

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

IN THE MATTER OF:

██████████
██████████
██████
████████████████████

Reg. No.: 15-012752
Issue No.: 2001; 3008
Case No.: ██████████
Hearing Date: August 26, 2015
County: Wayne-District 17

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on August 26, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and ██████████, Claimant's daughter and translator. Participants on behalf of the Department of Health and Human Services (Department) included ██████████, Assistance Payment Worker.

ISSUE

Did the Department properly calculate Claimant's Food Assistance Program (FAP) benefits and determine her Medical Assistance (MA) eligibility?

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 and MA.
2. On March 17, 2015, the Department sent Claimant a Health Care Coverage Determination Notice advising her that she was eligible for MA subject to a monthly \$60 deductible.
3. On March 17, 2015, the Department sent Claimant a Notice of Case Action notifying her that she was approved for February 17, 2015 ongoing, with \$148 in FAP benefits for the period from February 17, 2015 to February 28, 2015 and for \$346 in monthly FAP benefits for March 1, 2015 ongoing.

4. On July 9, 2015, Claimant filed a request for hearing disputing the Department's actions concerning her FAP and MA cases.

CONCLUSIONS OF LAW

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

The Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food and Nutrition Act of 2008, 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 Department of Human Services) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-119b, and Mich Admin Code, R 400.3001-.3011.

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

The evidence at the hearing established that, effective April 1, 2015, Claimant was approved for MA subject to a monthly \$60 deductible and she was approved for FAP benefits of \$148 for February 17, 2015 to February 28, 2015 and for \$346 monthly for March 2015 ongoing (Exhibits A and C).

At the hearing, the Department acknowledged that it had improperly calculated Claimant's FAP benefits and MA eligibility because it continued to budget \$693 in monthly Retirement, Survivors and Disability Insurance (RSDI) benefits that Claimant had stopped receiving in December 2014, as verified in an SOLQ report it ran prior to the hearing. The Department testified that it had remedied Claimant's case. It provided an August 26, 2015 Health Care Coverage Determination Notice, as well as a Medicaid eligibility printout from its system, that showed that Claimant was approved for full-coverage MA from April 1, 2015 ongoing (Exhibit F). Therefore, the Department resolved Claimant's MA issue as of the hearing date.

The Department also provided an August 26, 2015 Notice of Case Action showing that her monthly FAP benefits had increased to \$620 for March 2015 through September 2015 and would increase to \$649 for October 2015 to January 31, 2016. The Notice

also indicated that Claimant would be supplemented \$1761 for FAP benefits it owed Claimant for the period between February 17, 2015 and August 31, 2015.

Because the Department took action to address Claimant's FAP case **after** the hearing request date resulting in an increase in FAP benefits to an amount greater than the \$346 in monthly FAP benefits she had been receiving at the time of her hearing request and a supplement back to the February 17, 2015 application, Claimant is no longer aggrieved with respect to the calculation of FAP benefits of \$346 monthly. Claimant is advised that, if she does not agree with the Department's actions as reflected in the August 26, 2015 Notice of Case Action, she can request a hearing in accordance with Department policy.

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 resolved Claimant's MA case by providing her with full-coverage MA and Claimant is no longer an aggrieved party with respect to the issue of her FAP allotment as raised in her July 9, 2015 request for hearing.

DECISION AND ORDER

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



Alice C. Elkin
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Signed: **9/4/2015**

Date Mailed: **9/4/2015**

ACE / tlf

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 copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from MAHS within 30 days of the mailing date of this Hearing Decision, or MAHS **MAY** order a

