Michigan Office of Administrative Hearings and Rules P.O. Box 30639 Lansing, MI 48909



Date Mailed: March 20, 2025 **Docket No.:** 25-008167

Case No.:

Petitioner:



This is an important legal document. Please have someone translate the document.

এই। এইট ইট্টেই ন্দুর্ক গ্রেক গ্রেক্ট গ্রেক্ট ক্রিক্ট ক্রিক্ট গ্রেক্ট ক্রিক্ট গ্রেক্ট ক্রিক্ট জ্বাহিনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

Este es un documento legal importante. Por favor, que alguien traduzca el documento.

这是一份重要的法律文件。请让别人翻译文件。

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

ADMINISTRATIVE LAW JUDGE: Danielle R. Harkness

HEARING DECISION

On February 18, 2025, Petitioner, ______, requested a hearing to dispute a Food Assistance Program (FAP) benefit overpayment. Following Petitioner's hearing request, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, 7 CFR 273.15, 45 CFR 205.10, and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on March 18, 2025. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Krysenda Slayton, Overpayment Establishment Analyst.

A 60-page packet of documents provided by the Department was admitted collectively as the Department's Exhibit A.

<u>ISSUE</u>

Did the Department properly determine that Petitioner owes the Department a debt of \$1,798.00 for FAP benefits that were overpaid to Petitioner from July 1, 2020, through August 31, 2020?

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 ______ 2019, Petitioner submitted a redetermination and reported that Petitioner was working 24 hours bi-weekly, and Petitioner's FAP group member, _____, was working 40 hours weekly at ______ earning \$_____ per week.
- 2. On January 8, 2020, the Department mailed a notice of case action to Petitioner to notify Petitioner that Petitioner was approved for a FAP benefit of \$364.00 from November 1, 2019, through November 30, 2019, and \$710.00 per month from December 1, 2019, through October 31, 2020. The notice instructed Petitioner to report to the Department when Petitioner's household income exceeds the simplified reporting income limit of \$3,269.00.
- 3. On January 14, 2020, the Department mailed a notice of case action to Petitioner to notify Petitioner that Petitioner was approved for a FAP benefit of \$877.00 per month from January 1, 2020, through October 31, 2020. The notice instructed Petitioner to report to the Department when Petitioner's household income exceeds the simplified reporting income limit of \$3,748.00.
- 4. On 2020, Petitioner submitted a semi-annual contact report and reported no household earned income.
- On July 18, 2020, the Department mailed a notice of case action to Petitioner to notify Petitioner that Petitioner was approved for a FAP benefit of \$877.00 per month from May 1, 2020, through October 31, 2020.
- 6. On October 14, 2020, an employer statement was received from stating that has been employed since August 15, 2002, working 40 hours per week and is paid \$ weekly. A payroll report from January 2020 through October 2020 was also included.
- 7. From July 1, 2020, through July 31, 2020, Petitioner received \$877.00 in FAP benefits.
- 8. From August 1, 2020, through August 31, 2020, Petitioner received a monthly COVID-19 supplement of \$44.00 resulting in Petitioner receiving a total monthly FAP benefit of \$921.00 (\$877.00 + \$44.00).
- 9. In July 2020, received \$ in gross income from 10. In August 2020, received \$ in gross income from 10.
- 11. Petitioner did not timely report when Petitioner's income exceeded the simplified reporting income limit of \$3,748.00.

- 12. The Department was unaware of the total amount of Petitioner's household's income, so the Department continued to issue FAP benefits to Petitioner without properly budgeting Petitioner's household's total income.
- 13. The Department recalculated Petitioner's FAP benefit amount from July 1, 2020, through August 31, 2020, by budgeting Petitioner's household's income. The Department determined that Petitioner was eligible for FAP benefits of \$0.00 from July 1, 2020, through August 31, 2020.
- 14. The Department determined that Petitioner was overpaid \$1,798.00 in FAP benefits from July 1, 2020, through August 31, 2020.
- 15. On February 12, 2025, the Department notified Petitioner of the overpayment.
- 16. On February 18, 2025, Petitioner requested a hearing to dispute the overpayment

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 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.

In this case, the Department determined that it overpaid FAP benefits to Petitioner because it did not properly budget Petitioner's household's income. When a client receives more benefits than the client was entitled to receive, the Department must attempt to recoup the overissuance. BAM 700 (October 1, 2018), p. 1. The overissuance amount is the amount of benefits in excess of the amount the client was eligible to receive. *Id.* at p. 2. Based on the evidence presented, the Department overpaid FAP benefits to Petitioner.

From July 1, 2020, through August 31, 2020, Petitioner was issued \$1,798.00 in FAP benefits. These benefits were issued to Petitioner without properly budgeting Petitioner's household's income. This caused the Department to issue Petitioner more FAP benefits than Petitioner was eligible to receive. The overpayment was due to Petitioner's error because Petitioner did not report when Petitioner's household's income exceeded the simplified reporting limit of \$3,748.00. Based on Petitioner's income, Petitioner was eligible for FAP benefits of \$0.00 from July 1, 2020, through August 31, 2020. Thus, Petitioner was overpaid \$1,798.00 in FAP benefits from July 1,

2020, through August 31, 2020. The Department properly instructed Petitioner of the simplified reporting requirements, and no evidence was presented to show that the Department's actions were improper.

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 that Petitioner owes the Department a debt of \$1,798.00 for FAP benefits that were overpaid to Petitioner from July 1, 2020, through August 31, 2020.

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

DANIELLE R. HARKNESS ADMINISTRATIVE LAW JUDGE

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. 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. 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, 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. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed

Via Electronic Mail: Respondent

GENESEE COUNTY DHHS UNION ST DIST 125 E UNION ST 7TH FL

FLINT, MI 48501

MDHHS-GENESEE-UNIONST-HEARINGS@MICHIGAN.GOV

Agency Representative

KRYSENDA SLAYTON OVERPAYMENT ESTABLISHMENT SECTION (OES) 235 S GRAND AVE STE 811 LANSING, MI 48933

MDHHS-RECOUPMENT-HEARINGS@MICHIGAN.GOV

Interested Parties

BSC2 M HOLDEN B CABANAW MOAHR

Via First Class Mail:

Petitioner

MI