

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

IN THE MATTER OF:

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

Reg. No.: 15-001648
Issue No.: 1006; 3006
Case No.: ██████████
Hearing Date: April 08, 2015
County: MACOMB-36

ADMINISTRATIVE LAW JUDGE: Robert J. Chavez

HEARING DECISION

Upon a hearing request by the Department of Health and 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, an in-person hearing was held on April 8, 2014, from Detroit, Michigan. Participants on behalf of the Department included ██████████ ██████████ Recoupment Specialist. Participants on behalf of the Respondent included ██████████ and ██████████ her interpreter.

ISSUE

Did Respondent receive an OI of Family Independence Program (FIP) and 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 FIP and FAP benefits from the Department.
2. The Department alleges Respondent received a FIP and FAP OI during the period of December 1, 2013 through July 31, 2014, due to the Department's error.
3. The Department alleges that Respondent received a ██████████ OI for FIP and ██████████ for FAP that is still due and owing to the Department.
4. Respondent reported employment at all times and was not at fault for the OI.

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 Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to 45 CFR 233-260, MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3101 to .3131.

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, Respondent did not protest the amount of the recoupment, whether there was an error, or allege in any way that the Department's recoupment calculation was in some way faulty. The Administrative Law Judge has reviewed the calculations and found no errors. There are no disputes as to the facts of the case, and after a review of the evidence, the undersigned holds that the Department showed, through a preponderance of the evidence, that an agency error that caused an OI occurred. Respondent's eligibility for FIP and FAP benefits was decreased through the time period in question.

Therefore, as the evidence shows that the calculations were correct, and as there is no dispute as to the calculation methods, and as the recoupment amount is over the threshold for recoupment for agency error as provided in policy, and as there was an actual error, the Administrative Law Judge holds that the Respondent received FIP and FAP benefits that they were not entitled to, and must repay the benefits through the recoupment process.

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, finds that the Department established a FIP benefit OI to Respondent totaling [REDACTED] and 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 FIP benefit OI to Respondent totaling [REDACTED] and a FAP benefit OI to Respondent totaling [REDACTED] in accordance with Department policy.



Robert J. Chavez
Administrative Law Judge
for Nick Lyon, Director
Department of Health and
Human Services

Date Signed: **4/13/2015**

Date Mailed: **4/13/2015**

RJC / tm

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:

Device Type	Percentage of Respondents
Smartphone	85%
Tablet	72%
Smartwatch	48%
Smart TV	35%
Smart Home Assistant	28%
Smart Car	15%
Smart Thermostat	12%
Smart Lock	8%
Smart Doorbell	5%