

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

**IN THE MATTER OF:**

[REDACTED]

MAHS Reg. No.: 15-017762  
Issue No.: 2001; 3001; 6001  
Agency Case No.: [REDACTED]  
Hearing Date: November 17, 2015  
County: Ingham

**ADMINISTRATIVE LAW JUDGE:** Carmen G. Fahie

**HEARING DECISION**

Following Petitioner'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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on November 17, 2015, from Lansing, Michigan. The Petitioner was represented by her domestic partner and authorized representative, [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], Hearing Facilitator.

**ISSUE**

Did the Department properly determine the Claimant's eligibility for Food Assistance Program (FAP), Medical Assistance (MA) and Child Care Development Care (CDC)?

**FINDINGS OF FACT**

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

1. On August 3, 2015, the Claimant applied for FAP, MA, and CDC. Department Exhibit 3-39.
2. On September 2, 2015, the Department Caseworker sent the Claimant a Verification Checklist, DHS 3503, for additional verification that was due September 14, 2015. Department Exhibit 60-61.
3. On September 2, 2015, the Department Caseworker sent the Claimant a Quick Note, DHS 100, stating that the Claimant had been approved for FAP and that her daycare was pending proof of hourly rate and new child care provider verification. Department Exhibit 62.

4. On September 16, 2015, the Department Caseworker sent the Claimant a denial notice for MA for failure to provide verification. Department Exhibit 67-69.
5. On September 16, 2015, the Department Caseworker sent the Claimant a denial notice for CDC for failure to provide verification. The Department Caseworker wrote that the Claimant's employer at Secretary of State, were able to complete the verification of employment. Department Exhibit 70-75.
6. On September 25, 2015, the Department received a hearing request from the Claimant, contesting the Department's negative action.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Health and Human Services Bridges Administrative Manual (BAM), Department of Health and Human Services Bridges Eligibility Manual (BEM), Department of Health and Human Services Reference Tables Manual (RFT), and Department of Health and Human Services Emergency Relief Manual (ERM).

The Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food and Nutrition Act of 2008, 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 Department of Human Services) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001-.3011.

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 Department of Human Services) 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.

In this case, the Claimant applied for FAP, MA, and CDC on August 3, 2015. Department Exhibit 3-39. On September 2, 2015, the Department Caseworker sent the Claimant a Verification Checklist, DHS 3503, for additional verification that was due September 14, 2015. Department Exhibit 60-61. On September 2, 2015, the Department Caseworker sent the Claimant a Quick Note, DHS 100, stating that the

Claimant had been approved for FAP and that her daycare was pending proof of hourly rate and new child care provider verification. Department Exhibit 62. On September 16, 2015, the Department Caseworker sent the Claimant a denial notice for MA for failure to provide verification. Department Exhibit 67-69. On September 16, 2015, the Department Caseworker sent the Claimant a denial notice for CDC for failure to provide verification. The Department Caseworker wrote that the Claimant's employer at Secretary of State, were able to complete the verification of employment. Department Exhibit 70-75. BAM 105, 115, 130, 200, 210, and 220. BEM 400, 500, 554, 556, and 703.

During the hearing, the Claimant's Domestic Partner stated that they had submitted the required documentation several times. After uploading on the system and the Department not receiving it, they mailed it. They thought the employment verification was received based on the Department Caseworker's statement on the denial notice. According to the Hearing Facilitator, the Claimant was missing employment verification from her employment at SOS and DHS 4025 for the Holt Public School. There seemed to be some confusion because the Domestic Partner said that they provided the DHS 4025 repeatedly, but the Department still did not receive it. The Claimant was a new employee and did not have access to the Human Resource System yet. She thought that the Department had received the employment verification. The Claimant and her Domestic Partner were trying to provide the required verification that the Department required.

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 did not act in accordance with Department policy when it failed to clarify for the Claimant what was required to determine eligibility.

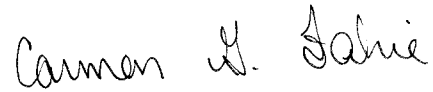
### **DECISION AND ORDER**

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, MA, and CDC retroactive to application date of September 3, 2015 by sending out a new verification checklist for the missing income verification and DHS 4025 for Holt Public Schools.
2. Provide the Claimant 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.

IT IS SO ORDERED:



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**Carmen G. Fahie**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

Date Mailed: **11/20/2015**

CGF/las

**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 copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from 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 48909-8139

cc:

