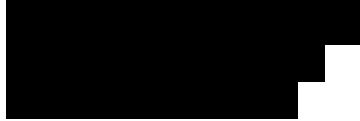


**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**IN THE MATTER OF:**



MAHS Reg. No.: 15-020741  
Issue No.: 1000;2003;3003;6000  
Agency Case No.: [REDACTED]  
Hearing Date: January 04, 2016  
County: WAYNE-DISTRICT 57

**ADMINISTRATIVE LAW JUDGE: Zainab Baydoun**

**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 January 4, 2016, from Detroit, Michigan. Petitioner appeared for the hearing with her friend, [REDACTED] and represented herself. The Department of Health and Human Services (Department) was represented by [REDACTED], Family Independence Manager.

**ISSUE**

Did the Department properly process Petitioner's Family Independence Program (FIP) and Child Development and Care (CDC) benefits and close Petitioner's Medical Assistance (MA) and Food Assistance Program (FAP) cases on the basis that she failed to complete and return a redetermination?

**FINDINGS OF FACT**

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

1. Petitioner was not an ongoing recipient of FIP or CDC benefits and did not submit an application for FIP or CDC benefits prior to her hearing request.
2. Petitioner was an ongoing recipient of FAP and MA benefits.
3. In connection with a redetermination, Petitioner's eligibility for FAP and MA benefits was reviewed.

4. On [REDACTED], the Department sent Petitioner a Redetermination form for her FAP and MA cases that was to be completed and returned to the Department by [REDACTED]. (Exhibit A)
5. A redetermination telephone interview was scheduled for [REDACTED]. (Exhibit A)
6. On [REDACTED], the Department sent Petitioner a Notice of Missed Interview informing her that she had until [REDACTED], to reschedule her FAP redetermination interview, or her ongoing FAP benefits would be denied. (Exhibit B)
7. On [REDACTED], the Department sent Petitioner a Health Care Coverage Determination Notice informing her that effective [REDACTED], her MA case would be closed on the basis that she failed to return the redetermination. (Exhibit C)
8. Petitioner's FAP case closed effective [REDACTED].
9. On [REDACTED], the Department received Petitioner's redetermination form. Petitioner did not submit paystubs or verification of her reported income.
10. On [REDACTED], Petitioner requested a hearing disputing the Department's actions with respect to her FIP, CDC, FAP and MA cases.

### **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).

#### **FIP/CDC**

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.

Petitioner submitted a hearing request disputing the actions of the Department with respect to her FIP and CDC benefits. Soon after commencement of the hearing, Petitioner testified that she was not an active and ongoing recipient of FIP or CDC benefits and that she had not submitted an application for FIP or CDC prior to her filing of a hearing request. Petitioner stated that she later applied for benefits and was denied after submitting the request for hearing. However, because the Department had neither determined Petitioner's eligibility for FIP or CDC nor had the Department taken any negative action with respect to Petitioner's FIP or CDC benefits prior to her hearing request; Petitioner's hearing request with respect to FIP and CDC is **DISMISSED** for lack of jurisdiction. BAM 600 (April 2015), pp.2- 6. Petitioner was informed that she was entitled to submit an application for FIP and CDC benefits and that the Department would determine her eligibility for benefits. Petitioner was further informed that if she disputed a subsequent denial of her application for FIP or CDC benefits, she was entitled to submit a new hearing request to have the matter resolved.

#### **FAP/MA**

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.

Additionally, the Department must periodically redetermine an individual's eligibility for active programs. The redetermination process includes a thorough review of all eligibility factors. BAM 210 (July 2015), p 1. If a FAP client does not begin the redetermination process, the Department will allow the benefit period to expire. The redetermination process begins when the client files a: DHS-1171 Assistance Application; DHS-1010 Redetermination; DHS-1171, Filing Form; or DHS-2063B, Food Assistance Benefits Redetermination Filing Record. BAM 210, p. 2.

A FAP client must also complete an interview. If the client misses the interview, Bridges sends a DHS-254, Notice of Missed Interview. BAM 210, pp. 3-4. Before the Department proceeds with the FAP interview, it must receive the completed

redetermination packet from the client. FAP benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. BAM 210, p 2. If the redetermination packet is not logged in by the last working day of the redetermination month, Bridges will automatically close the FAP case without sending a Notice of Case Action. BAM 210, p.10.

With respect to MA, the Department allows clients a full 10 calendar days from the date the verification is requested (date of request is not counted) to provide all documents and information for MA redeterminations. BAM 210, p.14. For MA cases, benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. BAM 210, p. 2. The Department will provide the client with timely notice of the negative action if the time limit is not met. BAM 210, p.14.

In this case, the Department testified that because it did not receive the completed redetermination form from Petitioner prior to the end of the [REDACTED], certification period, Petitioner's FAP case automatically closed. The Department stated that it also did not receive any contact or communication from Petitioner regarding the redetermination or rescheduling the FAP redetermination interview. The Department testified that on [REDACTED], it sent Petitioner a Health Care Coverage Determination Notice informing her that effective [REDACTED] her MA case be closed due to a failure to return the redetermination. BAM 210, p. 14 (Exhibit C). The Department confirmed receiving Petitioner's completed redetermination form on [REDACTED], but stated that because it was after the due date and her cases already closed, Petitioner was required to reapply per Department policy.

At the hearing, Petitioner confirmed receiving the redetermination forms. Petitioner stated that she called her case worker several times a week before the due date to inform her case worker that she was working and that there were no other changes to report with her case. Petitioner testified that she did not think she had to complete the form and submit it to the Department if she contacted her case worker for the interview. Although Petitioner stated that she contacted the Department after receiving the Notice of Missed Interview to reschedule her appointment, Petitioner confirmed that she did not provide the Department with the completed redetermination until [REDACTED], as her work hours conflicted with the office hours at the Department and she could not make it sooner. Because Petitioner did not return her redetermination until [REDACTED], after the FAP certification period had ended and her MA case closed, the FAP subsequent processing policy is not applicable and Petitioner was required to submit a new application. BAM 210, pp. 18-19

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 closed Petitioner's FAP and MA cases on the basis that she failed to return a redetermination.

**DECISION AND ORDER**

Accordingly, Petitioner's hearing request with respect to FIP and CDC is **DISMISSED** and the Department's FAP and MA decisions are **AFFIRMED**.



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

Date Signed: **1/11/2016**

Date Mailed: **1/11/2016**

ZB / 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:

