



Date Mailed: April 4, 2025

Docket No.: 25-008479

Case No.: [REDACTED]

Petitioner: [REDACTED]

«RECIP_FULL_NAME»

«RECIP_ADD0»

«RECIP_ADD1»

«RECIP_ADD2»

«RECIP_CITY», «RECIP_SPCODE»

«RECIP_POSTAL»

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هذه وثيقة قانونية مهمة. يرجى أن يكون هناك شخص ما يترجم المستند.

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

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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.

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; and Mich Admin Code, R 792.11002. After due notice, a hearing was held via telephone conference on March 26, 2025. Petitioner appeared for the hearing and represented himself. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Lori Turner, Eligibility Specialist.

ISSUE

Did the Department properly deny Petitioner's application for Food Assistance Program (FAP) and State Emergency Relief (SER) benefits?

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA) benefits?

Did the Department properly terminate Petitioner's State Supplement SSI Payment (SSP) program 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. Petitioner was previously approved for Supplemental Security Income (SSI) through the federal Social Security Administration (SSA).
 2. Petitioner was previously an ongoing recipient of SSP benefits through the Department.
 3. Petitioner was previously approved for MA under the MA for SSI recipients category and case number ending in [REDACTED]
 4. Petitioner confirmed that he last received SSI benefits in October 2024.
 5. Petitioner's MA coverage was transferred to the MA Terminated SSI category for November 2024, December 2024, and January 2025 under case number ending in [REDACTED] (Exhibit A, pp. 36-38)
 6. On or around February 7, 2025, Petitioner submitted an application requesting FAP, MA, and SER assistance. (Exhibit A, pp. 18-28)
 7. On or around February 7, 2025, the Department sent Petitioner a Health Care Coverage Determination Notice advising that effective February 1, 2025, ongoing, he was approved for full coverage MA benefits, under case number ending in [REDACTED] (Exhibit B)
 8. On February 10, 2025, the Department sent Petitioner a Verification Checklist (VCL) for the FAP case instructing him to submit proof of his assets/bank checking account, donation or contribution from an individual outside the group, alien status information for [REDACTED] earned and unearned income, and tax credit refund by February 20, 2025. (Exhibit A, pp. 29-31)
 9. On February 10, 2025, the Department sent Petitioner a SER Verification Checklist instructing him to submit proof of donation or contribution from an individual outside the group and alien status information for [REDACTED] by February 18, 2025. (Exhibit A, pp. 32-33)
 10. On February 15, 2025, the Department sent Petitioner a Notice of State SSI Payment to Change advising him that his quarterly SSP has been cancelled. The reason for the change was that the SSA notified the Department that Petitioner did not receive a regular first of the month SSI payment for three months. The Notice further advised Petitioner that he must receive the regular first of the month SSI payment in order to be eligible for a State SSI Payment. (Exhibit A, pp.34-35)
 11. On or around February 18, 2025, the Department received verification of donation or contribution from an individual outside of the group and proof of the checking account.

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12. The Department asserted that it did not receive the verification of alien status for group member [REDACTED] or the tax refund by the due dates identified on the VCL.
 13. On or around February 21, 2025, the Department sent Petitioner a Notice of Case Action advising Petitioner that his FAP application was denied due to a failure to verify requested information. (Exhibit A, pp. 8-12)
 14. On or around February 21, 2025, the Department sent Petitioner a State Emergency Relief Decision Notice advising that his request for SER assistance was denied because he failed to provide proof of information requested in the VCL. (Exhibit A, pp. 13-15)
 15. On or around February 24, 2025, Petitioner requested a hearing disputing the Department's actions with respect to the SSP, MA, FAP, and SER programs. (Exhibit A, pp. 3-4)

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).

SSP

The State SSI Payments (SSP) program is established by 20 CFR 416.2001-.2099 and the Social Security Act, 42 USC 1382e. The Department administers the program pursuant to MCL 400.10.

SSI is a cash benefit to needy persons who are aged (at least 65), blind or disabled. It is a federal program administered by the Social Security Administration (SSA). States are allowed the option to supplement the federal benefit with state funds. In Michigan, SSI benefits include a basic federal benefit and an additional amount paid with state funds. The amount of the state benefit varies by living arrangement. BEM 660 (October 2021), p.1.

The Department issues SSP benefits to SSI recipients in the following living arrangements: Independent living or Household of another (Living in the household of another person and receiving partial or total support and maintenance in kind from that person). SSP payments are issued quarterly and payment levels are determined by RFT 248. BEM 660, pp.1-2; RFT 248 (January 2021), pp. 1-3. Payments are made for only those months the SSI recipient received a regular first of the month federal benefit. These are shown as a recurring payment dated the first of the month on the State Online Query (SOLQ). SSPs are not issued for retroactive or supplemental federal benefits. BEM 660, pp. 1-2. SSP benefits are issued quarterly and are paid the last

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month of each quarter. The DHS – 430, Notice of State SSI Payment Change is sent to each SSI recipient whose current quarterly SSP payment is less than the previous quarterly state SSP payment. The Notice gives recipients timely notice of any proposed benefit reduction, notifies recipients of their hearing rights, and notifies recipients of the date they will receive their next reduced quarterly check. BEM 660, p.3

Petitioner requested a hearing disputing the information in the February 15, 2025, Notice of State SSI Payment to Change and the Department's termination of his quarterly [REDACTED] State SSI Payment. The Department testified that it received information from the SSA indicating that Petitioner is no longer eligible for SSI benefits and that Petitioner's SSI benefits have been terminated and no payments issued to Petitioner after November 2024. Petitioner did not dispute the evidence presented by the Department and confirmed that he has not received any SSI benefits since October 2024.

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 because Petitioner was no longer receiving SSI benefits, the Department acted in accordance with Department policy when it terminated Petitioner's SSP benefits, because, for at least three months, Petitioner had not received a recurring SSI payment dated first of the month.

MA

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-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-.25. The Department (formerly known as the Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

Petitioner requested a hearing disputing the Department's actions regarding the MA program. Petitioner's hearing request indicates that he was denied MA benefits. However, Petitioner could not identify whether he received any denial or case closure notices from the Department, so the exact negative action was unclear. Petitioner also did not present any evidence that he was denied medical services or had any out of pocket expenses due to a closure of his MA case.

The Department representative testified that because Petitioner's SSI benefits were terminated, he was no longer eligible for MA under the MA for SSI recipients category. The Department presented an eligibility summary for case number ending in [REDACTED] showing that Petitioner's MA coverage was transferred to the MA Terminated SSI category for November 2024, December 2024, and January 2024. (Exhibit A, pp. 36-38). The Department asserted that it is possible that Petitioner received a case closure notice for case number ending in [REDACTED] as his MA for SSI recipients case was closed in order to open his coverage under case number ending in [REDACTED]. However, the

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Department asserted that there was no lapse in Petitioner's MA coverage. The Department presented the February 7, 2025, Health Care Coverage Determination Notice that was sent to Petitioner advising that effective February 1, 2025, ongoing, he was approved for full coverage MA benefits. (Exhibit B). The Department testified that Petitioner's MA benefits were approved under the full coverage Ad-Care category. The evidence established that although Petitioner's MA eligibility was transferred to a different case number, Petitioner was approved for full coverage MA benefits. Petitioner did not present any evidence that there was a negative action taken with respect to his MA case in the 90 days prior to the hearing request. See BAM 600.

Upon review, the Department properly determined Petitioner's MA eligibility and approved his MA benefits under the full coverage Ad-Care category.

FAP/SER

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.

The State Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1-.119b. The SER program is administered by the Department (formerly known as the Department of Human Services) pursuant to MCL 400.10 and Mich Admin Code, R 400.7001-.7049.

In this case, Petitioner disputed the Department's denial of his February 7, 2025, FAP and SER application.

Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (May 2024), p.1. To request verification of information, the Department sends a verification checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. Although the client must obtain the required verification, the Department must assist if a client needs and requests help. If neither the client nor the Department can obtain the verification despite a reasonable effort, the Department is to use the best available information; and if no evidence is available, the Department is to use its best judgment. BAM 130, pp. 3-4. For FAP cases, clients are given 10 calendar days to provide the verifications requested by the Department. Verifications are considered to be timely if received by the date they are due. The Department sends a negative action notice when the client indicates a refusal to provide a verification **or** the time period given has elapsed and the client has not made a reasonable effort to provide it. BAM 130, pp. 7-8.

For the SER program, clients must be informed of all verifications that are required and where to return verifications. The Department will send a SER Verification Checklist

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(VCL) to request verifications and to notify the client of the due date for returning the verifications. The due date is eight calendar days beginning with the date of application. If the application is not processed on the application date, the deadline to return verification is eight calendar days from the date verification is requested. This does not change the standard of promptness date. ERM 103 (October 2023), pp.1-8. The client must make a reasonable effort to obtain required verifications. The specialist must assist if the applicant needs and requests help. If neither the client nor the specialist can obtain the verifications, despite a reasonable effort, use the best available information. If no evidence is available, the specialist must use their best judgment. Verifications are considered timely if received by the date they are due. ERM 103, pp.1-8. The Department will inform all SER applicants in writing of the decision made on their application by sending a DHS-1419, Decision Notice advising of the approval or denial of the application. ERM 108, pp. 1-8.

At the hearing, the Department representative testified that in connection with the February 7, 2025, FAP and SER application, the Department issued the February 10, 2025, FAP VCL and February 10, 2025, SER VCL instructing Petitioner to submit requested verifications, including verification of alien status of [REDACTED] by the February 20, 2025, and February 18, 2025, due dates identified on each VCL.

The Department representative testified that although Petitioner timely submitted proof of the donation received from an individual outside the group, because Petitioner failed to timely submit verification of alien status of household member [REDACTED] by the due dates, it initiated the denial of the FAP and SER application by issuing the February 21, 2025, Notice of Case Action and the February 21, 2025, SER Decision Notice. The Department representative testified that it was unable to verify alien status of the household member using SAVE or another interface and thus, Petitioner was required to submit the verification in order for the Department to determine the household's eligibility to receive FAP and SER. The Department representative testified that there was no evidence that Petitioner requested an extension or additional time to submit the requested verification or that Petitioner requested assistance from the Department in obtaining the verifications that were requested.

Petitioner's testimony as to whether he received the verification checklists was unclear and inconsistent. Petitioner initially testified that he received the verification checklists late, on or around February 26, 2025. Later in the hearing, Petitioner asserted that he only received one of the verification checklists. It is noted that both VCLs instructed Petitioner to submit proof of alien status of the household member. Additionally, Petitioner did timely submit proof of donation received from an individual outside the group, which suggests that he did timely receive at least one of the VCLs. Petitioner did not dispute that he failed to timely return proof of alien status for household member [REDACTED]

Upon review, the evidence established that because the requested verification was not submitted by the due date identified on the FAP VCL and SER VCL, the Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the


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reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it denied Petitioner's February 7, 2025, FAP and SER application.

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 Department policy when it denied Petitioner's FAP/SER application, closed his SSP case, and processed his MA benefits.

Accordingly, the Department's decisions are **AFFIRMED**.



ZAINAB A BAYDOUN
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

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B CABANAW
M HOLDEN
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E HOLZHUASEN
M SCHAEFER
EQAD
MOAHR

Via First Class Mail:

Petitioner

_____, MI _____