



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: April 21, 2016
MAHS Docket No.: 16-003214

[REDACTED]
[REDACTED]

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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 April 13, 2016, from Lansing, Michigan. The Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by [REDACTED], Assisted Payments Supervisor and [REDACTED], Eligibility Specialist.

ISSUE

Did the Department properly determine the Petitioner's eligibility for Medicaid (MA) and Food Assistance Program (FAP)?

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 Petitioner was a recipient of FAP and MA with a redetermination due in January 2016.
2. On January 11, 2016, the Department sent the Petitioner a Redetermination Application, DHS 1010, which was due February 3, 2016. Department Exhibit 1-8.
3. On January 28, 2016, the Petitioner submitted his redetermination application to the Department. Department Exhibit 9-19.

4. On January 28, 2016, the Department Caseworker sent the Petitioner a Verification Checklist, DHS 3503, to submit required verification to determine continued eligibility that was due February 8, 2016. Department Exhibit 20.
5. On January 29, 2016, the Department received several verifications from the Petitioner of rent verification, bank account statements, car title, letter from Petitioner, and old medical bills. Department Exhibit 21-29.
6. On February 5, 2016, the Petitioner submitted another copy of his bank statement. Department Exhibit 35-36.
7. On February 6, 2016, another copy of a title for a car. Department Exhibit 33.
8. The Petitioner was approved for Social Security SSI benefits retroactive to March 2013. Department Exhibit 37-45.
9. On February 29, 2016, the Department sent the Petitioner a notice that his FAP case was closed effective March 1, 2016 because the Petitioner did not give proof to your local DHS office. The Petitioner was to review his Verification Checklist to see what was not submitted. Department Exhibit 49-50.
10. On March 8, 2016, the Department received a hearing request from the Petitioner, contesting the Department's negative action.

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 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.

In this case, the Petitioner was a recipient of FAP and MA with a redetermination due in January 2016. On January 11, 2016, the Department sent the Petitioner a Redetermination Application, DHS 1010, which was due February 3, 2016. Department Exhibit 1-8. On January 28, 2016, the Petitioner submitted his redetermination application to the Department on line. Department Exhibit 9-19.

On January 28, 2016, the Department Caseworker sent the Petitioner a Verification Checklist, DHS 3503, to submit required verification to determine continued eligibility that was due February 8, 2016. Department Exhibit 20. On January 29, 2016, the Department received several verifications from the Petitioner of rent verification, bank account statements, car title, letter from Petitioner, and old medical bills. Department Exhibit 21-29. On February 5, 2016, the Petitioner submitted another copy of his bank statement. Department Exhibit 35-36. On February 6, 2016, another copy of a title for a car. Department Exhibit 33.

The Petitioner was approved for Social Security SSI benefits retroactive to March 2013. Department Exhibit 37-45. On February 29, 2016, the Department sent the Petitioner a notice that his FAP case was closed effective March 1, 2016 because the Petitioner did not give proof to your local DHS office. The Petitioner was to review his Verification Checklist to see what was not submitted. Department Exhibit 49-50. On March 8, 2016, the Department received a hearing request from the Petitioner, contesting the Department's negative action. BEM 400. BAM 105, 115, 130, 200, 210, and 220.

During the hearing, the Petitioner stated that he talked to his Department Caseworker. He stated that he would bring in the required verifications of his bank statements on February 12, 2016. The Petitioner stated that he dropped off the required verification to the front desk on the day in question. His sister, [REDACTED], was his witness because she drove him on the day in question. The front desk would not give the Petitioner a date stamped copy of what he submitted. In addition, this local DHHS office does not have a sign in sheet to verify when the Petitioner was in the office.

This Administrative Law Judge finds the Petitioner and his sister credible. Since this local office has refused to implement a system that would provide proof or lack of proof of when a Petitioner was there and what was submitted, the Department does not meet their burden of proof. 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 acted in accordance with Department policy when it closed the Petitioner's FAP and MA case for failure to provide the required verification.

DECISION AND ORDER

Accordingly, the Department's 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. Initiate a redetermination of the Claimant's eligibility for FAP and MA by sending a new Verification Checklist, DHS 3503, that lists specifically what the Department is missing for the Petitioner to provide required verification to determine continued eligibility retroactive to March 1, 2016.
2. Provide the Petitioner with written notification of the Department's revised eligibility determination.
3. Issue the Petitioner any retroactive benefits she/he may be eligible to receive, if any.

CF/db

Carmen G. Fahie

Carmen G. Fahie

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

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Petitioner

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