



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: April 3, 2017
MAHS Docket No.: 17-003005
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 March 30, 2017, from Lansing, Michigan. The Petitioner represented herself. The Department was represented by [REDACTED] (Eligibility Specialist), and [REDACTED] (Assistance Payments Supervisor).

ISSUE

Did the Department of Health and Human Services (Department) properly deny Petitioner's Food Assistance Program (FAP) application?

Did the Department of Health and Human Services (Department) properly deny Petitioner's State Emergency Relief (SER) application?

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 October 27, 2016, the Department received Petitioner's application for State Emergency Relief (SER) and Food Assistance Program (FAP) benefits.
2. On October 27, 2016, the Department sent Petitioner a SER Verification Checklist (DHS-3503-SER) requesting verification of her emergency housing circumstances by November 3, 2016. Exhibit A, pp 4-5.
3. On November 16, 2016, the Department received Petitioner's request for a hearing protesting the Department's denial of State Emergency Relief (SER) benefits. (MAHS REG 16-017675).

4. On October 27, 2016, the Department sent Petitioner a Verification Checklist (DHS-3503) requesting verification of all employment of all members of the benefit group by November 7, 2017. Exhibit A, pp 8-9.
5. On October 27, 2016, the Department sent Petitioner two Verification of Employment (DHS-38) forms with November 7, 2017, due dates. Exhibit A, pp 10-15.
6. On November 17, 2016, the Department notified Petitioner that her Food Assistance Program (FAP) application had been denied. Exhibit A, pp 16-17.
7. On February 9, 2017, Michigan Administrative Hearing System (MAHS) ordered the Department to redetermine Petitioner's eligibility for State Emergency Relief (SER) benefits. (MAHS REG 16-017675).
8. On February 13, 2017, the Department determined that Petitioner did not meet the criteria for State Emergency Relief (SER) benefits. Exhibit A, p 19.
9. On February 13, 2017, the Department notified Petitioner that she was not eligible for State Emergency Relief (SER) benefits for failing to provide verification of a housing emergency. Exhibit A, pp 6-7.
10. On February 21, 2017, the Department received Petitioner's request for a hearing protesting the denial of her Food Assistance Program (FAP) and State Emergency Relief (SER) application. Exhibit A, p 2.

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).

State Emergency Relief (SER)

The State Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1-.119b. The SER program is administered by the Department (formerly known as the Department of Human Services) pursuant to MCL 400.10 and Mich Admin Code, R 400.7001-.7049.

State Emergency Relief (SER) assists individuals and families to resolve or prevent homelessness by providing money for rent, security deposits, and moving expenses. Accept the decision of the SER group regarding use of the relocation funds authorized. The issuance amount must resolve the group's shelter emergency. Authorize relocation services only if one of the following circumstances exists and all other SER criteria are met.

- The SER Group is homeless.
- The SER Group is at risk of homelessness.
- The SER Group meets the eligibility requirements of the Family Re-Housing Program, or the Rural Homeless Permanent Supportive Housing Initiative program.

Department of Health and Human Services Emergency Relief Manual (ERM) 303 (October 1, 2015), pp 1-2.

On October 27, 2016, the Department received Petitioner's SER application requesting relocation services. On October 27, 2016, the Department requested verification of the SER group's need for emergency funds. On November 16, 2016, the Department denied Petitioner's SER application. On November 16, 2016, the Department received Petitioner's appeal of the denial of her SER application. On February 9, 2017, MAHS ordered the Department to redetermine Petitioner's eligibility for SER benefits. On February 13, 2017, the Department reconsidered Petitioner's eligibility for SER benefits and determined that she does not meet the criteria for SER benefits because she failed to provide the Department with verification that she meets the requirements of receiving SER relocation services.

Petitioner does not dispute that she failed to provide the Department with verification that she meets the criteria to receive SER relocation services. Petitioner testified that her home she had been renting had been sold by the owner, which caused her lease to end and required her to relocate. Petitioner testified that she needs assistance to relocate to suitable housing.

Petitioner failed to establish that her SER group was homeless, and failed to establish that the group was potentially homeless, which can be verified with:

- An eviction order or court summons regarding eviction. (A demand for possession non-payment of rent or a notice to quit is not sufficient.)
- Legal notice from local public agency ordering the group to vacate condemned housing.
- Written statement from MDHHS services worker or MDHHS specialist, approved by a manager, when:
- The current rental unit is unsafe structurally or is otherwise a threat to the health and safety of the family.
- The family needs adequate, affordable housing to avoid a foster care placement or so children in foster care can return home.

- Written notification from the energy multi-disciplinary team that the group lives in high energy housing that cannot be rehabilitated.

ERM 303, p 6.

Since Petitioner was unable to provide the Department with verification that her group met the criteria for SER relocation services, 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 State Emergency Relief (SER) application.

Food Assistance Program (FAP)

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 (January 1, 2016), pp 1-9.

A request for hearing must be in writing and signed by the claimant, petitioner, or authorized representative. Rule 400.904(1). Moreover, the Department of Human Services Bridges Administrative Manual (BAM) 600 (October 1, 2015), p. 6, 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.

On October 27, 2016, the Department received Petitioner's FAP application. On November 17, 2016, the Department denied that application. On February 21, 2017, the Department received Petitioner's request for a hearing protesting the denial of her FAP application.

It was not discussed during the hearing, but Petitioner's request for a hearing was received 96 days after the Department issued notice that her application had been denied. Petitioner's request for a hearing was therefore untimely and MAHS does not have the jurisdiction to order the Department to redetermine her eligibility based on this application.

However, this issue was not discussed during the hearing and the Department effectively waived timeliness. The analysis of the Department's actions will continue.

On October 27, 2016, the Department received Petitioner's FAP application. On October 27, 2016, the Department requested verification of all employment and earned income by all members of the benefit group applying for FAP benefits. On November 17, 2016, the Department had not received verification of employment by all group members, and it denied Petitioner's FAP application.

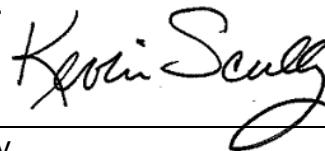
Petitioner testified that she was willing to provide the verification that was requested but did not know where to obtain it. Petitioner testified that the Department has requested verification of employment listed under the employer's corporate name and that she was only family with the employers under their more common "doing business as" name.

However, Petitioner failed to provide any documentation from any employer and failed to request assistance from the Department to obtain the required verification documentation. This Administrative Law Judge finds that Petitioner failed to make a reasonable effort to provide the Department with the information necessary to accurately determine her eligibility for FAP benefits 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 Food Assistance Program (FAP) application.

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]

Petitioner

[REDACTED]