RICK SNYDER GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM Christopher Seppanen Executive Director

SHELLY EDGERTON



Date Mailed: September 16, 2016 MAHS Docket No.: 16-010374 Agency No.:

Petitioner:

Respondent:

**ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris** 

# **HEARING DECISION**

Upon the request for a hearing by the Department of Health and Human Services (Department), this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, and in accordance with Titles 7, 42 and 45 of the Code of Federal Regulation (CFR), particularly 7 CFR 273.16 and 45 CFR 235.110; and with Mich Admin Code, R 400.3130 and 400.3178. After due notice, a telephone hearing was held on from Detroit, Michigan. The Department was represented by Recoupment Specialist. The Respondent was represented by herself.

## **ISSUE**

Did Respondent receive an overissuance (OI) of Family Independence Program (FIP) cash Assistance?

### FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

- 1. The Department alleged Respondent received an FIP Cash Assistance OI during the period , due to **Respondent's** error.
- 2. The Department originally alleged that Respondent received \$ OI that was still due and owing to the Department. Subsequently, the Department reduced the OI to \$ but never amended its action for recoupment. Exhibit 1.
- 3. At the hearing, the Department presented documentation that the FIP OI of \$\)
  was no longer due and owing and provided a Claim Activity History showing that as of \$\), it no longer sought any OI of FIP benefits from Respondent for Respondent's Claim Number Exhibit 1.

4. The Respondent requested a timely hearing on

# **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), and Department of Health and 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 Department of Human Services) 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.

Additionally, in this case, the Department sought initially to recoup FIP cash assistance benefits of \$ it believed were overissued to the Respondent allegedly due to client error. At the hearing, the Department conceded that the debt collection it sought to recoup from Respondent, Claim Number was in error and that it had adjusted the claim to a balance of \$ and no longer sought any OI as regards the Respondent for an FIP benefit OI.

Thus, there being no OI that can be established and there being no OI owed by Respondent for \$ in FIP benefits, there is no issue to be determined; and the Department is not entitled to pursue any recoupment under the evidence presented.

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, finds that the Department **did not** establish an FIP benefit OI to Respondent totaling \$

# **DECISION AND ORDER**

Accordingly, the Department is **REVERSED**.

The Department is ORDERED to delete any collection action and is not entitled to pursue debt collection for a FIP OI in accordance with Department policy.

LMF/jaf

Lyńń M. Ferris

Administrative Law Judge for Nick Lyon, Director

Department of Health and Human Services

**NOTICE OF APPEAL**: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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 48909-8139 **DHHS** 

Respondent

Via email

