GRETCHEN WHITMER GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

MARLON I. BROWN, DPA ACTING DIRECTOR



Date Mailed: December 21, 2023 MOAHR Docket No.: 23-008227

Agency No.: Petitioner:

## 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, a telephone hearing was held on December 20, 2023, from Lansing, Michigan. Petitioner represented herself. The Department was represented by Stephanie Shunsky and Alley Haught. Faustin (#10136) acted as an interpreter for Petitioner.

## **ISSUE**

Did the Department of Health and Human Services (Department) properly deny Petitioner's application for Food Assistance Program (FAP) and Medical Assistance (MA) 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 June 2023, the Department received Petitioner's application for Food Assistance Program (FAP) benefits. Exhibit A, p 6.
- 2. On June 2023, Petitioner participated in a mandatory eligibility interview. Exhibit A, p 14.
- 3. On June 2023, the Department requested that Petitioner provide verification of her household income by July 3, 2023. Exhibit A, p 34.
- 4. On June 2023, the Department requested that Petitioner provide verification of her household income by July 3, 2023. Exhibit A, p 37.
- 5. On July 2023, the Department requested that Petitioner provide verification of her household income by July 28, 2023. Exhibit A, p 39.

- 6. On July 2023, the Department notified Petitioner that she was eligible for Food Assistance Program (FAP) benefits as a household of four not receiving any income. Exhibit A, pp 45-46.
- 7. On July 2023, the Department notified Petitioner that a member of her household was not eligible for Medical Assistance (MA) effective August 1, 2023. Exhibit A, p 78.
- 8. On July 2023, the Department requested that Petitioner provide verification of her household income by July 31, 2023. Exhibit A, p 42.
- 9. On August 7, 2023, the Department notified Petitioner that she was not eligible for Food Assistance Program (FAP) benefits as of September 1, 2023. Exhibit A, p 54.
- 10. On September 2023, the Department received another application for assistance. Exhibit A, p 21.
- 11. On September the Department received several receipts showing net income received by a member of Petitioner's household but no verification of gross income. Exhibit A, pp 62-66.
- 12. On September 2023, the Department requested that Petitioner provide verification of her household income by October 19, 2023. Exhibit A, p 58.
- 13. On October 2023, the Department requested that Petitioner provide verification of her household income by October 12, 2023. Exhibit A, p 60.
- 14. On November 16, 2023, the Department received Petitioner's request for a hearing. 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 Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396 through 42 USC 1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10 through 42 CFR 420.25. The Department administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.103 through MCL 400.112k of the Social Welfare Act, MCL 400.1 *et seq.* 

The Food Assistance Program (FAP) is funded under the federal Supplemental Nutrition Assistance Program (SNAP) established by the Food and Nutrition Act of 2008, as

amended, 7 USC 2011 through 7 USC 2036a. It is implemented by the federal regulations contained in 7 CFR 273. The Department administers FAP pursuant to MCL 400.10 of the Social Welfare Act, MCL 400.1 *et seq*, and Mich Admin Code, R 400.3001 through 400.3011.

Clients must cooperate with the local office in determining initial and ongoing eligibility and this includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (October 1, 2023), p 9.

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. The Department uses documents, collateral contacts, or home calls to verify information. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. When documentation is not available, or clarification is needed, collateral contact may be necessary. Department of Human Services Bridges Assistance Manual (BAM) 130 (October 1, 2023), pp 1-10.

Petitioner applied for MA and FAP benefits and the Department requested that she provide verification of her household's income. Petitioner provided some documentation of net income being received by a household member. These documents do not verify gross income, which is necessary to determine eligibility for FAP and MA benefits.

Petitioner testified that she provided the Department with the information that the Department requested, but this claim is not supported by the evidence available during the hearing. Petitioner did provide verification of net income, but this was found to be insufficient to determine her eligibility for benefits.

Petitioner testified that a member of her household remained eligible for MA benefits while others had their MA benefits closed.

All of the members of Petitioner's household are not eligible under the same category of MA, and they have different redetermination periods. A member of Petitioner's household has been eligible for MA benefits and will remain active in that program under emergency waivers that will remain in place for that individual under the end of the certification period.

Petitioner has the burden of establishing her eligibility for benefits and the hearing record supports a finding that Petitioner failed to provide the Department with information necessary to accurately determine her household's eligibility to receive benefits.

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 closed Food Assistance Program (FAP) and Medical Assistance (MA) benefits.

## **DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.

KS/dm

Kevih Scully
Administrative Law Judge

**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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules Reconsideration/Rehearing Request P.O. Box 30639 Lansing, Michigan 48909-8139 <u>Via-Electronic Mail :</u> DHHS

Kimberly Kornoelje Kent County DHHS

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<u>Via-First Class Mail</u>: Petitioner