, 2014, the undersigned finds it credible that Claimant made an application of some kind during that month; Claimant testified that she applied for FIP, MA, and CDC, and as the Department is unable to dispute the testimony, the undersigned finds this testimony credible.

Furthermore, the undersigned finds it highly unlikely that Claimant would apply for only some members of her family with regards to MA, and not two other members (both children) and herself. However, the determination notice sent to the Claimant conspicuously omits Claimant herself, as well as two members of her household. Thus, the undersigned finds Claimant's testimony that her MA application was not fully processed credible.

With regard to the CDC application, it appears that the application in question was processed.

As such, the undersigned holds that the Department has failed to meet its burden of proof in showing that the Claimant failed to apply for FIP or failed to apply for herself and two other members of the group; the Department must reprocess Claimant's MA application for all members of her household, and process an application for FIP. If this application has been lost, the Department should attempt to reconstruct the application.

With regards to FAP benefits, Claimant testified that her income changed in October, 2014. However, Claimant admits that the change was not reported until November 18, 2014. Per BAM 220, a change that results in an increase in benefits does not take effect until the first allotment that occurs 10 days after the change was reported.

In the current situation, that would be the December FAP allotment. Therefore, as the Department changed Claimant's FAP allotment in December, 2014, the Department's actions with regards to the FAP case were correct.

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 changed Claimant's FAP allotment in December, 2014 and processed Claimant's CDC application.

A failed to satisfy its burden of showing that it acted in accordance with Department policy when it did not process Claimant's FIP application and did not process Claimant's MA application of August, 2014 for all group members.

DECISION AND ORDER

Accordingly, the Department's decision is

- AFFIRMED IN PART with respect to FAP benefits and CDC benefits and REVERSED IN PART with respect to FIP and MA benefits.
- 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. Reprocess Claimant's MA application of August, 2014 for all members Claimant's benefit group.
- 2. Process Claimant's FIP application of August, 2014 and reconstruct the application in question if necessary.

Robert Chavez

Administrative Law Judge for Nick Lyon, Interim Director Department of Human Services

Date Signed: 1/15/2015

Date Mailed: 1/15/2015

RJC / tm

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 <u>MAY</u> 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 48909-8139

