RICK SNYDER GOVERNOR

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

SHELLY EDGERTON DIRECTOR

Date Mailed: July 12, 2017 MAHS Docket No.: Agency No.: Petitioner:				
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 period from Detroit, Michigan. The Petitioner was present. Petitioner's Authorized Hearing Representative (AHR) was also present at the hearing. The Department of Health and Human Services (Department) was represented by Eligibility Specialist.				
<u>ISSUE</u>				
Did the Department properly deny Petitioner's application for State Disability Assistance (SDA) 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 Petitioner applied for SDA benefits.				
2. On, the Department sent Petitioner a Medical Determination Verification Checklist (VCL) requesting that he provide proof of his application for Social Security disability no later than				

Petitioner provided the requested information on

4.	On	the Department sent Petitioner a Notice of Case Action which	ch
	notified Petitioner	that his application for SDA benefits had been denied.	

5. On _____, Petitioner's AHR filed a Request for Hearing disputing the Department's actions.

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 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.

Additionally, verification is usually required at application/redetermination and for a
reported change affecting eligibility or benefit level. BAM 130), p. 1. In
this case, Petitioner applied for SDA benefits on the Department. The Department
indicated that it sent Petitioner a VCL requesting several documents, including proof
that he applied for Social Security Disability. Petitioner's AHR acknowledged that the
proof of application for Social Security disability benefits was not submitted by
but testified that the information was submitted on
Petitioner's electronic case file indicated that Social Security verifications were received
on, although the Department did not know the specifics of the
verifications. Petitioner's AHR did not provide any explanation as to why the
verifications were not submitted on or before

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 acted in accordance with Department policy when it denied Petitioner's application for SDA benefits.

Accordingly, the Department's decision is **AFFIRMED**.

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

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