

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 14-009868
Issue No.: 3008
Case No.: [REDACTED]
Hearing Date: October 23, 2014
County: Oakland (2) Madison Hts

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

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 October 23, 2014, from Lansing, Michigan. Participants on behalf of Claimant included Claimant's Authorized Representative and son [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED] and [REDACTED].

ISSUE

Did the Department properly determine Claimant's Food Assistance program (FAP) 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. Claimant was an ongoing recipient of FAP benefits receiving [REDACTED] per month in benefits.
2. Claimant requested a hearing on July 29, 2014, contesting the processing of medical expenses and the implementation of previous decision from Michigan Administrative Hearing System (MAHS).
3. Claimant submitted irregular medical expense information in June 2014 totaling [REDACTED].
4. Claimant had regular medical expenses of [REDACTED].

5. The Department processed Claimant's medical expenses of [REDACTED] for July 2014 and determined that no change in the benefit amount was warranted.
6. Claimant raised issues at hearing and in his hearing request regarding whether a previous MAHS decision was processed properly.

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 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 273. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001 to .3015.

Additionally, Claimant raised issues regarding whether medical expenses were processed properly and whether FAP benefits amount were correct. After reviewing the Department's calculation of FAP benefits the Department's determinations were proper and correct.

The federal regulations define household income to include all earned income. 7 CFR 273.9(b). All monthly income must be converted to a nonfluctuating monthly amount. Only 80% of earned income is counted in determining FAP benefits. BEM 550. Claimant has [REDACTED] self-employment income, this allows for a [REDACTED] deduction. Under 7 CFR 273.9, as amended, [REDACTED] is deducted from the gross income of FAP recipients in determining FAP grants.

In the present case, according to the aforementioned policy on budgeting, Claimant has [REDACTED] unearned income and [REDACTED] self-employment income. Subtracting [REDACTED] for the standard deduction and [REDACTED] for the medical deduction from [REDACTED] results with [REDACTED] adjusted gross income. Claimant also qualified for an excess shelter deduction of [REDACTED]. Subtracting [REDACTED] from [REDACTED] results with [REDACTED] net income. A household of two (2) with a net monthly income of [REDACTED] is entitled to a monthly FAP grant of [REDACTED] per month. RFT 260. Therefore, the Department's determination of benefits is correct. It should be noted that Claimant could have had significantly more medical expenses and it would not have resulted in a change in benefit amount.

This Administrative Law Judge reviewed the previous ALJ decision issued May 30, 2014, and Claimant's previous hearing files. Irregular medical expenses submitted in 2013 were for approximately [REDACTED] or less for any one month. These expenses did not result in FAP benefit amount changes; therefore, the Department's processing of 2013 FAP benefits is also affirmed.

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 determined Claimant's FAP benefits.

DECISION AND ORDER

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



Aaron McClintic
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: **10/31/2014**

Date Mailed: **10/31/2014**

AM / jaf

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

cc:

