RICK SNYDER GOVERNOR

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

SHELLY EDGERTON



Date Mailed: July 19, 2017

MAHS Docket No.: 17-007932

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

## 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. After due notice, a telephone hearing was held on Michigan. Participants on behalf of Petitioner included herself. Participants on behalf of the Department of Health and Human Services (Department) included, Hearing Facilitator.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 400.901 through R 400.951. Rule 400.903(1) provides as follows:

An opportunity for a hearing shall be granted to an applicant who requests a hearing because [a] claim for assistance is denied or is not acted upon with reasonable promptness, and to any recipient who is aggrieved by a Department action resulting in suspension, reduction, discontinuance, or termination of assistance.

A request for hearing must be in writing and signed by the claimant, petitioner, or authorized representative. Mich Admin Code, R 400.904(1). Moreover, the Department of Human Services Bridges Administrative Manual (BAM) 600, provides in relevant part as follows:

The client or authorized hearing representative has 90 calendar days from the date of the written notice of case

action to request a hearing. The request must be received anywhere in DHS within the 90 days. [Emphasis added.]

In the pre	esent case, the Department sent P	etitioner a Verification Checklist, DHS 3505,
on	, that was due on	, for Petitioner to submit the ATM
balance o	on her Achieve bank account with	a printout balance from any ATM, which is
free and s	shelter verification of her shelter ex	cpenses. Department Exhibit 1, pgs. 14-19.
The Depa	artment has not issued a decision o	n Petitioner's FAP redetermination because
it is still pe	ending on the BRIDGES system.	
During the	e hearing the Petitioner submitted	d a letter from her landlord with his number
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During the hearing, the Petitioner submitted a letter from her landlord with his number on it dated . The Hearing Facilitator stated that the Department had not received the letter before because it is not in the Electronic Case File. She would have the Petitioner's Department Caseworker call the Landlord to verify the monthly shelter expenses. In addition, the Petitioner was given a shelter expense verification. The Hearing Facilitator has clarified for Petitioner what the Department requires to determine her continued eligibility for FAP benefits. Petitioner stated that she was going across the street to the ATM and submitting the print out of her bank balance.

Therefore, there has been no negative action taken by the Department and Petitioner's hearing request is, **DISMISSED** for lack of jurisdiction. BAM 600, p. 5.

IT IS SO ORDERED.

CF/bb

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	
Petitioner	