



Date Mailed: February 28, 2025

Docket No.: 25-005069

Case No.: [REDACTED]

Petitioner: [REDACTED]

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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

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Ky është një dokument ligjor i rëndësishëm. Ju lutem, kini dikë ta përktheti dokumentin.

### **HEARING DECISION**

On [REDACTED], Petitioner [REDACTED] requested a hearing to dispute public assistance benefits. As a result, a hearing was scheduled to be held on February 25, 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 herself. Respondent Michigan Department of Health and Human Services (Department) had Eligibility Specialist Kevyn Sawdon appear as its representative.

Both parties provided sworn testimony, and one exhibit was admitted into evidence. A 75-page packet of documents provided by the Department was admitted collectively as Exhibit A.

### **ISSUE**

Did the Department properly close Petitioner's FAP benefits?

### **FINDINGS OF FACT**

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

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1. On October 1, 2024, the Department mailed a semi-annual contact notice to Petitioner. The notice instructed Petitioner to complete the form and return it to the Department by October 21, 2024, to renew her eligibility for FAP benefits. The notice informed Petitioner that her FAP benefits would end on November 30, 2024, if she did not return the form as instructed.
  2. Petitioner did not return the semi-annual contact form to the Department by October 21, 2024, as instructed, so the Department closed Petitioner's FAP benefits, effective November 30, 2024.
  3. The Department did not send a notice of FAP closure to Petitioner.
  4. Petitioner contacted the Department when she realized that the Department did not issue her FAP benefit for December 2024. At that time, Petitioner learned for the first time that her FAP benefits closed because she did not return a semi-annual contact form. Petitioner was previously unaware that she needed to return a semi-annual contact form.
  5. Petitioner attempted to complete the semi-annual contact form after she contacted the Department, but Petitioner was unable to access the form, so Petitioner reapplied for FAP benefits on December 19, 2024.
  6. The Department approved Petitioner for FAP benefits, effective the date of her application.
  7. On December 23, 2024, the Department mailed a notice of case action to Petitioner to notify her that she was approved for FAP benefits, effective December 19, 2024. The notice informed Petitioner that she was eligible for a FAP benefit of \$322.00 for December 19, 2024, through December 31, 2024, and it informed her that she was eligible for a FAP benefit of \$768.00 per month thereafter.
  8. On [REDACTED], Petitioner requested a hearing to dispute the Department's decision because the Department did not approve her for FAP benefits for the full month of December 2024.
  9. On February 5, 2025, the Department mailed a notice of FAP closure to Petitioner to notify her that her FAP benefits closed, effective December 1, 2024, because she failed to return a semi-annual contact form by November 30, 2024.

### **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).

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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.

A semi-annual contact notice is used for FAP groups assigned a 12-month benefit period. BAM 210 (October 1, 2024), pp. 11-12. The client must submit a complete semi-annual contact form, which means that the client must complete all sections and provide required verifications. *Id.* If the Department does not receive the complete semi-annual contact form by the tenth day of the sixth month of the benefit period, then the Department is required to issue a FAP closure notice as a reminder to return it by the last day of the month. *Id.* at 14. The complete semi-annual contact form and required verifications must be received and recorded by the Department no later than the last day of the sixth month of the benefit period. *Id.* at 11-12. When a client does not return a semi-annual contact form by the last day of the sixth month of the benefit period, the Department automatically closes the client's FAP benefits. *Id.* at 14-15. If the client reapplies, it is treated as a new application, and benefits are prorated from the application date. *Id.*

In this case, the Department did not act in accordance with BAM 210 because the Department did not send Petitioner a FAP closure notice as required. When the Department did not receive Petitioner's complete semi-annual contact form by November 10, 2024, the Department should have issued a FAP closure notice to Petitioner to remind her that she needed to return the complete semi-annual contact form by the end of the month. The Department failed to do so, so the Department did not act in accordance with policy. Therefore, the Department's decision is reversed. The Department must reinstate Petitioner's FAP benefits, effective December 1, 2024; and the Department must issue Petitioner a supplement for the FAP benefits that she should have received for December 1, 2024, through December 18, 2024.

### **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 not act in accordance with its policies and the applicable law when it closed Petitioner's FAP benefits.

**IT IS ORDERED** that the Department's decision is **REVERSED**. The Department must reinstate Petitioner's FAP benefits, effective December 1, 2024, and the Department must issue Petitioner a supplement for the FAP benefits that she should have received

for December 1, 2024, through December 18, 2024. The Department must begin to implement this order within 10 days of the mailing date of this hearing decision.



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**JEFFREY KEMM**  
**ADMINISTRATIVE LAW JUDGE**

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**APPEAL RIGHTS:** Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at [courts.michigan.gov](https://courts.michigan.gov). The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://lrs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to [MOAHR-BSD-Support@michigan.gov](mailto:MOAHR-BSD-Support@michigan.gov), **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to  
Michigan Office of Administrative Hearings and Rules  
Rehearing/Reconsideration Request  
P.O. Box 30639  
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks.

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