STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg. No.: 2014-6156

Issue No.: 3002

Case No.:

Hearing Date: December 12, 2013

County: Wexford

ADMINISTRATIVE LAW JUDGE: Vicki L. Armstrong

HEARING DECISION

Following Claimant'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, an in-person heari ng was held on Decem ber 12, 2013, at the Wexford Department of Human Services (Department) office. Claimant appear ed and testified. Participants on behalf of the Department included Family Independenc e Manager and Eligibility Specialist

<u>ISSUE</u>

Did the Department pr operly determine Claimant's Food Ass istance Pr ogram (FAP) benefit amount?

FINDINGS OF FACT

The Administrative Law Judge, based on t he competent, material, and substantial evidence on the whole record, finds as material fact:

- Claimant was active for FAP with a monthly allotment of \$ and a group size of 2.
- 2. Claimant is disabled and received approximately \$ per month for RSDI.
- 3. Claimant was active for the Medical Cos t Share Pr ogram known as Qualified Medicare Beneficiaries (QMB).
- 4. On September 20, 2013, the Department mailed Claimant a Notice of Case Action (DHS-1605) which decreased his monthly FAP amount to \$ due to a mas supdate change in the shelter deduction amount.
- 5. On September 30, 2013, Claimant requested a hearing to challenge the September 20, 2013 reduction in his monthly FAP allotment.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Service s Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), D epartment of Human Service es Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

The Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 271. It to 285.5. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.

When the Department budgets the amount of FAP for a group, it first determines whether there is a significant of the person of the proof of the group. BEM 550. A non-categorically eligible Senior/Disabled/Veteran (SDV) FAP group must have income limits. BEM 550. A non-categorically eligible, non-SDV FAP group must have income below the gross and net income limits. BEM 550.

The Department's computer syst em, known as "Bridges," uses certain expenses to determine net income for FAP eligibility and benef it levels. BEM 554. For gr oups with one or mor e SDV member, Bridges uses the following: see BEM 550: (1) dependent care expense; (2) excess shelter (3) court ordered child support and arrearages paid to non-household members; and (4) medical expenses for the SDV members that exceed \$35. BEM 554.

Here, Claimant requested a he aring because his monthly FAP allotment was reduc ed from \$ _______ to \$ ______ The Department takes the posit ion that the FAP reduction was justified due to a mass update in policy. Claimant did not specifically address the Department's contentions, but instead expressed his displeasure with his caseworker.

¹ A "senior" is a person at least 60 years old. BEM 550 p 1.

² A "disabled" person who receive sone of the following: (1) a federal, state or local public disability retirement pension and the disability is considered permanent under the Social Security Act; (2) Medicaid program which requires a disability determination by MRT or Social Security Administration; (3) Railroad Retirement and is eligible for Medicare or meets the Social Security disability criterial (4) a person who receives or has been cerestified and a waiting their initial payment for one of the following: (a) Social Security disability or blindness benefits; (b) Supplemental Security Income (SSI), based on disability or blindness, even if based on presumptive eligibility.

³ An SDV FAP group is one which has an SDV member. BEM 550 p 1.

Testimony and other evidence must be we ighed and considered according to its reasonableness. *Gardiner v Courtright*, 165 Mich 54, 62; 130 NW 322 (1911); *Dep't of Community Health v Risch*, 274 Mich App 365, 372; 733 NW2d 403 (2007). The weight and credibility of this evidence is generally for the fact-finder to determine. *Dep't of Community Health*, 274 Mich App at 372; *People v Terry*, 224 Mich App 447, 452; 569 NW2d 641 (1997). Moreover, it is for the fact-finder to gauge the demeanor and veracity of the witnesses who appear before him, as best he is able. See, e.g., *Caldwell v Fox*, 394 Mich 401, 407; 231 NW 2d 46 (1975); *Zeeland Far m Services, Inc v J BL Enterprises, Inc*, 219 Mich App 190, 195; 555 NW2d 733 (1996).

Normally, the Michig an Admin istrative Hearing Sy stem will **not** grant a hearing regarding the issue of a mass update required by state or federal law **unless** the reason for the request is an issue of incorrect ca | Iculation of program benefits or patient-pay amount. BAM 600. Howev er, this Admin istrative Law Judge will cons ider Claimant's request for hearing as a challenge to the Department's calculation of his FAP benefits.

The record shows that the Department's calculations are incorrect. The Department was unable to explain during the hearing why the total income amount was \$ instead of \$ (See Exhibit 15). Therefore, the Department agreed to investigate and redetermine Claimant's FAP benefits.

Based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, this Administrative La w Judge finds that the Department acted in accordance with Department policy when it determined Claimant's monthly FA P allotment during the month of September, 2013, but needs to determine the correct total income amount and whether that will change Claimant's FAP benefits.

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**. The Department is ordered to redetermine Claimant's FAP be nefits and determine Claimant's correct total income amount and whether that amount will change Claimant's FAP benefits.

IT IS SO ORDERED.

Vicki L. Armstrong
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: December 17, 2013

Date Mailed: December 17, 2013

NOTICE OF APP EAL: The claimant may appea I the Dec ision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, i f a timely Request for Rehearing or Reconsiderati on was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the mailing date of this Dec ision and Order. MAHS will not order a rehearing or reconsideration on the Department's mo tion where the final decis ion cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly disc overed evidence that existed at the time of the or iginal hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the clai mant must specify all reas ons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

The written request must be faxed to (517) 335-6088 and be labeled as follows:

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 48909-07322

VLA/las

cc: