



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: February 26, 2018
MAHS Docket No.: 18-000638
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Amanda M. T. Marler

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 February 21, 2018, from Detroit, Michigan. The Petitioner was self-represented. The Department of Health and Human Services (Department) was represented by [REDACTED], Eligibility Specialist, and [REDACTED], Eligibility Specialist.

ISSUE

Did the Department properly calculate Petitioner's Food Assistance Program (FAP) benefits for November 2017?

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 October 3, 2017, Petitioner's Medical Assistance (MA) benefit case was closed for failure to return requested verifications.
2. On January 2, 2018, the Department issued a Notice of Case Action outlining Petitioner's FAP benefit rate from March 2017 through September 2019; her FAP benefit rate fluctuated from March 2017 through October 2017 after consideration of reported one-time medical expenses.
3. The Notice of Case Action shows that Petitioner's benefit rate from November 2017 ongoing was \$ [REDACTED] per month.

4. On January 12, 2018, Petitioner submitted her hearing request disputing the closure of her MA case as well as her FAP benefit rate in April, May, and November of 2017.

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).

Medical Assistance Benefits

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.

Petitioner submitted her hearing request on January 12, 2018, disputing the closure of her MA case. Her MA case was closed effective October 3, 2017.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 792.10101 to R 792.10137 and R 792.11001 to R 792.11020. Rule 792.11002(1) provides as follows:

An opportunity for a hearing shall be granted to an applicant who requests a hearing because his or her claim for assistance is denied or is not acted upon with reasonable promptness, has received notice of a suspension or reduction in benefits, or exclusion from a service program, or has experienced a failure of the agency to take into account the recipient's choice of service.

A client's request for hearing must be in writing and signed by an adult member of the eligible group, adult child, or authorized hearing representative (AHR). Department of Health and Human Services Bridges Administrative Manual (BAM) 600 (April 2017), p. 2. Moreover, BAM 600, p. 6 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.

Petitioner's request for hearing was more than 90 days after the closure of her MA case; therefore, her request for hearing was not timely and the Michigan Administrative

Hearing System does not have jurisdiction to address this issue. Petitioner's request for review of her FAP benefits follows below.

Food Assistance Program Benefits

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.

As discussed above, requests for hearing must be received within 90 days of the negative action or notice of action from the Department. Petitioner submitted her hearing request on January 12, 2018, after receiving a January 2, 2018, Notice of Case Action. Since the Notice of Case Action addressed each month from March 2017 through September 2019, she can properly request a hearing on any issue in the Notice of Case Action including April and May 2017.

In this case, Petitioner disputes the fluctuation of her benefit rate each month. The Department testified that the Petitioner's benefits fluctuated based upon when Petitioner turned in one-time medical expenses. Petitioner cannot identify when she turned in her various medical bills or what she turned in, only that she has repeatedly given the Department her medical bills.

The Department provided two net income budgets reflecting the calculations of Petitioner's benefit rate, one for October 2017, when a significant amount of medical bills were considered, and one for February 2018, when only her Medicare premium was considered. Petitioner agrees that her unearned income is \$ [REDACTED] each month and that she has no child support or dependent care expenses. Furthermore, she agrees with the housing and utility expenses as listed. Therefore, the only item in dispute is Petitioner's medical expenses.

Petitioner is disabled; therefore, she qualifies for the medical deduction for verifiable medical expenses that the SDV member incurs in excess of \$ [REDACTED] BEM 554 (January 2017), p. 1. Allowable medical expenses include Premiums for health and hospitalization policies, prescription drugs, medical supplies, and other items. BEM 554, pp. 9-10.

As discussed above, medical expenses must be verified at initial application and redetermination or in order to continue receiving a deduction for one-time expenses. BEM 554, p. 11. Petitioner provided proof of her medical expenses as often as she could, and the Department processed those expenses upon receipt. The only item for which Petitioner is continually provided a medical deduction is her Medicare premium because that never changes. For all other medical expenses, Petitioner must provide proofs. The Department can only act on the information it has, and Petitioner has not

shown that the Department was provided any additional information upon which the Department has not acted. 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 calculated Petitioner's FAP benefit rate from March 2017 ongoing.

DECISION AND ORDER

PETITIONER'S REQUEST FOR HEARING ON THE CLOSURE OF HER MA CASE IS DISMISSED FOR LACK OF JURISDICTION.

Accordingly, the Department's decision is **AFFIRMED** with regard to the calculation of Petitioner's FAP benefits.



AM/

Amanda M. T. Marler
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]

Petitioner

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