



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR



Date Mailed: April 12, 2018
MAHS Docket No.: 18-001786
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Kevin Scully

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. After due notice, an in-person hearing was held on April 4, 2018, from Flint, Michigan. Petitioner represented herself and her mother testified on her behalf. The Department was represented by [REDACTED], Hearing Facilitator.

ISSUE

Did the Department of Health and Human Services (Department) properly determine Petitioner's eligibility for Food Assistance Program (FAP) benefits?

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 is an ongoing Food Assistance Program (FAP) recipient.
2. On [REDACTED], the Department received a document provided by Petitioner showing medical expenses incurred from [REDACTED], through [REDACTED]. Exhibit A, p 6.
3. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for December of 2017. Exhibit A, pp 7-10.
4. On [REDACTED], the Department received six pages documents provided by Petitioner showing medical expenses. The Department applied two of these

medical expenses as countable but rejected the others because they did not verify a date of service. Exhibit A, pp 11-16.

5. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for January of 2018. Exhibit A, pp 17-20.
6. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for January of 2018. Exhibit A, pp 21-24.
7. On [REDACTED], the Department received a document provided by Petitioner showing medical expenses incurred from [REDACTED], through [REDACTED] and [REDACTED]. Exhibit A, p 25.
8. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for February of 2018. Exhibit A, pp 26-29.
9. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for February of 2018. Exhibit A, pp 30-33.
10. On [REDACTED], the Department notified Petitioner that she was approved for a \$ [REDACTED] allotment of Food Assistance Program (FAP) benefits for March of 2018. Exhibit A, pp 34-37.
11. On [REDACTED] the Department received Petitioner's request for a hearing protesting the amount of her Food Assistance Program (FAP) allotment in January of 2018. Exhibit A, pp 4-5.

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.

The Department will consider only the medical expenses of senior/disabled/veteran (SDV) persons in the eligible group or SDV persons disqualified for certain reasons. A

FAP group is not required to but may voluntarily report changes during the benefit period. The Department will process changes during the benefit period only if they are one of the following:

- Voluntarily reported and verified during the benefit period such as expenses reported and verified for MA deductible.
- Reported by another source and there is sufficient information and verification to determine the allowable amount without contacting the FAP group.

Department of Health and Human Services Bridges Eligibility Manual (BEM) 554 (August 1, 2017), pp 8 – 9.

Groups that do not have a 24-month benefit period may choose to budget a one-time-only medical expense for one month or average it over the balance of the benefit period. Groups that have 24-month benefit periods must be given the following options for one-time-only medical expenses billed or due within the first 12 months of the benefit period:

1. Budget it for one month.
2. Average it over the remainder of the first 12 months of the benefit period.
3. Average it over the remainder of the 24-month benefit period. BEM 554.

The Medical Expenses amount is determined by totaling allowable monthly medical expenses (rounded to whole dollar amounts) and reducing this amount by a \$35 medical deduction. Department of Health and Human Services Bridges Eligibility Manual (BEM) 556 (July 1, 2013), p 4.

Petitioner is an ongoing FAP recipient and she requested a hearing protesting the \$ [REDACTED] allotment of FAP benefits she was granted for January of 2018. This amount of FAP benefits, a reduction from her December 2017 benefits, was caused by her having no countable medical expenses applied towards her eligibility for that month.

The Department provided evidence on the record that the medical expenses that Petitioner provided verification of were applied towards her eligibility for FAP benefits. Of the receipts received by the Department on [REDACTED], only two of those receipts were sufficient to establish countable medical expenses and the remaining receipts did not verify the date of service. Although those two receipts were not applied towards in time to affect her January benefits, they were eventually applied towards the benefits she received in February.

Petitioner testified during the hearing that she had other medical receipts that were not counted but these receipts were not received by the Department before [REDACTED]

Petitioner had more than sufficient medical expenses applied towards her FAP allotment for December of 2017 to allow her to receive the maximum grant of FAP

benefits available for a group of one. BEM 556 allows for medical expenses to be averaged throughout the benefit period to maximize eligibility for FAP benefits.

However, while passing some of the high medical expenses applied towards December would have increased Petitioner's January allotment, they would have also reduced her December allotment. Petitioner received the maximum benefit slowed in December and February, and this Administrative Law Judge finds that Petitioner's verified medical expenses were applied in a manner that maximized the benefits Petitioner was eligible for.

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 has established by a preponderance of evidence that it acted in accordance with Department policy when it determined Petitioner's eligibility for FAP benefits for January of 2018 based on her verified and countable medical expenses.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

KS/hb



Kevin Scully
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]