



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

SHELLY EDGERTON
DIRECTOR

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Date Mailed: February 16, 2017
MAHS Docket No.: 17-000907
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on February 16, 2017, from Detroit, Michigan. The Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by Lynda Brown, Hearing Facilitator.

ISSUE

Did the Department properly calculate the Petitioner's monthly Food Assistance Program (FAP) benefit?

FINDINGS OF FACT

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

1. The Petitioner applied for FAP on ██████████, 2016.
2. The Department issued a Notice of Case Action on January 26, 2017, finding that Petitioner was entitled to \$████ in FAP benefits effective November 7, 2016, ongoing. Exhibit A.
3. The Petitioner receives unearned income from Retirement, Survivors and Disability Insurance (RSDI) in the amount of \$████; and his minor child also receives \$████ in RSDI for a total of \$████. The Petitioner pays a Medicare Part B premium in the amount of \$126 ongoing. Exhibits B and C.
4. The Petitioner pays a mortgage payment, which includes taxes in the amount of \$████ and pays for heat and electric. Exhibits E and F.

5. The Petitioner's FAP group consists of two members.
6. The Petitioner requested a timely hearing on [REDACTED] 2017, protesting the Department's determination.

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.

In this case, the Department processed the Petitioner's FAP application and determined, based upon the information provided to the Department, that the Petitioner was eligible for FAP benefits ongoing in the amount of \$[REDACTED] monthly. The Petitioner sought review of the benefit amount.

The following facts were confirmed as correct by Petitioner at the hearing. The Petitioner receives \$[REDACTED] in RSDI and his minor Child also receives RSDI in the amount of \$[REDACTED] for a total monthly gross income of \$[REDACTED]. The Petitioner pays a Medicare Part B premium in the amount of \$126 and has a mortgage payment of \$811 and pays for heat and electricity. See Exhibits B, E and F. The Petitioner receives RSDI and thus, is deemed disabled.

At the hearing, the Department presented the FAP EDG Net Income Results Budget for November 1, 2016, which was reviewed to determine if the Department properly concluded that Petitioner was eligible to receive \$[REDACTED] in monthly FAP benefits.

All countable earned and unearned income available to the client must be considered in determining the Petitioner's eligibility for program benefits. BEM 500 (July 2016), pp. 1-4. The Department considers the gross amount of money earned or received from RSDI Social Security income due to disability. BEM 503 (July 2016), pp. 31-32.

The Department concluded that Petitioner had unearned income of \$1,925, which was not disputed by the Petitioner. The Department presented a State Online Query (SOLQ) in support of its testimony; Petitioner confirmed that Petitioner receives these amounts; and they were correct. Therefore, the Department properly calculated Petitioner's gross unearned income.

The deductions to income on the Net Income Budget were also reviewed. Petitioner has an FAP group of two members and is a senior/disabled/veteran (SDV) member of the group. BEM 550 (February 2016), pp. 1-2. Groups with one or more SDV members are eligible for the following deductions to income:

- Dependent care expense.
- Excess shelter.
- Court ordered child support and arrearages paid to non-household members.
- Medical expenses for the SDV member(s) that exceed \$35.
- Standard deduction based on group size.
- An earned income deduction equal to 20% of any earned income.

BEM 554 (October 2016), p. 7; BEM 556 (July 2013), p. 3.

In this case, Petitioner did not have any earned income; and there was no evidence presented that he had any dependent care, or paid child support. The Petitioner was credited with medical expenses for his Part B premium of \$127, which was credited as a medical expense once \$35 was deducted, resulting in medical expenses of \$91. Therefore, the budget properly did not include any deduction for earned income, dependent care expenses, child support and the medical expenses credited were correct. Based on his confirmed two-person group size, the Department properly applied the \$151 standard deduction. RFT 255 (October 2014), p. 1.

When the medical expenses, of \$91 and the Standard Deduction of \$151 are deducted from the gross income of \$██████ it is determined that the Department correctly determined the Adjusted Gross Income to be \$██████. ($\$██████ - \$91 - \$151 = \$██████$). Exhibit C.

During the hearing, the issue of medical expenses arose because the Petitioner had previously been credited with his Medicare Part B premium but he did not present any out-of-pocket medical expenses at the time of the FAP application. Medical Expenses are a deductible expense when calculating the FAP benefits, as the Petitioner is disabled and receives RSDI.

Department policy regarding Medical Expenses with regard to calculating FAP benefits is found in BEM 554 which provides:

Consider **only** the medical expenses of SDV persons in the eligible group or SDV persons disqualified for certain reasons; see Expenses for Disqualified or Ineligible Persons in this item. Estimate an SDV person's medical expenses for the benefit period. Base the estimate on all of the following:

- Verified allowable medical expenses.
- Available information about the SDV member's medical condition and health insurance.

Changes that can reasonably be anticipated to occur during the benefit period. BEM 554 (June 1, 2016), p. 8.

One-Time-Only Expenses

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. Bridges will allow the expense in the first benefit month the change can affect.

Allowable Medical Expenses

Allowable medical expenses are limited to the following:

Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional.

Hospitalization or nursing care. Include these expenses for a person who was a group member immediately prior to entering a hospital or nursing home.

Prescription drugs and the postage for mail-ordered prescriptions.

Costs of medical supplies, sickroom equipment (including rental) or other prescribed medical equipment (excluding the cost for special diets).

Over-the-counter medication (including insulin) and other health-related supplies (bandages, sterile gauze, incontinence pads, etc.) when recommended by a licensed health professional.

Premiums for health and hospitalization policies (excluding the cost of income maintenance type health policies and accident policies, also known as assurances). If the policy covers more than one person, allow a prorated amount for the SDV person(s).

Medicare premiums.

Dentures, hearing aids and prosthetics including the cost of securing and maintaining a seeing eye or hearing dog or other assistance animal. (Animal food and veterinary expenses are included.)

Eyeglasses when prescribed by an ophthalmologist (physician-eye specialist) or optometrist.

Actual costs of transportation and lodging necessary to secure medical treatment or services. If actual costs **cannot** be determined for transportation, allow the cents-per-mile amount at the standard mileage rate for a privately owned vehicle in lieu of an available state vehicle. To find the cents-per-mile

amount go to the Michigan Department of Management and Budget at www.michigan.gov/dtmb, select Services & Facilities from the left navigation menu, then select Travel. On the travel page, choose Travel Rates and High Cost Cities using the rate for the current year.

The cost of employing an attendant, homemaker, home health aide, housekeeper, home help provider, or child care provider due to age, infirmity or illness. This cost must include an amount equal to the maximum FAP benefits for one person if the FAP group provides the majority of the attendant's meals. If this attendant care cost could qualify as both a medical expense and a dependent care expense, it **must** be treated as a medical expense.

A Medicaid deductible is allowed if the following are true.

The medical expenses used to meet the Medicaid deductible are allowable FAP expenses.

The medical expenses are not overdue. See below.

Note: Medical marijuana is **not** an allowable medical expense.

Estimating and Determining an Allowable Medical Expense

Estimate an SDV person's medical expenses for the benefit period. The expense does **not** have to be paid to be allowed. Allow medical expenses when verification of the portion paid, or to be paid by insurance, Medicare, Medicaid, etc. is provided. Allow **only** the non-reimbursable portion of a medical expense.

The medical bill cannot be overdue.

The medical bill is **not** overdue if one of the following conditions exists:

Currently incurred (for example, in the same month, ongoing, etc.).

Currently billed (client is receiving the bill for the first time for a medical expense provided earlier and the bill is not overdue).

Client made a payment arrangement before the medical bill became overdue.

BEM 554, pp. 7-12.

As no medical expenses other than the Part B premium were presented during the hearing, thus, the last calculation to determine the FAP benefit allotment is the excess shelter deduction.

In calculating Petitioner's excess shelter deduction, the Department determines the eligible monthly shelter costs. The Department properly considered Petitioner's \$811 mortgage monthly housing expense and \$526 heat and utility allowance as the

Petitioner pays for heat. See BEM 554, pp. 16-19. A review of the excess shelter deduction budget and Department policy shows that the Department properly determined that Petitioner was eligible for an excess shelter deduction of \$496. BEM 556, pp. 4-5; RFT 255, p. 1.

In determining monthly net income of \$█, 50% of the adjusted gross income of \$█ is deducted from the shelter expenses of \$1,337. ($\$1,337 - \$841 = \496). The excess shelter deduction is then deducted from adjusted gross income to determine net monthly income. ($\$█ - \$496 = \$█$). Based on net income of \$█ and an FAP group size of two members, the Department acted in accordance with Department policy when it concluded that Petitioner was eligible for monthly FAP benefits of \$█ BEM 556; RFT 260 (October 2016), p. 8. See Exhibits C and D.

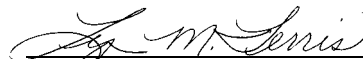
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it calculated Petitioner's FAP benefits.

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 calculated the Petitioner's FAP benefit amount of \$█.

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

LMF/jaf



Lynn M. Ferris

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

LaNecia Sigmon
27690 Van Dyke
Warren, MI 48093

Petitioner

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