



Date Mailed: May 14, 2025

Docket No.: 25-014149

Case No.: [REDACTED]

Petitioner: [REDACTED]

[REDACTED]
MI [REDACTED]

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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

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Date Mailed: May 15, 2025

Docket No.: 25-014149

Case No.: [REDACTED]

Petitioner: [REDACTED]

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; and Mich Admin Code, R 792.11002. After due notice, a hearing was held via telephone conference on May 8, 2025. Petitioner appeared and represented herself. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Arnesia Woods, Eligibility Specialist and Eileen Kott, Family Independence Manager.

ISSUE

Did the Department properly deny Petitioner's application for Food Assistance Program (FAP), Medical Assistance (MA), State Emergency Relief (SER), and Child Development and Care (CDC) 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 or around [REDACTED] 2025, Petitioner submitted an application requesting FAP, MA, SER, and CDC benefits. (Exhibit A, pp. 8-19)
2. On February 25, 2025, the Department sent Petitioner a Verification Checklist (VCL) for the FAP, CDC, and MA programs instructing her to submit proof of her self-employment income, CDC needed for employment, residential address and for the MA program, a copy of her most recent tax return with her schedule C by March 7, 2025. (Exhibit A, pp. 32-34)
3. On February 25, 2025, the Department sent Petitioner a SER Verification Checklist instructing her to submit proof of her self-employment income March 4, 2025.
4. The Department asserted that Petitioner failed to submit the requested verifications by the March 4, 2025, due date for SER and March 7, 2025, due date for FAP, CDC, and MA.

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5. There was no evidence that Petitioner requested an extension of time to submit the verifications or requested assistance with obtaining the verifications.
 6. On March 5, 2025, the Department sent Petitioner a State Emergency Relief Decision Notice advising that her request for SER assistance was denied because she failed to provide proof of information requested in the VCL. (Exhibit A, pp. 61-63)
 7. On March 10, 2025, the Department sent Petitioner a Notice of Case Action advising that effective April 1, 2025, ongoing, her FAP case would be closed because verification of self-employment was not returned. (Exhibit A, pp. 43-44)
 8. On March 10, 2025, the Department sent Petitioner a Health Care Coverage Determination Notice advising that her household members were ineligible for MA because verification of income was not returned. (Exhibit A, pp. 45-49)
 9. On or around March 10, 2025, Petitioner submitted Self-Employment Income and Expense Statements for the months of November 2024, December 2024, January 2025, and February 2025. (Exhibit A, pp. 35-42)
 10. The Department determined that the Self-Employment Income and Expense Statements were not acceptable because they were returned late and because Petitioner did not include any business receipts as proof of her income or any proof of her business expenses as identified on the statements. (Exhibit A, pp. 20,35-42)
 11. On or around April 7, 2025, Petitioner requested a hearing disputing the Department's actions with respect to the FAP, MA, SER, and CDC cases. (Exhibit A, pp. 4-6)
 12. After receiving Petitioner's hearing request, the Department determined that a previous denial notice had not been issued for the CDC program.
 13. On April 18, 2025, the Department issued a Benefit Notice advising Petitioner that her CDC application was denied because she failed to provide required information within a specified timeframe. (Exhibit A, pp. 64-68)

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 Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, 42 USC 601-619, 670-679c, and 1397-1397m-5; the Child Care and Development Block Grant of 1990, PL 101-508, 42 USC 9858 to 9858q; and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193. The program is implemented by 45 CFR 98.1-99.33. The Department administers the program pursuant to MCL 400.10 and provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.5001-.5020.

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.

In this case, Petitioner disputed the denial of her [REDACTED] 2025, application for FAP, MA, CDC, and SER benefits. The Department asserted that Petitioner's application was denied for all programs because she failed to timely submit requested verifications.

Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (May 2024), p.1. To request verification of information, the Department sends a verification checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. Although the client must obtain the required verification, the Department must assist if a client needs and requests help. If neither the client nor the Department can obtain the verification despite a reasonable effort, the Department is to use the best available information; and if no evidence is available, the Department is to use its best judgment. BAM 130, pp. 3-4.

For FAP and CDC cases, clients are given 10 calendar days to provide the verifications requested by the Department. Verifications are considered to be timely if received by the date they are due. The Department sends a negative action notice when the client indicates a refusal to provide a verification **or** the time period given has elapsed and the client has not made a reasonable effort to provide it. BAM 130, pp. 7-8. For CDC cases,

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if the client cannot provide the verification despite a reasonable effort, the Department may extend the time limit at least once. BAM 130, pp. 7-8.

For MA cases, clients are given 10 calendar days (or other time limit specified in policy) to provide the verifications requested by the Department. BAM 130, pp. 7-9. If the client cannot provide the verification despite a reasonable effort, the Department is to extend the time limit to submit the verifications up to two times. BAM 130, pp. 7-9. Verifications are considered to be timely if received by the date they are due. BAM 130, pp. 7-9. The Department will send a negative action notice when the client indicates refusal to provide a verification, or the time period given has lapsed. BAM 130, pp. 8-9.

For the SER program, clients must be informed of all verifications that are required and where to return verifications. The Department will send a SER Verification Checklist (VCL) to request verifications and to notify the client of the due date for returning the verifications. The due date is eight calendar days beginning with the date of application. If the application is not processed on the application date, the deadline to return verification is eight calendar days from the date verification is requested. This does not change the standard of promptness date. ERM 103 (October 2023), pp.1-8. The client must make a reasonable effort to obtain required verifications. The specialist must assist if the applicant needs and requests help. If neither the client nor the specialist can obtain the verifications, despite a reasonable effort, use the best available information. If no evidence is available, the specialist must use their best judgment. Verifications are considered timely if received by the date they are due. ERM 103, pp.1-8. The Department will inform all SER applicants in writing of the decision made on their application by sending a DHS-1419, Decision Notice advising of the approval or denial of the application. ERM 108, pp. 1-8.

At the hearing, the Department representative testified that because Petitioner did not timely submit sufficient verification of her self-employment income, her need for CDC for employment reasons, her residential address, and her most recent tax return by the due dates identified on both VCLs issued to her, the Department initiated the denial of the FAP, MA, CDC, and SER applications by sending the above identified Notice of Case Action, Health Care Coverage Determination Notice, and SER Decision Notice, as well as later, the Benefit Notice advising of the denials. The Department representative confirmed that on March 10, 2025, Petitioner submitted Self-Employment Income and Expense Statements for the months of November 2024, December 2024, January 2025, and February 2025, the documents were not accepted because they were returned late and because Petitioner did not include any business receipts as proof of her income or any proof of her business expenses as identified on the statements as required by BEM 502 and BAM 130. (Exhibit A, pp. 20, 35-42). The Department testified that Petitioner indicated she was getting paid through CashApp or in cash but provided no documentary verification of her income other than a written statement on the Self-Employment Income and Expense Statements. Additionally, although Petitioner asserted that she required CDC for 90 hours of employment, Petitioner did not submit a work schedule or any other

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verification of her employment hours in order to verify the need for CDC benefits. Furthermore, Petitioner did not submit a tax return or any other acceptable verification of self-employment for the MA program as required.

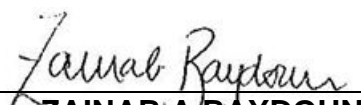
Petitioner confirmed that she is self-employed and that she filled out the Self-Employment Income and Expense Statements the way she was instructed to by Ms. Woods. Petitioner initially testified that on March 5, 2025, she emailed Ms. Woods a copy of her appointment log book and proof of what each of her clients paid for nail services. She testified that she uploaded photos of her booking site, which shows her appointment log and expense statements to her online account with the Department. However, later in the hearing, Petitioner confirmed that while she planned on emailing those documents to Ms. Woods on March 5, 2025, she did not actually submit them as she requested a hearing. There was no explanation for Petitioner's failure to submit the additional documents requested in the VCLs including her employment hours to verify her need for CDC benefits, her most recent tax return for MA purposes, and her residential address. Additionally, a review of the Self-Employment Income and Expense Statements shows that Petitioner failed to submit sufficient income receipts and expense receipts as required and further, failed to show that she complied with the verification requests made by the Department.

Upon review, because there was no evidence that Petitioner timely submitted the requested verifications as instructed in the February 25, 2025, VCL and February 25, 2025, SER VCL, the Department properly determined that Petitioner was ineligible for FAP, MA, CDC, and SER.

DECISION AND ORDER

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 [REDACTED] 2025, application.

Accordingly, the Department's FAP, MA, CDC, and SER decision is **AFFIRMED**.



ZAINAB A BAYDOUN
ADMINISTRATIVE LAW JUDGE

APPEAL RIGHTS: Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at courts.michigan.gov. The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://lrs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to MOAHR-BSD-Support@michigan.gov, **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to
Michigan Office of Administrative Hearings and Rules
Rehearing/Reconsideration Request
P.O. Box 30639
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed.

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