



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: January 6, 2017
MAHS Docket No.: 16-017774
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

**ORDER OF DISMISSAL
FOR LACK OF JURISDICTION**

Following Petitioner's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37, and 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 Detroit, Michigan. The Petitioner was represented by herself. An Interpreter, [REDACTED], served as a [REDACTED] interpreter for the Petitioner. The Department of Health and Human Services (Department) was represented by [REDACTED] Assistance Payments Worker.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 792.10101 to R 792.10137 and R 792.11001 to R 792.11020. Rule 792.11002(1) provides as follows:

An opportunity for a hearing shall be granted to an applicant who requests a hearing because his or her claim for assistance is denied or is not acted upon with reasonable promptness, has received notice of a suspension or reduction in benefits, or exclusion from a service program, or has experienced a failure of the agency to take into account the recipient's choice of service.

A client's request for hearing must be in writing and signed by an adult member of the eligible group, adult child, or authorized hearing representative (AHR). Department of Health and Human Services Bridges Administrative Manual (BAM) 600 (October 1, 2016), p. 1.

In this case, the Petitioner with the assistance of her daughter, filed a request for hearing dated [REDACTED]. The Hearing Request marked (CDC) Child Care and indicated the CDC Program was closed. The hearing request also stated: The child support case for the children in my care has not been closed yet. Their father, my

son, is deceased. Therefore, their case needs to be closed; we sent a death certificate as proof; but nothing has been done yet. This is causing problems with our case for benefits.


During the hearing, it was determined that no application had been received by the Department at any time for Child Development and Care (CDC) from the Petitioner. Mrs. [REDACTED] is the custodial parent of two children in her care. The Department checked the case file for the Petitioner and determined that no application for CDC had been filed and no CDC case had been closed; thus, there was nothing to be decided regarding CDC. It does appear that the Petitioner does have other issues regarding noncooperation issues with the office of child support; however, those issues were not presented with respect to the CDC case. The Petitioner was advised to seek further assistance from the Department regarding the benefits for the children for which the Petitioner is the custodial parent and properly determine what benefits are at issue if any.

As the Department took no action adverse to the Petitioner regarding CDC benefits, and because the evidence presented indicated that CDC was never active or applied for, there is nothing for the undersigned to decide.

Petitioner's hearing request was not timely filed within 90 days of the Notice of Case Action and is, therefore, **DISMISSED** for lack of jurisdiction.

IT IS SO ORDERED.

LMF/jaf



Lynn M. Ferris

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

Department Representative

[REDACTED]

DHHS

[REDACTED]

Petitioner

[REDACTED]

Via email

[REDACTED]