



Date Mailed: April 24, 2025

Docket No.: 25-011768

Case No.: [REDACTED]

Petitioner: [REDACTED]

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

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

এটি একটি গুরুত্বপূর্ণ আইনি 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.

### **HEARING DECISION**

On March 26, 2025, Petitioner [REDACTED] requested a hearing to dispute a Food Assistance Program (FAP) determination. As a result, a hearing was scheduled to be held on April 22, 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 Assistance Payments Supervisor Ahmed Elahrag and Lead Worker Jacob Kojiro appear as its representatives. Neither party had any additional witnesses.

Both parties provided sworn testimony, and one exhibit was admitted into evidence. A 32-page packet of documents provided by the Department was admitted into evidence collectively as Exhibit A.

### **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 is a senior or disabled individual.
  3. Petitioner receives a gross monthly benefit of \$[REDACTED] from Social Security RSDI.
  4. Petitioner pays \$[REDACTED] per month for rent, which includes all of her utilities.
  5. Petitioner pays a telephone expense.
  6. Petitioner pays an internet expense.
  7. In August 2024, Petitioner received an \$[REDACTED] Low Income Home Energy Assistance Payment (LIHEAP) payment.
  8. On December [REDACTED] 2024, Petitioner submitted a redetermination form to the Department to renew her FAP eligibility.
  9. The Department ran a LIHEAP report to verify whether Petitioner was eligible for the heat/utility standard, and the Department determined that Petitioner was not eligible for the heat/utility standard because Petitioner did not receive a LIHEAP payment of at least \$20.01 in the past 12 months, Petitioner did not receive energy-related state emergency relief (SER) in the past 12 months, and Petitioner did not receive Michigan Energy Assistance Program (MEAP) funds in the past 12 months.
  10. On February [REDACTED] 2025, Petitioner provided the Department with a receipt for a \$[REDACTED] payment to [REDACTED] [REDACTED] from September 2024. This was a payment for the first three months of service for a medical alert button.
  11. On February [REDACTED] 2025, Petitioner provided the Department with a receipt for a \$[REDACTED] payment to [REDACTED] [REDACTED] from February 2025. Petitioner is required to pay \$[REDACTED] per month for her medical alert button.
  12. The Department redetermined Petitioner's FAP eligibility, and the Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit for February 2025. The Department determined Petitioner's FAP benefit amount based on the following:
    - a. Group size of one.
    - b. \$[REDACTED] per month for unearned income.
    - c. \$[REDACTED] per month for housing costs.
    - d. \$[REDACTED] per month for a standard deduction.
    - e. \$[REDACTED] per month for a non-heat electric standard.
    - f. \$[REDACTED] per month for a telephone standard.
    - g. \$[REDACTED] per month for an internet standard.

- 
- 
13. The Department determined that Petitioner was eligible for a \$[REDACTED] per month standard medical deduction beginning in March 2025, which increased Petitioner's FAP benefit amount. The Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit beginning in March 2025. The Department determined Petitioner's FAP benefit amount based on the following:
- a. Group size of one.
  - b. \$[REDACTED] per month for unearned income.
  - c. \$[REDACTED] per month for housing costs.
  - d. \$[REDACTED] per month for a standard deduction
  - e. \$[REDACTED] per month for a non-heat electric standard.
  - f. \$[REDACTED] per month for a telephone standard.
  - g. \$[REDACTED] per month for an internet standard.
  - h. \$[REDACTED] per month for a standard medical deduction.
14. On February [REDACTED] 2025, the Department mailed a notice of case action to Petitioner to notify her that she was approved for a \$[REDACTED] FAP benefit for February 2025 and a \$[REDACTED] FAP benefit beginning in March 2025.
15. Petitioner requested a hearing to dispute her FAP benefit amount. Petitioner asserted that she should be eligible for the heat/utility standard.

### **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 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.

In this case, the Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit for February 2025, and the Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit beginning in March 2025. The Department did not properly determine Petitioner's FAP benefit amount because the Department did not use the correct standards and/or deductions when it determined Petitioner's FAP benefit amount.

---

---

The Department improperly used a non-heat electric standard when it determined Petitioner's FAP benefit amount. A FAP group is only eligible for a non-heat electric standard when it has a responsibility to pay for non-heat electricity separate from rent. BEM 554 (January 1, 2025), p. 23. Petitioner did not have a responsibility to pay for non-heat electricity separate from her rent, so Petitioner was not eligible for a non-heat electric standard. The only standards that Petitioner was eligible for were the telephone and internet standards.

The Department properly determined that Petitioner was not eligible for the heat/utility standard when it determined Petitioner's FAP benefit amount. A FAP group is eligible for the heat/utility standard when it has a heating/cooling expense that is separate from rent. *Id.* at 17-19. A FAP group is also eligible for the heat/utility standard if it received a home heating credit greater than \$20.00 in the 12 months prior, if it received a LIHEAP payment greater than \$20.00 in the 12 months prior, if it received a MEAP payment greater than \$20.00 in the 12 months prior, or if it received an energy-related SER payment greater than \$20.00 in the 12 months prior. *Id.* at 19-21. Petitioner did not have a heating/cooling expense separate from rent, and Petitioner did not receive one of the designated payments in the 12 months prior. Thus, Petitioner was ineligible for the heat/utility standard.

The Department improperly determined that Petitioner was not eligible for the standard medical deduction for February 2025. Petitioner reported her medical expense during her redetermination before the Department certified her eligibility for February 2025. Thus, the Department should have considered her medical expense for February 2025. A FAP group with a senior or disabled member that has a medical expense of at least \$35.00 is eligible for the standard medical deduction of \$165.00. *Id.* at 9. Petitioner is a senior or disabled individual, and Petitioner provided the Department with sufficient verification to establish that she had a medical expense of at least \$35.00 for February 2025, so Petitioner was eligible for the standard medical deduction for February 2025.

Based on the evidence presented, Petitioner's gross household income was \$[REDACTED] per month. There is a net income limit to be eligible for FAP benefits that applies to all households. 7 CFR 273.10(e)(2)(B). Net income is gross income minus allowable deductions. 7 CFR 273.10(e)(1)(i). Petitioner was eligible for a \$204.00 standard deduction, a \$165.00 standard medical deduction, and a \$0.00 excess shelter deduction. These were the maximum deductions that Petitioner was eligible for in accordance with policy. Thus, Petitioner was eligible for deductions totaling \$369.00. Petitioner's gross income of \$[REDACTED] minus her total deductions of \$369.00 equals her net income of \$[REDACTED]. The net income limit for a household size of one was \$1,255.00 per month. RFT 250. Petitioner's net income did not exceed the net income limit to be eligible for FAP benefits.

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,

25-011768

2024), RFT 255 (October 1, 2024), and RFT 260 (October 1, 2024). Based on Petitioner's group size of one and her net household income of \$[REDACTED] the maximum FAP benefit that Petitioner was eligible for was \$[REDACTED] per month. The Department did not properly determine Petitioner's FAP benefit amount because the Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit for February 2025, and the Department determined that Petitioner was eligible for a \$[REDACTED] FAP benefit beginning in March 2025.

### **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 determined Petitioner's FAP benefit amount.

**IT IS ORDERED** that the Department's decision is **REVERSED**. The Department must certify Petitioner's FAP eligibility for a \$[REDACTED] per month FAP benefit effective February 1, 2025, through January 31, 2027. The Department must begin to implement this order within 10 days from the mailing date of this hearing decision.



---

**JEFFREY KEMM**  
**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](http://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 [y](#), **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**

WASHTENAW COUNTY DHHS  
22 CENTER ST  
YPSILANTI, MI 48198  
**MDHHS-WASHTENAW-  
HEARINGS@MICHIGAN.GOV**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HOLDENM**

**BSC4HEARINGDECISIONS**

**MOAHR**

**Via First Class Mail:**

**Petitioner**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_