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

### IN THE MATTER OF:



MAHS Reg. No.: 15-018859

Issue No.: 5001

Agency Case No.:

Hearing Date: December 10, 2015

County: IONIA

**ADMINISTRATIVE LAW JUDGE: Kevin Scully** 

### **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 December 10, 2015, from Lansing, Michigan. Participants on behalf of Claimant included (Hearing Facilitator) represented the Department of Health and Human Services (Department). Witnesses on behalf of the Department included

# <u>ISSUE</u>

Did the Department of Health and Human Services (Department) properly deny the Claimant's request for State Emergency Relief (SER) benefits?

### FINDINGS OF FACT

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

- On August 21, 2015, the Department received the Claimant's application for State Emergency Relief (SER) benefits.
- On August 27, 2015, the Department notified the Claimant that it had approved her State Emergency Relief (SER) application with a \$130 copayment for rent assistance and a \$505 co-payment for assistance with her security deposit.
- 3. On September 3, 3015, the Department received the Claimant's verification that she had made her co-payment.
- 4. On September 8, 2015, the Department denied the Claimant's request for State Emergency Relief (SER) benefits.

5. On September 18, 2015, the Department received the Claimant's request for a hearing protesting the denial of State Emergency Relief (SER) benefits.

## **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 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 Department of Human Services) pursuant to MCL 400.10 and Mich Admin Code, R 400.7001-.7049.

The Department will only authorize SER benefits for relocation assistance where the SER group is homeless, potentially homeless, or meet the requirement of the Rural Homeless Permanent Supportive Housing Initiative (RPSH). Department of Health and Human Services Emergency Relief Manual (ERM) 303 (October 1, 2015), pp 1-2.

In this case, the Claimant applied for SER benefits on August 21, 2015, requesting assistance with relocation. On August 27, 2015, the Department notified the Claimant that it had approved her application.

However, the Claimant had not provided the Department with verification that she had met all the non-financial requirements of receiving those benefits. The Claimant was unable to establish that she was homeless or potentially homeless as defined by ERM 303. The Claimant was able to demonstrate that she had to leave her home due to a licensing violation by her landlord and not a threat to her health or safety.

Although the Claimant relied on the Department's approval letter and made her required co-payments, the Claimant was unable to establish that she met the eligibility criteria to receive SER relocation benefits as defined by ERM 303.

The Claimant has the burden of presenting evidence to establish that she is eligible to receive benefits, and in this case, the Claimant is unable to establish that she is eligible for SER, despite the Department's mistaken assurances of eligibility.

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 denied the Claimant's application for State Emergency Relief (SER) benefits because the Claimant did not meet the non-financial requirements of receiving those benefits.

# **DECISION AND ORDER**

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

Administrative Law Judge

for Nick Lyon, Director

Department of Health and Human Services

Date Signed: 12/16/2015

Date Mailed: 12/16/2015



**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 <u>MAY</u> order a rehearing or reconsideration on its own motion. MAHS <u>MAY</u> 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

