RICK SNYDER GOVERNOR

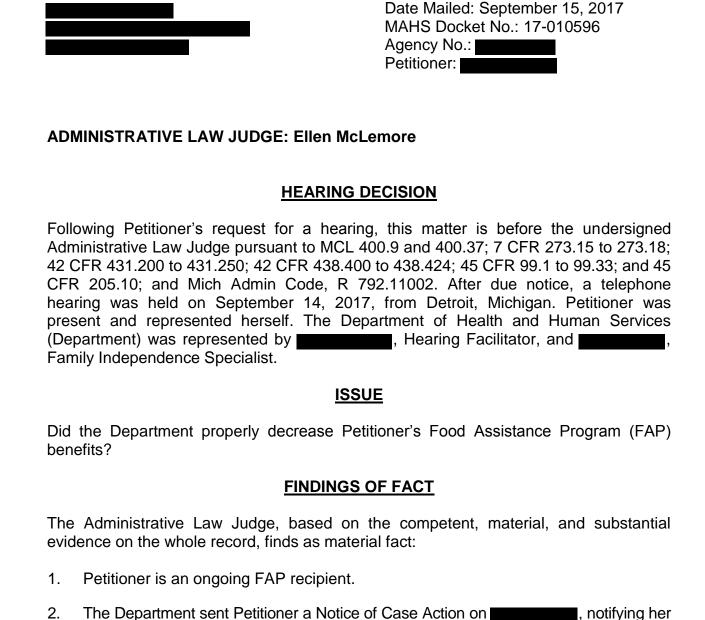
3.

4.

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON

I (Exhibit C pp. 1-2).



that her FAP benefits were being reduced, effective

, (Exhibit A, pp. 1-2).

The Department sent Petitioner a Notice of Case Action on I

The Department sent Petitioner a Health Care Coverage Determination Notice on

notifying Petitioner that her FAP benefit case was being closed, effective

5. Petitioner submitted a Request for Hearing on Department's actions on her FAP and Medical Assistance (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).

MA

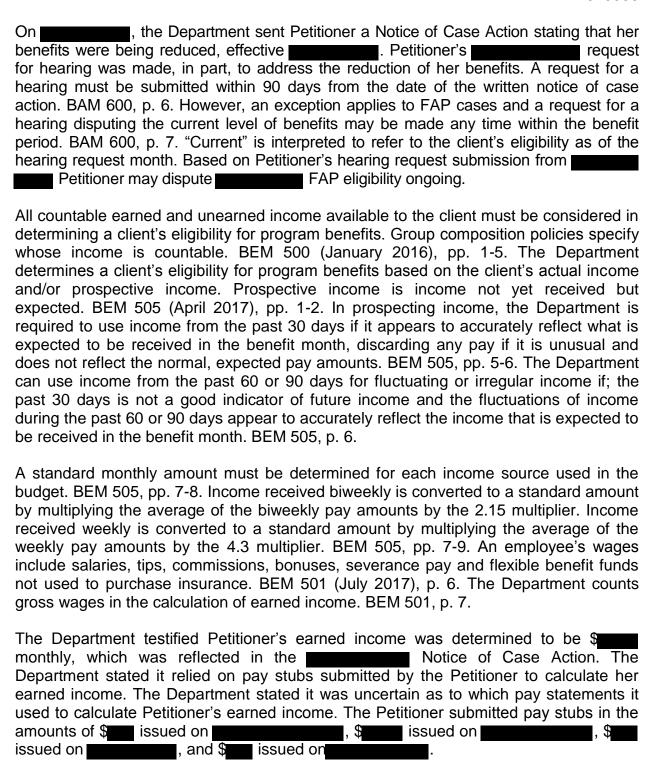
The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation 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.

On ______, Petitioner submitted a Request for Hearing regarding her MA benefits. The Department's most recent action taken on Petitioner's MA case, prior to the request for hearing, was a Health Care Coverage Determination Notice that was issued on _____. Policy provides that a request for hearing must be received in the Department local office within 90 days of the date of the written notice of case action. BAM 600 (April 2017), p. 6. Because Petitioner's hearing request was not made within 90 days of the Department's action regarding her MA case, it is, therefore, dismissed for lack of jurisdiction.

<u>FAP</u>

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.

Petitioner requested a hearing regarding her FAP case closure, as well as her FAP benefit reduction on . On . On the period of the Department sent Petitioner a Notice of Case Action informing her that her FAP benefit case was being closed, effective . However, the Department conceded the closure was in error and Petitioner experienced no interruption in benefits. Petitioner acknowledged that was correct. Therefore, the issue of the closure of Petitioner's FAP benefit case will not be addressed, as it is a moot issue.



The Department testified it was unsure how Petitioner's earned income was calculated,

in the amount of \$ and multiplied the number by the 2.15 multiplier. Petitioner's FAP benefit amount was determined to be \$ per month based, in part, on Petitioner's calculated monthly earned income of \$ Petitioner received a monthly

but it is evident that the Department used Petitioner's pay statement from

Per policy, when prospecting income, the Department is required to use income from the past 30 days if it appears to accurately reflect what is expected to be received in the benefit month, discarding any pay if it is unusual and does not reflect the normal, expected pay amounts. BEM 505, pp. 5-6. Based on all of the pay statements submitted by Petitioner, the Department failed to establish that it correctly calculated Petitioner's earned income from employment. The pay statement in the amount of sis much higher than the remaining pay statements submitted by the Petitioner. The Department should have considered that pay stub as unusual and disregarded it when calculating Petitioner's earned income from employment. Because the Department failed to establish that it properly calculated Petitioner's FAP benefits in the amount of for the month of none, ongoing.

amount of the month of the mont

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it calculated Petitioner's FAP benefits. Accordingly, the Department's decision regarding the amount of Petitioner's FAP benefits is **REVERSED**.

Because Petitioner did not timely request a hearing regarding her MA case, the Request for Hearing regarding the matter is, hereby, **DISMISSED.**

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. Recalculate Petitioner's FAP benefits for processing, ongoing;
- 2. If Petitioner is eligible for FAP benefits, issue supplements for any FAP benefits she was eligible to receive but did not from a notation, ongoing; and
- 3. Notify Petitioner of its FAP decision in writing.

the hearing request was made.

Ellen McLemore

Administrative Law Judge for Nick Lyon, Director

Department of Health and Human Services

EM/jaf

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**

Petitioner

