



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: August 18, 2017  
MAHS Docket No.: 17-009507  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE:** Kevin Scully

### **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. After due notice, telephone hearing was held on August 16, 2017, from Lansing, Michigan. The Petitioner was represented by herself and [REDACTED]. The Department was represented by [REDACTED] Assistance Payments Worker.

### **ISSUE**

Did the Department of Health and Human Services (Department) properly deny Petitioner's application for Medical Assistance (MA) and Food Assistance Program (FAP) 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 June 2, 2017, the Department received Petitioner's application for Medical Assistance (MA) and Food Assistance Program (FAP) benefits.
2. On June 8, 2017, the Department sent Petitioner a Verification Checklist (DHS-3503) requesting, amount other things, verification of her loss of employment by June 19, 2017. Exhibit A, pp 1-2.
3. The Department's records indicate that no documents were received from Petitioner until July 11, 2017, when she requested a hearing. Exhibit A, p 3.
4. On June 29, 2017, the Department notified Petitioner that she was not eligible for Medical Assistance (MA) as of August 1, 2017. Exhibit A, pp 4-6.

5. On June 29, 2017, the Department notified Petitioner that her application for Food Assistance Program (FAP) benefits had been denied. Exhibit A, pp 7-10.
6. On July 11, 2017, the Department received Petitioner's request for a hearing protesting the denial of Medical Assistance (MA) and Food Assistance Program (FAP) benefits. Exhibit A, p 11.

### **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.

Clients must cooperate with the local office in determining initial and ongoing eligibility and this includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (October 1, 2016), p 8.

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. The Department uses documents, collateral contacts, or home calls to verify information. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. When documentation is not available, or clarification is needed, collateral contact may be necessary. Department of Human Services Bridges Assistance Manual (BAM) 130 (April 1, 2017), pp 1-9.

On June 2, 2017, the Department received Petitioner's application for MA and FAP benefits. On June 8, 2017, the Department requested that Petitioner provide verification of her loss of employment by June 18, 2017. The Department's records indicate that no documents were received from Petitioner after June 18, 2017, and before July 11, 2017, when she requested a hearing. Other documents attached to the request for a hearing do not verify a loss of employment. Petitioner failed to offer any evidence that she had provided any document verifying her loss of employment to the Department.

On June 29, 2017, the Department notified Petitioner that she was no longer eligible for MA or FAP benefits.

The hearing record supports a finding that the Department sent Petitioner a written request for verification of her loss of employment describing how this information was to be verified, and that this information was not provided in a timely manner.

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 request for Medical Assistance (MA) and Food Assistance Program (FAP) benefits.

**DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.

KS/nr

  
\_\_\_\_\_  
Kevin Scully  
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]

**Petitioner**

[REDACTED]