

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 14-000390
Issue No.: 3001
Case No.: [REDACTED]
Hearing Date: April 30, 2014
County: Washtenaw

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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, telephone hearing was held on Wednesday, April 30, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Due to excess income, did the Department properly reduce Claimant's benefits for Food Assistance Program (FAP)?

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 applied for: FAP benefits.
2. On March 24, 2014, the Department reduced Claimant's benefits due to excess income.
3. On March 24, 2014, the Department sent Claimant/Claimant's Authorized Representative (AR) its decision.
4. On March 31, 2014, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting 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), and Department of Human Services Reference Tables Manual (RFT).

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 271.1 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.

Additionally, the Claimant applied for FAP benefits on February 10, 2014. The Claimant was a fugitive felon from February 10, 2014 through February 27, 2014. Department Exhibit 6-9. The Claimant denied that he was a [REDACTED] during the hearing, but the Claimant would have to contact the [REDACTED] to have them correct the information on the system if an error had been made. The Claimant would then have to notify the Department when it is corrected to get FAP benefits for those eligible months.

The Claimant was eligible for Social Security RSDI benefits of \$ [REDACTED] and Veteran's Compensation benefits of \$ [REDACTED] for a gross unearned income of \$ [REDACTED]. The Claimant is entitled to senior and disabled benefits for FAP.

As a result of excess income, the Claimant had a decrease in FAP benefits. After deductions from his gross unearned income of \$ [REDACTED] of a \$ [REDACTED] standard deduction and a \$ [REDACTED] medical deduction for an adjusted gross income of \$ [REDACTED]. The Claimant was given a total shelter deduction of \$ [REDACTED] resulting from a housing expense of \$ [REDACTED] and heat and utility standard of \$ [REDACTED]. The Claimant was given an adjusted excess shelter deduction of \$ [REDACTED] with a total shelter deduction of \$ [REDACTED] minus 50% of adjusted gross income of \$744. The Claimant had a net income of \$ [REDACTED] which was the adjusted gross income of \$ [REDACTED] minus the excess shelter deduction of \$584. With a net income of \$ [REDACTED] the Claimant qualified with a household group size of 1 for a maximum benefit of \$ [REDACTED] plus \$ [REDACTED] in economic recovery minus 30% of net income of \$ [REDACTED] resulting in a net benefit amount of \$ [REDACTED]. Department Exhibit 14-16.

The Department has met its burden that the Claimant had excess income for FAP resulting in a FAP benefit of \$15. BEM 204, 212, 220, 500, 503, 550, and 554. BAM 210.

The Administrative Law Judge, based upon 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 determined the Claimant's FAP benefits of \$ [REDACTED] as a result of excess income.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

Carmen H. Fahie

Carmen Fahie
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 5/9/14

Date Mailed: 5/9/14

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration 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 party requesting a rehearing or reconsideration 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 this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, 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

CGF/tb

cc:

