



GRETCHEN WHITMER  
GOVERNOR

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

ORLENE HAWKS  
DIRECTOR

[REDACTED]  
[REDACTED]  
[REDACTED] MI [REDACTED]

Date Mailed: April 2, 2019  
MAHS Docket No.: 18-014098  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE:** Jeffrey Kemm

**HEARING DECISION**

Following Petitioner's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, 7 CFR 273.15, and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on March 27, 2019, from Lansing, Michigan. [REDACTED] [REDACTED] Petitioner, appeared and represented herself. Ebony James, Eligibility Specialist, and Lynne Crittendon, Lead Support Specialist for the Office of Child Support, appeared for the Department of Health and Human Services (Department). Neither party had any additional witnesses.

One exhibit was admitted into evidence during the hearing. A 20-page packet of documents provided by the Department was admitted collectively as the Department's Exhibit A.

**ISSUE**

Did the Department properly determine Petitioner's Food Assistance Program (FAP) eligibility?

**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 a FAP benefit recipient. Petitioner's household is composed of herself, and her two minor children. Petitioner has a housing expense of \$175.00 per month, and Petitioner is responsible for heat and utilities in addition to her housing.
2. On May 18, 2018, the Office of Child Support found Petitioner was non-cooperative with the Office of Child Support. The Department found Petitioner disqualified as a result.

3. In July 2018, the Department discovered that one of Petitioner's children was working and had earned income. The Department budgeted the additional income to determine Petitioner's household's correct FAP benefit amount. The Department determined that Petitioner's household had earned income of \$ [REDACTED] between Petitioner and her child with income. The Department also determined that Petitioner had income of \$ [REDACTED] per month from child support.
4. On October 29, 2018, the Department issued a Benefit Notice which notified Petitioner that her FAP benefit was going to be reduced to \$17.00 per month starting in November 2018.
5. On November 1, 2018, Petitioner filed a hearing request to dispute the Department's decision because she disagreed with the monthly FAP benefit amount.

### **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 determines a client's monthly FAP benefit amount by determining the client's group size and countable household income and then looking that information up in its applicable Food Issuance Table. BEM 212 (January 1, 2017), BEM 213 (January 1, 2019), BEM 550 (January 1, 2017), BEM 554 (August 1, 2017), BEM 556 (April 1, 2018), and RFT 260 (October 1, 2018). To determine a client's countable income, the Department considers the expenses and deductions that a client is entitled to such as the standard deduction and excess shelter expense.

Here, Petitioner's group size excluded Petitioner because she was found to be in non-cooperation status by the Office of Child Support. A custodial parent is required to comply with all requests for action or information needed to establish paternity and/or obtain child support on behalf of children for whom she receives assistance. BEM 255 (July 1, 2018), p. 1. Failure to cooperate without good cause results in disqualification. BEM 255, p. 2. Disqualification includes member removal. BEM 255, p. 2. Good cause is limited to two situations: (1) situations in which establishing paternity would harm the child and (2) situations in which establishing paternity would risk physical or emotional harm to the child or custodial parent. BEM 255, p. 3-4. Once an individual is

disqualified, she must remain disqualified until she cooperates. BEM 255, p. 14-15. Here, Petitioner was found to be non-cooperative with the Office of Child Support, and Petitioner did not present sufficient evidence to establish either that she was cooperative or that she had good cause. Thus, I must find that the Department properly disqualified Petitioner for being non-cooperative with the Office of Child Support. Therefore, Petitioner's group size was only two.

Petitioner was entitled to a standard deduction of \$158.00 for a household size of two, and Petitioner was entitled to an excess shelter expense of \$106.00 (based on a housing expense of \$175.00 per month plus a heat/utility standard of \$543.00). Petitioner's household earned income of \$[REDACTED] plus Petitioner's income from child support of \$[REDACTED] less an earned income deduction of \$[REDACTED] less a standard deduction of \$158.00, and less an excess shelter expense of \$106.00 results in a countable income of \$[REDACTED]

Once the Department determines a client's countable income, the Department looks it up in its Food Issuance Table to determine the maximum FAP benefit the client is entitled to receive. RFT 260. A client with a household size of two and a countable income of \$[REDACTED] in November 2018 was entitled to a maximum FAP benefit of \$17.00 per month. Thus, the Department properly determined Petitioner's FAP benefit amount.

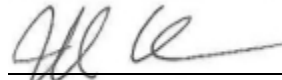
Petitioner alleged that she reported to the Department that her child ceased working in September 2018, that Petitioner's hours were reduced in October or November 2018, and that Petitioner ceased receiving child support in November 2018. Petitioner asserted that the Department should not have budgeted as much income as it did because of the changes she reported. Petitioner was responsible for reporting changes to the Department. The Department had no record of Petitioner reporting the alleged changes, and Petitioner did not present sufficient evidence to establish that she did report the changes. Thus, there is insufficient evidence for me to find that Petitioner reported any change that the Department failed to act on it. Based on the information the Department had, the Department correctly determined Petitioner's FAP benefit amount.

**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 did act in accordance with its policies and the applicable law when determined Petitioner's FAP benefit amount.

IT IS ORDERED the Department's decision is AFFIRMED.

JK/nr



---

Jeffrey Kemm  
Administrative Law Judge  
for Robert Gordon, 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

**DHHS**

Denise McCoggle  
27260 Plymouth Rd  
Redford, MI  
48239

Wayne 15 County DHHS- via electronic  
mail

BSC4- via electronic mail

M. Holden- via electronic mail

D. Sweeney- via electronic mail

**Department Representative**

Office of Child Support (OCS)-MDHHS  
201 N Washington Square  
Lansing, MI  
48933

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED] MI  
[REDACTED]