



RICK SNYDER  
GOVERNOR

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

SHELLY EDGERTON  
DIRECTOR



Date Mailed: August 18, 2017  
MAHS Docket No.: 17-008370  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE:** Gary Heisler

### **HEARING DECISION**

Following Petitioner'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 10, 2017, from Lansing, Michigan. Petitioner was represented by herself. The Department was represented by Hearing Facilitator [REDACTED] [REDACTED]

### **ISSUE**

Did the Department properly determine Petitioner's Family Independence Program (FIP) eligibility?

Did the Department properly determine Petitioner's Food Assistance Program (FAP) 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. Petitioner was an ongoing recipient of full coverage Medical Assistance (MA) and Food Assistance Program (FAP) benefits.
2. On April 13, 2017, Petitioner's newborn grandson entered her household.
3. On April 19, 2017, Petitioner submitted an application for Medical Assistance (MA) for her grandson. Petitioner was sent a Health Care Coverage Determination Notice (DHS-1606) which stated her grandson had full coverage Medical Assistance (MA) from April 1, 2017 ongoing. The notice incorrectly stated that

Petitioner was eligible for Medical Assistance (MA) as a \$█ deductible from April 1, 2017. The error was corrected on June 1, 2017.

4. On May 24, 2017, Petitioner submitted an Assistance Application (DHS-1171) for Family Independence Program (FIP) benefits. Petitioner's Family Independence Program (FIP) household group was herself and her newborn grandson.
5. On June 1, 2017, Petitioner was sent a Notice of Case Action (DHS-1605) which stated that she was eligible for Family Independence Program (FIP) benefits. The notice stated the Family Independence Program (FIP) benefits would be \$█ for the period June 16 – 30, 2017 and \$█ per month beginning July 1, 2017. Petitioner was approved as an ineligible grantee and her income was not used in determining Family Independence Program (FIP) eligibility for her grandson.
6. On June 1, 2017, Petitioner was sent a Health Care Coverage Determination Notice (DHS-1606) correcting the error of April 19, 2017. This notice stated that Petitioner was still eligible for full coverage Medical Assistance (MA) from April 1, 2017 ongoing. The Medical Assistance (MA) portion of this hearing is dismissed for lack of jurisdiction because no changes were made to Petitioner's Medical Assistance (MA) coverage.
7. On June 14, 2017, Petitioner submitted a lengthy hearing request. In the hearing request Petitioner asserts that: she does not like her case worker; her case worker has lied to her and messed up her case for the last couple of years and won't go back and fix it; and she wants a new case worker.
8. On June 15, 2017, Petitioner was sent a Notice of Case Action (DHS-1605) which stated that her Food Assistance Program (FAP) benefits were increased to \$█ of Food Assistance Program (FAP) benefits for June 2017 and \$█ of Food Assistance Program (FAP) benefits beginning July 1, 2017. The notice reflected the increase in Petitioner's Food Assistance Program (FAP) benefit group to include her grandson.
9. The State Emergency Relief (SER) portion of this hearing is dismissed for lack of jurisdiction because no SER eligibility determinations have been made during the 90 days prior to the hearing request.

### **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 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-.3131.

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.

During this hearing the Food Assistance Program (FAP) financial eligibility budget was reviewed. In accordance with Bridges Eligibility Manual (BEM) 212 Food Assistance Program Group Composition, both Petitioner and her grandson must both be in the Food Assistance Program (FAP) benefit group. Petitioner's income of \$ [REDACTED] in Social Security benefits was verified along with her shelter expenses of \$ [REDACTED] per month of rent including utilities was verified. Petitioner was allowed the \$ [REDACTED] standard deduction for a group of two and was also allowed the \$ [REDACTED] telephone standard as a shelter expense. However, the Family Independence Program (FIP) grant was not included in the financial eligibility budget. Bridges Eligibility Manual (BEM) 503 Income, Unearned, at page 16 provides:

**FIP, RCA or SDA Cash Assistance**

**FIP, RCA, SDA, CDC, MA**

Bridges excludes FIP, RCA and SDA as income.

**FAP Only**

FIP, RCA and SDA benefits are considered the unearned income of the FIP, RCA or SDA head of household (HOH, formerly grantee). Bridges counts as unearned income, the amount of cash assistance benefits minus any excludable portion.

The following portions of cash assistance benefits are excluded by Bridges:

The amount of non-IPV administrative recoupment.

The amount of initial cash benefits intended to cover a current or previous month, when FAP benefits have already been authorized for such months.

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 Petitioner's Family Independence Program (FIP) eligibility.

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 did not

act in accordance with Department policy when it determined Petitioner's Food Assistance Program (FAP) eligibility.

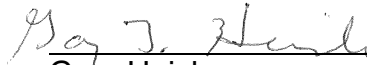
**DECISION AND ORDER**

Accordingly, the Department's decision **AFFIRMED IN PART** with respect to the Family Independence Program (FIP) eligibility determination and **REVERSED IN PART** with respect to the Food Assistance Program (FAP) eligibility determination.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Re-determine Petitioner's Food Assistance Program (FAP) eligibility in accordance with Department policy from June 1, 2017 ongoing.

GH/nr



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Gary Heisler  
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**

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

**Petitioner**

[REDACTED]