



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: November 8, 2018
MAHS Docket No.: 18-010293
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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; 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 October 31, 2018, from Detroit, Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by Shanna Ward, Eligibility Specialist.

ISSUE

Did the Department properly close the Petitioner's Time-Limited Food Assistance (TLFAP) for failure to participate in work requirements without good cause shown?

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 June 27, 2018 the Department issued a Time Limited Food Assistance (TLFA) Notice effective June 12, 2018. The notice set forth the requirements for receipt of food assistance. The form advised that in order for to be eligible for TLFA a participant must work an average of 20 hours a week, or participate in employment and training services 20 hours a week, or participate in self-initiated community service. The notice further advised that if the requirements of work were not met the participant would receive only 3 months' worth of food assistance during the 36 month period January 1, 2017 through December 31, 2019. Exhibit A

2. The June 27, 2018 Notice also advised that the Petitioner that she was required to report to her caseworker any month that she did not fulfill a work requirement. It further advised you may have good cause for not fulfilling the work requirement if there were circumstances beyond your control such as, personal illness, illness or death of a household member, problems with transportation or a household emergency. In addition, additional reasons for nonparticipation were listed on page 2 including inability to work due to physical or mental health impairments that have been documented in the case, responsible for the care of an incapacitated individual and that the participant was to contact the caseworker right away if one of the exemptions applied. Exhibit A.
3. On June 27, 2018 the Department issued a Health Care Coverage Determination Notice advising the Petitioner that she was approved for full coverage medical assistance ongoing, beginning June 1, 2018. Exhibit T.
4. On June 27, 2018 the Department sent the Petitioner a FAP Employment and Training Appointment Notice effective June 12, 2018. The notice indicated that the referral to MWA was not mandatory. The appointment for MWA was July 10, 2018 at 9 AM. The notice was sent so that an individual who was not working could attend the MWA to meet work requirements program. Exhibit Q.
5. On July 24, 2018 the Department Sent the Petitioner a Time-Limited Food Assistance Notice which was effective July 1, 2018 advising Petitioner of the work requirements for eligibility for food assistance. The Notice again advised the Petitioner to contact her specialist in any month that she did not fulfill the work requirements. Exhibit R
6. On July 24, 2018, the Department sent the Petitioner a FAP Employment and Training Appointment Notice for July 31, 2018 indicating again attendance was not mandatory. Exhibit S.
7. On July 30, 2018, a Notice of Time-Limited Food Assistance Countable Month/Out-Of-State Countable Month was sent to the Petitioner indicating that for the month of July 2018 the Department determined that the Petitioner did not meet the hourly work requirements that month. This was the 1st month work requirements were not met and further advised reasons for good cause for failure to participate. Exhibit B.
8. On August 30, 2018 the Department sent a Notice of Time-Limited Food Assistance Countable Months/Out-Of-State Countable Month advising Petitioner that the work participation hours had not been met for the month of August 2018. The notice further indicated this was the 2nd month the hourly participation requirement was not met and further advised reasons for good cause for failure to participate. Exhibit C p
9. On September 17, 2018 the Department sent Petitioner a Time-Limited Food Assistance 3rd Countable Months/Out-Of-State Countable Month Notice. The

notice advised that 2 of the 3 time-limited food assistance countable months had been used. It further advised if you do not meet the time limited food assistance participation requirements this month, you will lose your last countable month and your benefits will close. Exhibit D.

10. On September 10, 2018 the Department also sent Petitioner a FAP Employment and Training Appointment Notice effective September 1, 2018. The appointment was scheduled for September 18, 2018 with Michigan Works. The Petitioner did attend orientation and went to the program thereafter during the month of September 2018. The form advised you must report to your specialist any month that you do not fulfill a work requirement. You may have good cause for not fulfilling the work requirement. Exhibit U.
11. On September 24, 2018, a blank Medical Needs-Path form was sent to Petitioner to be completed and returned to the Department. There was no return due date on the form, the form indicated it must be completed by an MD/D.O./FLP/PhD. Exhibit F.
12. On September 28, 2018, the Department sent a Notice of Time-Limited Food Assistance Countable Months/Out-Of-State Countable Month effective September 2018 to the Petitioner. The Notice advised Petitioner that this was the 3rd month she had not met the hourly participation requirements. Exhibit G
13. A Notice of Case Action dated September 28, 2018 was sent to the Petitioner advising that her Food Assistance would close on October 1, 2018. The notice reasons indicated that Petitioner has used all of her 3 countable months for Time-Limited Food Assistance and failed to become eligible for additional months by failing to participate in employment, self-initiated community service or Michigan Works agency for 80 hours a month. Exhibit H
14. On October 10, 2018, the Department sent Petitioner a Verification Checklist which was due October 22, 2018. The form requested that Petitioner return medical records indicating her mother's disability or physician's statement, or a medical needs form. Exhibit L.
15. On October 6, 2018, the Petitioner's mother, [REDACTED] at the request of Petitioner's caseworker specialist sent the Department a letter advising that Petitioner was her primary caretaker. The letter also advised the Department that in August and September the Petitioner suffered withdrawal from Adderall and Klonopin because she could no longer see her psychiatrist due to her insurance being cancelled. The Petitioner's mother advised in her letter that she can barely walk due to her arthritis and is disabled. Exhibit N.
16. On August 27, 2018 the Petitioner signed a Client Information Release Authorization. Exhibit O.

17. The Petitioner was seen at the [REDACTED] [REDACTED] and [REDACTED] 2018, for substance withdrawal/diagnosis or Complaint as due to Petitioner no longer having her prescribed medications for Klonopin and Adderall. Exhibit P.
18. The Petitioner submitted a completed a DHS 54E Medical Needs form for her mother, [REDACTED] on [REDACTED], 2018. The form required that it be completed by an MD/DO/FLP/PHD. The form indicated that [REDACTED] needed assistance with housework, meal prep, laundry and shopping. The DHS 54A was **not** signed by a doctor, but by a nurse practitioner. Exhibit M.
19. The Petitioner requested a timely hearing [REDACTED], 2018.

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 Petitioner requested a hearing regarding the Department's closure of her time-limited food assistance (TLFA) due to being disqualified during the months of July, August and September 2018 for failing to meet the program work participation requirements, or meet (verify) a deferral. At the hearing, the Petitioner testified that she did not dispute her disqualification for July 2018, but was disputing the month of August 2018 when she lost her job and no longer had medical insurance and was suffering withdrawal from no longer having prescribed medications due to loss of her private pay medical insurance. The Petitioner testified that the cancellation of her private medical insurance caused her to be unable to see her psychiatrist or obtain refills for 2 of her medications Adderall, and Klonopin. Petitioner was sent a Health Care Coverage Determination Notice on June 28, 2018 by the Department indicating that she was eligible for HMP beginning June 1, 2018 ongoing. Thus, even though her private insurance was canceled, the Petitioner was eligible for HMP and had health care insurance. Exhibit T.

Based upon the evidence presented at the hearing, Petitioner did not work or attend Michigan Works during August 2018. Petitioner testified that she lost her job in August 2018 and was ill due to withdrawal from her prescribed medications. In September, the Petitioner began Michigan Works after receiving a Notice to participate on September 10, 2018 to begin MWA participation for an appointment on September 18, 2018. The Petitioner began attending Michigan Works, however did not complete 80 hours of Michigan Works for September 2018, and did not complete any other work participation that could be combined with her MWA participation such as work, a volunteer option. Petitioner testified that she believed that because she attended MWA that everything was fine.

The Petitioner testified that she had called her worker to explain that she was ill and had lost her job and never received a return call. The Petitioner did not provide any medical records or a doctor's excuse to the Department for the month of August 2018 or September 2018. At the hearing the Petitioner provided a hospital treatment form when she was seen on [REDACTED], 2018 and [REDACTED], 2018 due to withdrawal from her prescribed medications.

The Department provided the Petitioner a blank medical needs form to have completed for her personal deferral which required completion by a doctor. In addition, even though Petitioner had lost health insurance, the Petitioner did have HMP. Because the Petitioner had HMP she should have been able to access a doctor to provide her a note regarding her medications problems due to withdrawal. The Petitioner did testify that she went to the hospital, [REDACTED] on [REDACTED] 2018 and [REDACTED] 2018 due to her withdrawal illness. The hospital treatment was confirmed by a hospital medical record dated [REDACTED] 2018. Thereafter, the Petitioner testified that even though she was ill, she attended Michigan Works beginning September 18, 2018 as required by the September 10, 2018 FAP Employment and Training Appointment Notice.

Petitioner also sought a deferral due to having to care for her disabled mother. At the Prehearing Conference held by the Department prior to the hearing, the Petitioner was offered an opportunity to provide a Medical Needs form to verify that Petitioner's mother disability and her mother's need for Petitioner's assistance and care. The Medical Needs Form was due October 22, 2018 and was returned timely, on October 17, 2018, however, the form though completed was not signed by a doctor, as stated as a requirement on the form. The form returned by Petitioner was stamped by a nurse practitioner and not signed. The Petitioner did not read the form closely apparently, and the form was rejected by the Department and no deferral was granted. In addition, the Petitioner testified that her mother's doctor was out of town and was not available to sign the form. The Petitioner testified that the Department did not advise her specifically why the form was rejected and did not advise her that it needed to be signed by a doctor.

The TFLA work requirement is as follows:

For a FAP benefit month not to be countable, a TLFA individual must perform one of the following:

- Work at least 80 hours monthly (20 hours/week on average).

Work includes:

- Work in exchange for money, including self-employment.
- Work in exchange for goods or services (in-kind).
- Participate 80 hours monthly (20 hours/week on average) in an employment and training program administered by the local Michigan Works! Agency (MWA) if available in the county.

Individuals in an MWA employment and training component cannot be required to participate more than 30 hours per week. The MWA may permit a participant to substitute hours of education to meet the 80-hour requirement. BEM 620, p. 3.

- Participate in MWA-assigned Workfare. The number of hours worked must at least equal the FAP benefit divided by minimum wage (\$9.25/hr.), as determined by Bridges.
- Engage in self-initiated community service activities for a non-profit organization. The number of hours worked must equal the FAP benefit amount divided by minimum wage (\$9.25/hr.), as determined by Bridges. BEM 620, 3-4.

The Department policy set forth in BEM 620 contains the TLFA requirements:

A Time-Limited Food Assistance (TLFA) individual must meet specific work requirements to receive benefits. Failure to do

so limits the individual's Food Assistance Program (FAP) eligibility to three months within a 36-month period. TLFA individuals who meet all other FAP eligibility criteria are eligible for three countable months of FAP benefits during a 36-month period.

The 36-month period is a standardized period. Eligible individuals can receive three countable months of benefits within each of the following periods:

First Period: January 1, 2017, through December 31, 2019 BEM 620 (October 2018), p. 1

In addition, all FAP individuals aged 18 through 49 are TLFA unless deferred. A participant may also receive a deferral from the TLFA requirements.

To be deferred from TLFA policy an individual must be one of the following:

- A member of a FAP group that includes a FAP group member under age 18, even if the individual under age 18 is disqualified or otherwise not eligible; see BEM 212.
- In any stage of pregnancy.
- Determined to be medically certified as physically or mentally unfit for employment:
 - Participating in a Michigan Rehabilitation Services program.
 - Obviously mentally or physically unfit for employment, as determined by the worker.
 - A victim of domestic violence.
 - Chronically homeless.
- Deferred from employment-related activities per BEM 230B

In addition, there is a good cause requirement for work absence as follows:

Good cause is having a valid reason for failing to work at least 80 hours monthly (20 hours/week on average), failure to participate in an employment and training program at the MWA or failure to participate in workfare or self-initiated community service.

An individual who worked or participated less than the required hours is considered to have met the work requirement if all the following conditions are met:

- The absence was due to circumstances beyond the individual's control.
- It was temporary.
- The individual has retained the job, MWA employment and training slot, workfare slot or community service position. BEM 620, p. 5

The Department must document a good cause reasons, some examples in Department policy follow:

- Personal illness.
- Death or illness of a household member requiring the presence of the TLFA recipient in the home.
- The unavailability of transportation.
- Lack of work (employer must verify).
- Household emergency.
- Temporarily unfit for work. BEM 620, p. 5

Verification is only required if the specialist considers the claim questionable, and if so a verification checklist will be triggered. BEM 620, p. 6

Penalties are assessed for noncompliance with work participation requirements:

A countable month is a calendar month in which a full FAP benefit is posted to an EBT account and the recipient does not meet a TLFA deferral or work requirement, without good cause.

The specialist must explain to each TLFA individual that the work requirement is in effect for the first full month of benefits and the individual is

responsible for meeting the work requirement in that first month. BEM 620, p. 6

An individual who has received three countable months of FAP benefits can regain FAP eligibility (within the 36-month period) by meeting one of the following within any 30-day period after the last benefit month but prior to application:

- 80 hours of employment.
- TLFA policy does not apply when an individual is deferred per BEM 230B.
- Self-initiated community service for the number of hours determined by Bridges (the number of hours must equal the FAP benefit amount divided by minimum wage) that would have equaled the individual's FAP benefit for that period.
- TLFA deferred; see *time-limited deferrals* in this item.

Note: Individuals who regain eligibility via deferral, then lose the deferral, must meet one of the other criteria above before benefits can be authorized, including the three-month extension. BEM 620, p. 9

Note: There is no limit to the number of times an individual can regain eligibility. Following the extension, for the remainder of the 36 months Bridges will determine the individual's eligibility on a month-to-month basis. Each month the individual must meet the TLFA work requirement or be deferred to receive benefits. If the individual fails to meet the work requirement after the three-month extension, FAP benefits must be recouped for any benefits received for any months the work requirements were not met or the individual was not deferred. BEM 620, p. 11

It is the individual's responsibility to report changes if it results in under 20 hours of any activity. If a change is not reported timely, establish an over-issuance for any ineligible months. BEM 620, p. 12. The Department did issue ongoing Notices to Petitioner throughout the 3 month time period covering August 2018 through September 2018 as

required by Department policy found in BEM 602. However, it was not established that the Department at application explained when the first full month began and that the verification of work based upon the pay stubs submitted did not meet the 80 hour work requirement. Petitioner mistakenly believed that after she provided pay stubs she had met the work requirement.

The Department must verify eligibility factors, work requirement criteria and educational participation:

Verify eligibility factors, work requirement criteria and educational participation.

Verify a reason for deferral from the TLFA work requirement only if it is not obvious and the information provided is questionable (for example, information is unclear, inconsistent or incomplete); see *deferrals* in BEM 230B. Document in the case record the reason for granting the deferral and the length of time before the continuing need for the deferral will be reviewed. BEM 620, p.19

For work-requirement deferrals and work-related activities verify the following:

- Age, hours of employment and/or hours and type of employment and training component, school attendance, in-kind income, and self-initiated community service.
- Pregnancy, if not obvious.
- Good cause claims, if questionable.
- Other deferrals only if not obvious and the information is unclear, inconsistent or incomplete; see *deferrals* in BEM 230B. BEM 620, p. 19

For Physical or Mental Impairment the Department is required to meet the following requirements:

Verify a medical deferral only in cases where the unfitness is not obvious to the specialist. Document in Bridges and set the review date accordingly. In addition, a statement from a nurse, nurse practitioner, designated representative at a doctor's office, social worker, or other medical personnel may be accepted verification. If the impairment is not obvious, a MDHHS-54A, Medical Needs, or an MD/DO statement may

be used. Verify receipt of RSDI based on disability or blindness and SSI.

If an individual cannot obtain verification free of charge, use a MDHHS-93A, Medical Services Authorization/Invoice, to Acceptable verification of a caretaker to a child under 6 or caretaker of a disabled individual includes, but is not limited to:

- Medical records about disability.
- DHS 54A.
- Verification from MSW.
- Physician statement.
- Court order.

authorize payment for medical evidence.

Acceptable verification of a caretaker to a child under 6 or caretaker of a disabled individual includes, but is not limited to:

- Medical records about disability.
- DHS 54A.
- Verification from MSW.
- Physician statement.
- Court order.

Although the Petitioner received the Time Limited Food Assistance Notice dated June 27, 2018 originally sent to her explaining the program requirements she testified that she found the Notice confusing because she was working at the time of the Notice and did not understand was she was being sent to MWA when she was working. The Notice clearly explains the requirements to be fulfilled if a person receiving food assistance wants to continue to receive benefits. The recipient of TLFA **must work 20 hours a week, (80 hours a month) or attend MWA 20 hours a week or volunteer or otherwise be deferred**. The Petitioner provided the Department pay stubs for May 2018 that did not meet the 20 hours a week requirement, the pay stubs were biweekly and were dated May 11, 2018 for 32 hours and May 25, 2018 for 36 hours and did not demonstrate employment for 20 hours a week. In June 2018, the pay stub was for 26 hours for a 2 week period which would have been only 13 hours a week. Thus at the time of the application for TLFA benefits the Petitioner did not meet the 80 hours a month requirement. It was not established that the Department advised Petitioner that she had not met the 80 hour requirement right at the start, and would have to meet the 20 hour weekly requirement in July, 2018 in order to not have a countable month. Petitioner testified she was not contesting her disqualification and receipt of a countable month for the month of July 2018.

After a thorough review of the Notices sent to Petitioner it is clear that on July 24, 2018 the Petitioner was advised that in July 2018 she had to meet the 20 hours weekly work participation requirement and report to her caseworker if she did not fulfill the work requirement. Exhibit R. On the same date in July 2018 the Petitioner was also sent a Michigan Works notice so that she could meet her participation for August if not working enough hours in July 2018. Exhibit S.

On July 30, 2018 Petitioner was advised that she did not meet the work participation for July 2018 and received a countable month. Exhibit B. The Department testified that the Petitioner based upon her pay stubs did not verify 80 hours a month of participation, however it does not appear that her shortfall was communicated to her. In addition, when asked whether she met the 80 hour work requirement the Petitioner was not sure and did not present any pay stubs at the hearing to verify her hours for July 2018. Thus based upon the evidence presented at the hearing, the Department correctly found that Petitioner did not meet her 80 hour work participation requirement. The Petitioner also agreed that she was not disputing July 2018.

In August 2018, the Petitioner also was found to have not met her hourly participation requirement for 80 hours. The Petitioner testified that she lost her job and no longer could see her psychiatrist due to her private insurance premium being raised and cancelled because she could not pay the new higher premium. Because she could no longer afford her insurance, Petitioner testified that she began withdrawing from her prescribed medications prescribed for her treatment for her mental impairment. The Petitioner further testified that she had been doctorless for 2 months. Evidence presented at the hearing indicated however, that Petitioner was approved for HMP by a Health Care Coverage Determination Notice sent to her June 28, 2018 ongoing as of June 1, 2018 and thus had health care available to her even though she was not aware of her health insurance. The Petitioner testified that she was unable to find another doctor but this reason, in light of her having health insurance does not explain why she was unable to obtain medical assistance for her mental health requirements. Based upon the evidence presented, it is determined that the Department properly determined that the Petitioner did not meet her 80 hour work participation requirement, did not report the loss of her job or her health problems and did not verify a deferral and thus the countable month for August 2018 was correctly determined.

It is not clear when the Petitioner reported her mental health and withdrawal illness due to losing her Psychiatrist, however the Department sent the Petitioner a Medical Needs on September 24, 2018. Given the date of the medical needs form the report of medical illness appears to have been made in September 2018 by Petitioner. The form provided by the Department had no due date for the form to be returned, Exhibit F. The medical needs form required that the form be completed by an MD, DO, FLP, or PHD. The Petitioner did not have the Medical Needs form completed because she believed she had no access to a doctor and did not know what other proofs she could submit. She also testified several times that she advised her caseworker that she could not find a doctor due to having no insurance. This was Petitioner's explanation for not meeting her work participation in September 2018. A review of the Notice for August advises the

reason for good cause and states a TLFA recipient must verify good cause, which in this case was illness. The Petitioner also testified that she did not go to [REDACTED] available to her and testified that they would not have helped her.

Overall it is determined that after two months of disqualification the Petitioner could have sought further assistance from the Department to have her questions answered. Based upon the September 24, 2018 Medical Needs form, it is determined that sometime in September, Petitioner was able to communicate with her caseworker that she was ill and needed deferral.

The Petitioner did attend Michigan Works in September, and was sent a MWA notice, however she did not attend Michigan Works until September 18, 2018 and did not complete 80 hours. When asked whether she asked Michigan Works whether she could complete more hours than 20 hours a week the Petitioner testified that she did not think there was an issue with her hours because she was attending 20 hours a week.

The Petitioner credibly testified that she was in the hospital on [REDACTED] 2018 and [REDACTED] 2018 due to withdrawal illness from her prescription drugs, Adderall and Klonopin. She further testified that she could not get verification of her medical problem because she had no doctor to complete the Medical Needs Form. The Department presented no evidence as to whether the caseworker considered the Petitioner's claim questionable or whether the caseworker felt the Petitioner's unfitness was not obvious.

Department policy requires that the Department is to verify a medical or mental deferral only in cases where the unfitness is not obvious to the specialist. Apparently, the specialist assigned to the Petitioner, who did not testify at the hearing, thought verification was necessary because she sent the Petitioner a Medical Needs form but did not send a request for verification. However, Department policy also required that the specialist advise the Petitioner in light of her problem finding a psychiatrist that would see her, that she could also verify her mental impairment and illness from withdrawal with a statement from a nurse, nurse practitioner, designated representative at a doctor's office, social worker, or other medical personnel may be accepted verification. Nor did the evidence confirm whether the Department offered a Medical Services Authorization invoice to assist Petitioner. If an individual cannot obtain verification free of charge, the Department is required to use a MDHHS 93A Medical Services Authorization/Invoice to authorize payment for medical evidence. BEM 620, p. 20. Because there was no evidence or testimony from the Department that the policy was followed, and in light of the Petitioner's un rebutted testimony, it is determined that the Department did not properly impose a countable month for September 2018.

In addition, in light of the hospital treatment on [REDACTED] 2018 and [REDACTED] 2018 due to Petitioner's withdrawal from previously prescribed drugs, and the record verifying the treatment, the Department may not impose a countable month for September 2018 toward the three countable month limit because the Petitioner was deferred from the work requirement on those days. BEM 620 provides that:

A month is not countable toward the three-countable-month limit for receiving FAP benefits if the individual is deferred from the work requirement on any day of the month. BEM 620, p. 7. (emphasis supplied).

Thus, it is determined that the Department based upon the evidence presented at the hearing improperly determined that that the Petitioner received a third countable month for September 2018. The Petitioner is however required to meet future month TLFA requirements for work participation, or seek a deferral for herself, or submit a completed medical needs form signed by a Doctor or DO regarding her mother's disability and need for care by Petitioner to support a deferral for Petitioner due to caring for her mother.

The Petitioner was offered an opportunity to provide a deferral due to having to care for her mother who is disabled. The Petitioner was given a Medical Needs Form to have completed which was timely returned by Petitioner. The Department correctly found that the Medical Needs Form regarding Petitioner's mother's disability could not be used to support the deferral because it was required to be signed by a doctor. Petitioner overlooked this requirement and the doctor was also out of town. As discussed at the hearing, the Petitioner may have a Medical Needs Form completed by her mother's doctor and present it to the Department in support of a deferral for Petitioner; however, the Department based upon the verification received from the Petitioner correctly found the deferral due to caring for her mother did not meet the requirement for deferral in Department policy and on the form.

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 properly determine that July 2018 and August 2018 were countable months due to TLFA requirements not being met, but did not act in accordance with Department policy when it found a countable month for September 2018, as Petitioner was deferred for medical treatment for at least one day in September 2018.

DECISION AND ORDER

Accordingly, the Department's decision is

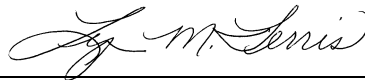
AFFIRMED IN PART with respect to its determinations that the TLFA requirements were not met by Petitioner for the months of July 2018 and August 2018 and properly determined those months as countable months,

REVERSED IN PART with respect to its determination and assessment of a countable month for September 2018.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS

HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. The Department shall reinstate the Petitioner's Food Assistance case and remove the countable month it imposed for September 2018.



LF/tm

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) 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

Amber Gibson
5303 South Cedar
PO BOX 30088
Lansing, MI
48911

Petitioner

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

cc: FAP: M. Holden; D. Sweeney
Ingham County AP Specialist (2)