

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 15-010286  
Issue No.: 1011, 6002, 5001  
Case No.: [REDACTED]  
Hearing Date: July 22, 2015  
County: WAYNE-DISTRICT 31

**ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris**

**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; and Mich Admin Code, R 792.11002. After due notice, a 3 way telephone hearing was held on July 22, 2015, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Health and Human Services (Department) included [REDACTED], FIM, and [REDACTED], FIS. A witness, [REDACTED], Lead Child Support Specialist, Office of Child Support also appeared.

**ISSUE**

Did the Department properly deny the Claimant's CDC and FIP Cash Assistance applications due to noncooperation with the Office of Child Support.?

Did the Department properly deny the Claimant's application for SER relocation assistance?

**FINDINGS OF FACT**

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

1. The Claimant was placed in noncooperation with the Office of Child Support (OCS) after she did not respond to several notices regarding her child and the information she had regarding the paternity of the child's father. OCS Exhibit 1
2. The OCS issued a Noncooperation Notice on [REDACTED], placing the Claimant in Noncooperation as of that date. OCS Exhibit 3

3. At the hearing the Claimant provided the OCS with the child's father's name, address, birth date and other information which was sufficient to place the Claimant in cooperation and a Notice of Cooperation to be issued as of the hearing date [REDACTED].
4. The Claimant had previously applied for CDC and FIP but was denied because she failed to cooperate with child support on May 15, 2015 (FIP) and May 3, 2015 (CDC). Exhibit 11
5. The Claimant applied for SER on April 30, 2015 which was denied by the Department on May 4, 2015, for failure to provide a court ordered eviction notice (Exhibit 2). The Department's file contained a Court ordered Eviction Notice, which the Department mistook for an application for a court order. The Department's determination that there was not court ordered eviction was incorrect. Exhibit 1
6. The Claimant requested a hearing on June 11, 2015.

### **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 Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Department of Human Services) administers FIP pursuant to 45 CFR 233-260, MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3101-.3131.

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

In this case, the evidence presented demonstrated that the Claimant had not provided the required information regarding the paternity of her child and cooperated with the OCS prior to the hearing. At the hearing this was corrected. The OCS had not received any information until the hearing. The OCS properly found the Claimant in noncooperation and the Department also properly denied the Claimant's CDC and FIP cash assistance applications because at the time the Claimant was in noncooperation and not eligible for either program. BEM 225 (July 1, 2015)

The Department, also due to an error, misread the verification provided by the Claimant to demonstrate a court ordered eviction and improperly denied the Claimant's SER application for relocation assistance. The Order of Eviction was dated [REDACTED] and was signed by a Judge for 36<sup>th</sup> District Court. Based upon the evidence presented it is determined that the Department improperly denied the Claimant's SER application.

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 CDC and FIP assistance applications and did not act in accordance with Department policy when it denied the Claimant's SER application..

### **DECISION AND ORDER**

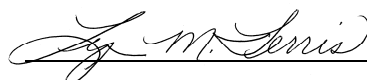
Accordingly, the Department's decision is

**AFFIRMED IN PART** with respect to the denial of the Claimant's CDC and FIP cash assistance applications, and **REVERSED IN PART** with respect to the denial of the Claimant's SER application.

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. The Department shall re register and re process the Claimant's SER application and update the application by requesting written verification of necessary information.

2. The Department shall determine the Claimant's eligibility for SER relocation assistance in accordance with Department policy.



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**Lynn M. Ferris**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

Date Signed: **7/28/2015**

Date Mailed: **7/28/2015**

LMF / hw

**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:

