



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: December 29, 2016
MAHS Docket No.: 16-015510
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Jacquelyn A. McClinton

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 [REDACTED], from [REDACTED] Michigan. The Petitioner was represented by [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], Assistance Payment Supervisor.

ISSUE

Did the Department properly process Petitioner's State Disability Assistance (SDA) application dated [REDACTED]?

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 [REDACTED], Petitioner applied for SDA disability benefits.
2. On [REDACTED] the Department sent forms to the Petitioner to be completed and submitted on or before [REDACTED].
3. On [REDACTED], the Department sent the required forms to the Medical Review Team (MRT) for processing.
4. As of this date, Petitioner's application is still pending with MRT and a determination has not been made.

5. On [REDACTED], Petitioner filed a hearing request, protesting the Department's failure to process his SDA 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).

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 State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Health and Human Services (formerly known as the Department of Human Services) administers the SDA program pursuant to 42 CFR 435, MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

In the present case, it was not disputed that Petitioner applied for SDA disability benefits on [REDACTED]. Moreover, the Department testified that as of this hearing date, her application is still pending for an MRT decision. The MRT provided Petitioner with a medical appointment date of [REDACTED]. Petitioner acknowledged that she missed the appointment but stated that it was due to medical reasons. The medical appointment has been rescheduled for [REDACTED].

The Department determines eligibility and benefit amounts for all requested programs. BAM 105 (July 2015), p. 17. The Department registers a signed application or filing form, with the minimum information, within one workday for all requested programs. BAM 110 (January 2016), p. 20.

The standard of promptness (SOP) begins the date the department receives an application/filing form, with minimum required information. BAM 115 (July 2016), p. 15. For SDA applications, the Department certifies the program approval or denial of the application within 45 days. *Id.* The Department automatically generates the client notice. *Id.* However, there are exceptions to these benefits programs for processing times, which are described as follows: 60 days for SDA applicants. BAM 115, p. 16. The SOP can be extended 60 days from the date of deferral by the Medical Review Team (MRT). *Id.* Thus, initially, the Department was expected to make an eligibility determination on Petitioner's application on or about [REDACTED] (60-days from the application date). Again, though, policy states that the SOP can be extended 60-days from the date of deferral by MRT; however, the Department failed to present by a

preponderance of evidence that MRT requested additional time to process the application.

DECISION AND ORDER

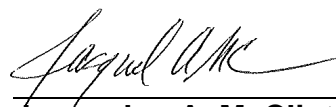
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department failed to satisfy its burden of showing that it properly processed Petitioner's SDA application dated [REDACTED].

Accordingly, the Department's SDA 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. Process Petitioner's SDA application dated [REDACTED];
2. Issue supplements to Petitioner for any SDA benefits he was eligibility to receive but did not from the date of the application; and
3. Notify Petitioner of its decision.

JM/hw



Jacquelyn A. McClinton
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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

DHHS

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]