RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON DIRECTOR



Date Mailed: April 3, 2018 MAHS Docket No.: 18-002193 Agency No.: Petitioner:

#### 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 29, 2018, from Michigan. Petitioner represented herself. The Department was represented by Michigan. Family Independence Specialist.

#### **ISSUE**

Did the Department of Health and Human Services (Department) properly deny Petitioner's application for 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 January 9, 2018, the Department received Petitioner's application for Food Assistance Program (FAP) benefits.
- 2. On January 18, 2018, the Department sent Petitioner a Shelter Verification (DHS\_3688) with a January 29, 2018, due date.
- 3. On January 18, 2018, the Department sent Petitioner a Verification of Employment (DHS-38) with a January 29, 2018, due date.
- 4. On January 18, 2018, the Department sent Petitioner a Verification of Assets (DHS-20).
- 5. On January 26, 2018, the Department sent Petitioner a Notice of Missed Interview (DHS-254) instructing her to reschedule a required eligibility interview before February 8, 2018.

6. On February 22, 2018, the Department received Petitioner's request for a hearing protesting the denial of her Food Assistance Program (FAP) application.

## 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.

The purpose of the interview is to explain program requirements to the applicant and to gather information for determining the group's eligibility. An interview is required before denying assistance even if it is clear from the application or other sources that the group is ineligible. The Department will not deny the application if the client has not participated in a scheduled initial interview until the 30th day after the application date even if he/she has returned all verifications. If clients miss an interview appointment, the Department will send a DHS-254, Notice of Missed Interview, advising them that it is the clients' responsibility to request another interview date. Department of Health and Human Services Bridges Administrative Manual (BAM) 115 (January 1, 2018), pp 18-25.

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 (January 1, 2018), 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 1-10.

On January 9, 2018, the Department received Petitioner's application for FAP benefits. Petitioner failed to cooperate with the Department's attempts to collect information

necessary to accurately determine her eligibility for FAP benefits. Therefore, the Department denied the application for assistance.

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 Food Assistance Program (FAP) benefits.

## DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

KS/nr

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