

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR



Date Mailed: July 13, 2018 MAHS Docket No.: 18-005906

Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Vicki Armstrong

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; 42 CFR 438.400 to 438.424; 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 July 11, 2018, from Lansing, Michigan. Petitioner personally appeared and testified.

The Department of Health and Human Services (Department) was represented by Hearing Facilitator Adam Slate. Mr. Slate testified on behalf of the Department. The Department submitted seven exhibits which were admitted into evidence.

<u>ISSUE</u>

Did the Department properly deny Petitioner's Food Assistance Program (FAP) benefits based on Petitioner's failure to timely submit requested verifications?

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 April 24, 2018, Petitioner applied for FAP benefits. [Dept. Exh. 2].
- 2. On April 26, 2018, the Department mailed Petitioner a Verification Checklist requesting bank statements and the title to his vehicle due by May 7, 2018. [Dept. Exh. 3-4].

- 3. On April 25, 2018, Petitioner submitted the requested bank statements to the Department. [Dept. Exh. 2].
- 4. On May 23, 2018, the Department mailed Petitioner a Notice of Case Action informing him that his FAP application was denied based on excess assets.
- 5. On May 31, 2018, Petitioner submitted a Request for Hearing contesting the denial of FAP benefits.
- 6. On July 11, 2018, during the hearing in the above-captioned matter, Petitioner credibly testified that his vehicle had been scrapped, so it was no longer in his possession, however, he did not inform the Department concerning his scrapped vehicle, until he arrived on the morning of the hearing. [Testimony of 1/10/2018].

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.

Department policy states that clients must cooperate with the local office in determining initial and ongoing eligibility. BAM 105, p 9 (1/1/2018). This includes completion of the necessary forms. *Id.* Clients who are able but refuse to provide necessary information or take a required action are subject to penalties. *Id.* Clients must take actions within their ability to obtain verifications. *Id.* at 14.

Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130, p 1 (4/1/2017). Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. *Id*.

The Department uses the Verification Checklist, DHS-3503, to tell the client what verification is required, how to obtain it and the due date. BAM 130, p 3. The client must obtain the required verification, but the Department must assist if they need and request help. *Id*.

A client is allowed 10 calendar days (or other time limit specified in policy) to provide the verification requested by the Department. BAM 130, p 7. The Department sends a negative action notice when the client indicates refusal to provide a verification, or the time period given has elapsed and the client has not made a reasonable effort to provide it. *Id.* at 7.

In this case, Petitioner applied for FAP on April 24, 2018. On April 26, 2018, the Department issued a Verification Checklist with a due date of May 7, 2018. Petitioner failed to timely return the requested verification concerning the title to his vehicle, and on May 23, 2018, the Department issued a Notice of Case Action indicating Petitioner's FAP application was denied for failure to timely return the requested verifications. Petitioner did not dispute that he failed to timely return verification that his vehicle had been scrapped and admitted he had not informed the Department, prior to the hearing in this matter, of the vehicle being scrapped.

As a result, this Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department acted in accordance with Department policy when it denied the Petitioner's FAP application.

DECISION AND ORDER

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

VLA/hb

Vicki Armstrong

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) 763-0155; 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

Renee Olian 322 Stockbridge Kalamazoo, MI 49001

Kalamazoo County, DHHS

BSC3 via electronic mail

M. Holden via electronic mail

D. Sweeney via electronic mail

Petitioner

