



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: June 15, 2018
MAHS Docket No.: 18-004056
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Ellen McLemore

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 June 15, 2018, from Detroit, Michigan. Petitioner was present with her daughter, [REDACTED]. The Department of Health and Human Services (Department) was represented by Anthony Couls, Hearing Facilitator.

ISSUE

Did the Department properly deny Petitioner's application for State Emergency Relief (SER) 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. On [REDACTED] 2018, Petitioner submitted an application for SER benefits in the amount of \$[REDACTED] for rent to prevent eviction.
2. Petitioner had monthly unearned income in the form of Retirement, Survivors, and Disability Insurance (RSDI) benefits in the monthly net amount of \$[REDACTED]
3. Petitioner's group consisted of herself and her daughter.
4. On April [REDACTED] 2018, the Department sent Petitioner a State Emergency Relief Decision Notice informing her that her application for SER benefits was denied (Exhibit A).

5. On [REDACTED], 2018, Petitioner submitted a request for hearing disputing the Department's actions.

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 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 Department of Human Services) pursuant to MCL 400.10 and Mich Admin Code, R 400.7001-.7049.

In this case, Petitioner submitted an application for SER benefits on [REDACTED], 2018. Petitioner requested \$[REDACTED] in SER funds for rent to prevent eviction. On April [REDACTED] 2018, the Department sent Petitioner a State Emergency Relief Decision Notice informing her that her SER application was denied, as her copayment exceeded the need to resolve the emergency.

State Emergency Relief (SER) assists individuals and families to resolve or prevent homelessness by providing money for rent, security deposits, and moving expenses. ERM 303 (October 2015), p. 1. SER group members must use their available income and cash assets that will help resolve the emergency. ERM 208 (February 2017), p. 1. The total copayment is the amount the SER group must pay toward their emergency. ERM 208, p. 2. Copayment amounts are deducted from the cost of resolving the emergency. ERM 208, p. 2. In most cases cash assets in excess of \$50 result in an asset copayment. ERM 208, p. 1. Income that is more than the basic monthly income need standard for the number of group members must be deducted from the cost of resolving the emergency. This is the income copayment. ERM 208, p. 1. The income and asset copayments combined together determine the SER group's total copayment. ERM 208, p. 2. ERM 208, p. 1. When processing an application, if the copayment, shortfall, contribution or combination exceeds the need, the application shall be denied. ERM 103 (February 2017), p. 4.

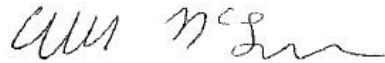
The Department presented Petitioner's co-payment calculation (Exhibit D). In the application, Petitioner indicated she had \$[REDACTED] of monthly unearned income. The Department verified the amount was correct by checking Petitioner's State On-Line Query (SOLQ) report. Petitioner's net income of \$[REDACTED] deducted by the income need standard for a group of two (\$500) is \$[REDACTED] ERM 208, p. 5. Additionally, Petitioner reported she had liquid assets in a checking account. The Department included an asset copayment of \$[REDACTED] Petitioner's asset copayment would be the funds in her checking account in excess of \$[REDACTED] Petitioner confirmed at the hearing that she reported

that she had funds in her checking account to the Department during an interview and that the figure was correct. Petitioner's combined income copayment of \$[REDACTED] and asset copayment of \$[REDACTED] is \$[REDACTED]. Petitioner indicated in the application that the need was \$[REDACTED]. Therefore, the Department acted in accordance with policy when it denied Petitioner's SER application, as her copayment exceeded the need.

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 denied Petitioner's SER application. Accordingly, the Department's decision is **AFFIRMED**.

EM/cg



Ellen McLemore
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) 763-0155; 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

Via Email:

MDHHS-Wayne-18-Hearings
T. Blair
E. Holzhausen
BSC4- Hearing Decisions
MAHS

Petitioner – Via First-Class Mail:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]