



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

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████████████████████, MI ██████████

Date Mailed: January 3, 2025
MOAHR Docket No.: 24-012604
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Jeffrey Kemm

HEARING DECISION

On November 14, 2024, Petitioner ██████████ requested a hearing to dispute his public assistance benefits. As a result, a hearing was scheduled to be held on January 2, 2025. Public assistance hearings are held 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; 45 CFR 205.10; and Mich Admin Code, R 792.11002.

The parties appeared for the scheduled hearing. Petitioner appeared and represented himself. Respondent Michigan Department of Health and Human Services (Department) had Lead Worker Melissa Houser appear as its representative. Neither party had any additional witnesses.

ISSUE

Did the Department properly determine Petitioner's FAP benefit amount?

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.
2. Petitioner lives alone.
3. Petitioner receives ██████████ per month for Social Security RSDI.
4. Petitioner receives ██████████ per month for Social Security SSI.
5. Petitioner receives ██████████ per quarter for State SSI Payments.

6. Petitioner pays property taxes.
7. Petitioner pays home utilities, including utilities for heating and/or cooling.
8. The Department determined that Petitioner was eligible for a maximum FAP benefit amount of \$148.00 per month for a group size of one. The Department determined Petitioner's FAP benefit amount using the following information:
 - a. Group size of one.
 - b. ██████ per month in unearned income.
 - c. \$204.00 per month for a standard deduction.
 - d. \$16.67 per month for housing costs.
 - e. \$664.00 per month for a heat/utility standard.
9. The Department determined that Petitioner had ██████ per month in unearned income because Petitioner received ██████ per month for Social Security RSDI, Petitioner received ██████ per month for Social Security SSI, and Petitioner received ██████ per month for State SSI Payments.
10. Petitioner is disputing his 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).

FOOD ASSISTANCE

The Food Assistance Program (FAP) 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 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 net household income, and then looking that information up in its applicable Food Issuance Table. BEM 212 (October 1, 2024), BEM 213 (October 1, 2024), BEM 550 (October 1, 2024), BEM 554 (October 1, 2024), BEM 556 (October 1, 2024), RFT 255 (October 1, 2024), and RFT 260 (October 1, 2024).

Based on Petitioner's gross unearned income of ██████ per month, Petitioner's housing cost of \$16.67 per month, and Petitioner's obligation to pay his heating/cooling utilities,

Petitioner's net income is [REDACTED] per month. Based on Petitioner's net income of [REDACTED] per month and Petitioner's group size of one, the maximum FAP benefit amount that Petitioner is eligible for is \$148.00 per month. This is the same amount the Department determined that Petitioner was eligible for.

Although Petitioner may not actually have a net income of [REDACTED] per month to pay his expenses, the Department properly determined Petitioner's net income for purposes of computing his FAP benefit amount. The Department followed the applicable policies and used the maximum deductions it was permitted to use to calculate Petitioner's net income and FAP benefit amount.

Petitioner testified that his housing cost is greater than \$16.67 per month. However, Petitioner did not present any evidence to establish that he provided proof to the Department that he had a housing cost greater than \$16.67 per month. Petitioner may provide the Department with proof that he has a housing cost greater than \$16.67 per month, and the Department will recalculate Petitioner's FAP benefit amount. Additionally, Petitioner testified that he pays an internet expense, but Petitioner did not provide proof that he reported it to the Department. Petitioner may provide the Department with proof that he has an internet expense, and the Department will recalculate Petitioner's FAP benefit amount. It is Petitioner's responsibility to report changes in his income and expenses to the Department.

MEDICAID

The Department erroneously issued health care coverage determination notices to Petitioner that notified Petitioner that he was ineligible for Medicaid and Medicare Savings Program coverage. These notices were issued in error for case 101984401. Petitioner does not have Medicaid or Medicare Savings Program coverage in case 101984401 because Petitioner has full-coverage Medicaid and Medicare Savings Program coverage in case 137347592. Petitioner has a separate case for his Medicaid and Medicare Savings Program coverage because Petitioner receives Social Security SSI. Since Petitioner has full-coverage Medicaid and Medicare Savings Program coverage, the Department has not taken any negative action against Petitioner's Medicaid or Medicare Savings Program coverage.

Petitioner asserted that he wants to be reimbursed for Medicare Part B premiums that he had to pay for past months (beginning September 2023). Petitioner did not present sufficient evidence to establish that his hearing request was submitted timely to dispute Medicare Savings Program coverage for the months involved. A hearing request must be submitted within 90 days from the date of the written notice of case action. BAM 600 (June 1, 2024), p. 6. Petitioner did not present sufficient evidence to establish that he requested this hearing within 90 days from the date of a written notice of case action involving Medicare Savings Program coverage for the months involved.

STATE EMERGENCY RELIEF (SER)

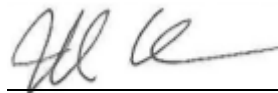
Petitioner asserted that he needs wood for heat, and the Department will not help him. The Department asserted that it approved Petitioner's SER application for wood for heat, but Petitioner's wood provider does not accept SER payments. The Department instructed Petitioner to contact one of the wood providers that will accept SER payments, and the Department provided Petitioner with contact information for those wood providers. If Petitioner disagrees with the Department's decision on his SER application, Petitioner may request a hearing to dispute the decision. If Petitioner chooses to request a hearing, Petitioner should specifically state in his hearing request that he is disputing the Department's SER decision.

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 its policies and the applicable law when it determined Petitioner's Food Assistance Program benefit amount.

IT IS ORDERED, the Department's decision is **AFFIRMED**.

JK/pe



Jeffrey Kemm

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

