



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: November 6, 2017
MAHS Docket No.: 17-010184
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, an in person hearing was held on September 6, 2017, from [REDACTED] Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by [REDACTED] Family Independence Manager and [REDACTED] Eligibility Specialist.

ISSUE

Did the Department properly process the Petitioner's July 11, 2017 application for Family Independence Program (FIP), State Disability Assistance (SDA), Food Assistance Program (FAP), Medical Assistance (MA), MA Cost Share Program (CSP), and State Emergency Relief (SER)?

FINDINGS OF FACT

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

1. On July 11, 2017, the Petitioner applied for FIP, SDA, FAP, MA, MA CSP, and SER. Department Exhibit 1, pgs. 16-42.
2. The Petitioner receives Social Security RSDI of \$ [REDACTED] per month. Department Exhibit 1, pgs. 43-45.
3. The Petitioner's daughter receives Social Security RSDI of \$ [REDACTED] per month. Department Exhibit 1, pgs. 46-48.

4. The Petitioner receives child support for her daughter of \$ [REDACTED] per month. Department Exhibit 1, pgs. 49-50.
5. The Petitioner has a mortgage of \$ [REDACTED] per month. Department Exhibit 1, pgs. 51-52.
6. The Petitioner pays \$ [REDACTED] in property insurance. Department Exhibit 1, pgs. 53-56.
7. On July 19, 2017, the Department Caseworker sent the Petitioner a Notice of Case Action, that her cash assistance application was denied due to excess income and that she was eligible for \$ [REDACTED] for July 2017 and \$ [REDACTED] from August 2017 forward for FAP benefits for a household group of 2. Department Exhibit 1, pgs. 65-68.
8. On July 19, 2017, the Department Caseworker sent the Petitioner a Health Care Coverage Determination Notice, that the Petitioner was not eligible for MA CSP due to excess income effective August 1, 2017. Department Exhibit 1, pgs. 71-73.
9. On July 19, 2017, the Department Caseworker sent the Petitioner a State Emergency Relief Decision Notice that her SER was denied due to her request that her assistance be stopped. Department Exhibit 1, pgs. 74-75.
10. On July 28, 2017, the Petitioner requested a hearing for FAP through email to protest the Department's negative action.
11. On July 28, 2017, the Petitioner requested a hearing for FAP through email to protest the Department's negative action.
12. On July 31, 2017, the Petitioner requested a hearing to protest the Department's negative action.
13. On August 7, 2017, the Petitioner requested an in-person hearing.

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.

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.

The State Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1-.119b. The SER program is administered by the Department (formerly known as the Family Independence Agency) pursuant to MCL 400.10 and by Mich Admin Code, R 400.7001 through R 400.7049. Department policies are found in the Department of Human Services State Emergency Relief Manual (ERM).

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Health and Human Services (formerly known as the Department of Human Services) administers the SDA program pursuant to 42 CFR 435, MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

In this case, the Petitioner applied for FIP, SDA, FAP, MA, MA CSP, and SER On July 11, 2017,. Department Exhibit 1, pgs. 16-42. The Petitioner receives Social Security RSDI of \$ [REDACTED] per month. Department Exhibit 1, pgs. 43-45. The Petitioner's daughter receives Social Security RSDI of \$ [REDACTED] per month. Department Exhibit 1, pgs. 46-48. The Petitioner receives child support for her daughter of \$ [REDACTED] per month. Department Exhibit 1, pgs. 49-50. The Petitioner has a mortgage of \$ [REDACTED] per month. Department Exhibit 1, pgs. 51-52. The Petitioner pays \$ [REDACTED] in property insurance. Department Exhibit 1, pgs. 53-56.

On July 19, 2017, the Department Caseworker sent the Petitioner a Notice of Case Action, that her cash assistance application was denied due to excess income and that she was eligible for \$ [REDACTED] for July 2017 and \$ [REDACTED] from August 2017 forward for FAP benefits for a household group of 2. Department Exhibit 1, pgs. 65-68. On July 19, 2017, the Department Caseworker sent the Petitioner a Health Care Coverage Determination Notice, that the Petitioner was not eligible for MA CSP due to excess income effective August 1, 2017. Department Exhibit 1, pgs. 71-73. On July 19, 2017, the Department Caseworker sent the Petitioner a State Emergency Relief Decision

Notice that her SER was denied due to her request that her assistance be stopped. Department Exhibit 1, pgs. 74-75.

On July 28, 2017, the Petitioner requested a hearing for FAP through email to protest the Department's negative action. On July 28, 2017, the Petitioner requested a hearing for FAP through email to protest the Department's negative action. On July 31, 2017, the Petitioner requested a hearing to protest the Department's negative action. On August 7, 2017, the Petitioner requested an in-person hearing. BAM 105, 110, 115, 130, and 600. BEM 210, 211, 214, 503, 505, 518, 545, and 550. EMR 102, 103, 301, and 304. RFT 242.

During the hearing, the Department stated that the Petitioner and her daughter were eligible for full MA. She had excess income for MA CSP. Because of her income, her household was only eligible for FAP benefits of \$█ for the month of July 2017 and \$█ for the month of August 2017 forward.

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 that the Petitioner has excess income for MA CSP and cash benefits, verbally withdrew her SER application, and for FAP where her household was only eligible for \$█ for the month of July 2017 and \$█ for the month of August 2017 forward due to income.

DECISION AND ORDER

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



CF/nr

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

DHHS

[REDACTED]

Petitioner

[REDACTED]