

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

IN THE MATTER OF:

██████████
██████████
██████████

Reg. No.: 15-011568
Issue No.: 3000;6002
Case No.: ██████████
Hearing Date: August 13, 2015
County: Wayne-District 55

ADMINISTRATIVE LAW JUDGE: Zainab Baydoun

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 telephone hearing was held on August 13, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Health and Human Services (Department) included ██████████, JET Case Manager.

ISSUE

Did the Department properly calculate the amount of Claimant's Food Assistance Program (FAP) benefits and deny her application for Child Development and Care (CDC) 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. On April 21, 2015, Claimant submitted an application for CDC benefits. (Exhibit A; Exhibit D)
2. On April 23, 2015, the Department sent Claimant a Verification Checklist (VCL) instructing her to submit proof of her CDC Provider Assignment by May 4, 2015. (Exhibit B)
3. On May 28, 2015, the Department sent Claimant a Notice of Case Action informing her that her CDC application was denied on the basis that verification of eligible

CDC provider was not returned and because the group does not have a need for CDC benefits. (Exhibit C)

4. On June 8, 2015, Claimant requested a hearing disputing the amount of her FAP benefits and the denial of her CDC application.

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).

FAP

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 hearing was requested to dispute the Department's action taken with respect to the amount of Claimant's FAP benefits. Shortly after commencement of the hearing, Claimant testified that she understood how the Department calculated her FAP benefits and that she was satisfied with the amount. Claimant stated that there was no issue left to be resolved with respect to her FAP benefits. Claimant stated that she no longer needed a hearing concerning her FAP case. Accordingly, Claimant's hearing request with respect to FAP is **DISMISSED**.

CDC

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.

Additionally, verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (October 2014), p.1. To request verification of information, the Department sends a verification checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. Although the client must obtain the required verification, the Department

must assist if a client needs and requests help. If neither the client nor the Department can obtain the verification despite a reasonable effort, the Department is to use the best available information; and if no evidence is available, the Department is to use its best judgment. BAM 130, p. 3.

With respect to CDC cases, clients are given 10 calendar days to provide the verifications requested by the Department. Verifications are considered to be timely if received by the date they are due. BAM 130, pp.6-7. The Department sends a negative action notice when the client indicates a refusal to provide a verification or the time period given has elapsed and the client has not made a reasonable effort to provide it. BAM 130, pp.6- 7. For CDC cases, if the client cannot provide the verification despite a reasonable effort, the Department can extend the time limit at least once. BAM 130, p. 6.

In this case, the Department testified that it denied Claimant's CDC application because she did not timely submit proof of her CDC provider assignment as instructed in the VCL. Claimant testified that she did not receive the VCL because it was sent to her old address on [REDACTED]. Claimant testified that she moved to a new home on [REDACTED] in March 2015 and that in March 2015 that she submitted an online change report to the Department as well as rental receipts confirming her change of address. A review of the VCL shows that it was sent to Claimant's address on [REDACTED] [REDACTED]. (Exhibit B).

However, a review of the application submitted in April 2015 establishes that Claimant listed the [REDACTED] home as the one in which she lives. (Exhibit D). The Department stated that it did not have any record of Claimant's address change to [REDACTED] until May 13, 2015, when Claimant submitted an online application for FAP and MA benefits. The Department stated that after receiving the new FAP and MA applications on May 13, 2015, it updated Claimant's address in the Bridges system and the Notice of Case Action issued on May 28, 2015, was sent to Claimant and her updated home address on [REDACTED]. (Exhibit C). Claimant attempted to explain the discrepancy and why she used her old address on her application, however, the Department established that the VCL was sent to the most recent address that was available at the time the application was submitted.

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 Claimant's CDC application based on a failure to provide verification of an eligible CDC provider assignment. Because the Department properly denied Claimant's CDC application based on a failure to verify, an analysis of the denial based on lack of a valid need reason is no longer necessary.

DECISION AND ORDER

Accordingly, the hearing request with respect to FAP is **DISMISSED** and the Department's CDC decision is **AFFIRMED**.



Zainab Baydoun
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Signed: **8/21/2015**

Date Mailed: **8/21/2015**

ZB / tlf

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:

Administration	Percentage of respondents
Current administration	100%
Previous administration	0%