

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2014-25950  
Issue No(s): 1001  
Case No.: [REDACTED]  
Hearing Date: April 3, 2014  
County: Wayne (76)

**ADMINISTRATIVE LAW JUDGE:** Zainab Baydoun

**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, a telephone hearing was held on April 3, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Family Independence Specialist and [REDACTED], Family Independence Manager.

**ISSUE**

Did the Department properly close Claimant's Family Independence Program (FIP) case on the basis that her income exceeded the limit?

**FINDINGS OF FACT**

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

1. Claimant was an ongoing recipient of FIP benefits.
2. In connection with a redetermination, Claimant's eligibility to receive FIP benefits was reviewed.
3. On January 24, 2014, the Department sent Claimant a Notice of Case Action informing her that effective March 1, 2014, her FIP case would be closed on the basis that the group's countable income exceeded the limit for the FIP program. (Exhibit 1).

4. On February 3, 2014, Claimant submitted a hearing request disputing the Department's actions

### **CONCLUSIONS OF LAW**

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

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131.

In order to receive FIP benefits, a client must establish that financial need exists. BEM 515 (July 2013), p.1; BEM 518 (July 2013), p.1. Financial need is established, in part, when a client passes the Issuance Deficit Test. A client passes the Issuance Deficit Test if the certified group's budgetable income for the income month is *less* than the certified group's payment standard for the benefit month. BEM 515, p 1; BEM 518, p.1. The FIP monthly assistance payment standard for Claimant's confirmed group size of six is \$828. RFT 210 (December 2013), p.1.

Additionally, a child support income test is required when the group has certified support of more than \$50. To complete a child support income test, the group's total voluntary/direct support amounts are added to the gross monthly certified amount. Up to \$50 from this amount is excluded. The result is added to the group's net earned and other unearned income. If the result is equal to or greater than the certified group's payment standard the group is **not** eligible for assistance. BEM 518, p.4.

At the hearing, the FIP Income Test was reviewed. (Exhibit 5). The Department determined that Claimant had unearned income of \$1126 which came from child support. The Department testified that in calculating Claimant's voluntary support, it relied on information submitted by Claimant, specifically a payment history report from the State of Ohio. (Exhibit 3). The Department stated and Claimant confirmed that her support is paid biweekly and that she receives \$575.27 and \$550.83, respectively for each period. (Exhibit 3).

After further review, the Department properly calculated Claimant's unearned income from child support using the prospective budgeting policy and subtracted the applicable \$50 applicable according to the child support income test to determine that Claimant had countable income of \$1076, which is in excess of the \$828 payment standard. BEM 505 (July 2013); BEM 518, pp. 1-4; BEM 515, p.1; RFT 210, p.1.

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 closed Claimant's FIP case on the basis that her income exceeded the limit.

**DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.



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**Zainab Baydoun**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: April 14, 2014

Date Mailed: April 14, 2014

**NOTICE OF APPEAL:** The claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final decision 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 discovered evidence that existed at the time of the original 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 claimant must specify all reasons 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:

2014-25950/ZB

Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P.O. Box 30639  
Lansing, Michigan 48909-07322

ZB/tlf

cc:

