

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 14-018050
Issue No.: 3006
Case No.: [REDACTED]
Hearing Date: January 21, 2015
County: Calhoun (District 21)

ADMINISTRATIVE LAW JUDGE: Darryl Johnson

HEARING DECISION

Upon a hearing request by the Department of Human Services (Department) to establish an overissuance (OI) of benefits to Respondent, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, 400.43a, and 24.201, *et seq.*, and Mich Admin Code, R 400.941, and in accordance with 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 January 21, 2015, from Lansing, Michigan. Participants on behalf of the Department included Recoupment Specialist [REDACTED].

Participants on behalf of Respondent included Respondent.

ISSUE

Did Respondent receive an OI of 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. Respondent was a recipient of FAP benefits from the Department.
2. The Department alleges Respondent received a FAP OI during the periods of June 2011 through September 2011 and January 2014 through October 2014 due to Respondent's error, and December 2012 through October 2013 due to Agency error.
3. The Department alleges that Respondent received OI of \$ [REDACTED] \$ [REDACTED] and \$ [REDACTED] that are still due and owing to the Department.

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 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.

As stated in BAM 700 (5/1/14) p 1, "When a client group receives more benefits than it is entitled to receive, DHS must attempt to recoup the overissuance."

The Department presented evidence that Respondent had not reported all of the group's income. Respondent began receiving wages from [REDACTED] on [REDACTED] but she did not report her wages to the Department until April 26, 2012. A summary of the OI for that period is found in Exhibit 1 Pages 6-7. (All Exhibit references herein are to Exhibit 1 and hereafter will be identified by page numbers only.) Details of the monthly actual and corrected budgets are at Pages 8-15. Her wages are reflected on Pages 24-29. This was an OI due to client error.

For the period of December 2012 through October 2013, Respondent reported her wages at [REDACTED], but the Department erroneously marked the earnings as "not accessible" causing them to not be included in her FAP budget. A summary of the OI is at Page 73 and at Pages 75-77. Details of the monthly actual and corrected budgets are at Pages 78-101. Her wages are reflected on Pages 103-108. The other working group member has wages reflected on Pages 110-113 and 117-122. This was an OI due to Agency error.

For the period of January 2014 through October 2014, the Department presented evidence of another OI due to client error. At Page 128 is a summary of the OI. That summary is presented in another format at Pages 130-132, with the monthly budgets at Pages 133-152. Wages for the group are found at Pages 170-176.

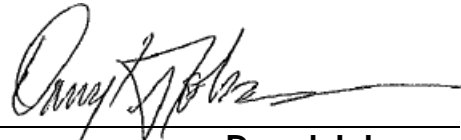
The evidence establishes that she received an OI during three different periods. Two were due to her error, and one was due to Agency error. A client-error OI has been established for June 2011 to September 2011 in the amount of \$ [REDACTED]. A Department-error OI has been established for December 2012 through October 2013 in the amount of \$ [REDACTED]. A client-error OI has been established for January 2014 through October 2014 in the amount of \$ [REDACTED].

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, finds that the Department established a FAP benefit OI to Respondent totaling \$ [REDACTED]

DECISION AND ORDER

Accordingly, the Department is **AFFIRMED**.

The Department is **ORDERED** to initiate collection procedures for a \$ [REDACTED] OI in accordance with Department policy.



Darryl Johnson
Administrative Law Judge
for Nick Lyon, Interim Director
Department of Human Services

Date Signed: **1/23/2015**

Date Mailed: **1/23/2015**

DJ/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:

