



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: August 2, 2017
MAHS Docket No.: 17-008516
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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; 42 CFR 438.400 to 438.424; 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 July 26, 2017, from Lansing, Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by [REDACTED] [REDACTED] Hearing Coordinator, and [REDACTED] [REDACTED] Lead Worker from the Office of Child Support (OCS).

ISSUE

Did the Department properly reduce Petitioner's Food Assistance Program (FAP) benefits due to noncompliance with the Office of Child Support (OCS)?

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 a recipient of FAP, which requires her to participate with OCS to determine paternity and establish child support pursuant to BEM 255.
2. On January 10, 2017, the OCS sent Petitioner a First Customer Contact Letter that Petitioner had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 16-17.

3. On January 20, 2017, the OCS sent Petitioner a Final Customer Contact Letter that Petitioner had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 19-20.
4. On January 29, 2017, the OCS sent Petitioner a Noncooperation Notice because Petitioner did not respond and she had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 14-15.
5. On May 24, 2017, the Department sent Petitioner a Notice of Case Action that her FAP benefits were decreasing to \$ [REDACTED] per month effective May 24, 2017, - May 31, 2017, and \$ [REDACTED] for June 1, 2017, - April 30, 2018, for household group size of 1 due to the removal of Petitioner due to noncooperation with OCS. Department Exhibit 1, pgs. 5-10.
6. On June 21, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative action.

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.

In this case, Petitioner was a recipient of FAP, which requires her to participate with OCS to determine paternity and establish child support pursuant to BEM 255. On January 10, 2017, the OCS sent Petitioner a First Customer Contact Letter that Petitioner had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 16-17. On January 20, 2017, the OCS sent Petitioner a Final Customer Contact Letter that Petitioner had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 19-20. On January 29, 2017, the OCS sent Petitioner a Noncooperation Notice because Petitioner did not respond and she had 10 days to complete the Online Child Support Response form. Department Exhibit 1, pgs. 14-15. On May 24, 2017, the Department sent Petitioner a Notice of Case Action that her FAP benefits were decreasing to \$ [REDACTED] a month effective May 24, 2017, - May 31, 2017, and \$ [REDACTED] for June 1, 2017, - April 30, 2018, for household group size of 1 due to the removal of Petitioner due to noncooperation with OCS. Department Exhibit 1, pgs. 5-10. On June 21, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative action. BEM 255.

During the hearing, Petitioner stated that she did not know the name of the father of her child. She had consensual sex and could not provide a name and birthdate for OCS to establish paternity. As a result, Petitioner is in noncooperation with OCS.

DECISION AND ORDER

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 was in noncooperation with OCS resulting in a decrease in FAP benefits.

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



CF/md

Carmen G. Fahie
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

Department Representative

[REDACTED]

DHHS

[REDACTED]

Petitioner

[REDACTED]