



Date Mailed: March 19, 2025
Docket No.: 25-004752
Case No.: [REDACTED]
Petitioner: [REDACTED]

«RECIP_FULL_NAME»
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«RECIP_CITY», «RECIP_SPCODE»
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এটি একটি গুরুত্বপূর্ণ আইনি উকুমেন্ট। দয়া করে কেউ দ্রষ্টাবেজ অনুবাদ করুন।

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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; 42 CFR 438.400 to 438.424; 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 by telephone on February 24, 2025. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Rosemary Molsbee-Smith, Eligibility Specialist.

ISSUE

Did the Department properly deny Petitioner cash assistance (CA) under Family Independence Program (FIP) and State Disability Assistance (SDA)?

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 [REDACTED] 2025, the Department received a completed application for Food Assistance Program (FAP) and cash assistance benefits from Petitioner. Petitioner reported he was [REDACTED] years old, received Retirement, Survivors, and Disability Insurance (RSI) income of \$[REDACTED] per month, and had checking and savings account assets of \$[REDACTED]. (Exhibit A, pp. 19 – 26).

2. On January 14, 2025, the Department interviewed Petitioner. (Exhibit A, pp. 27 – 33).
3. On January 14, 2025, the Department sent Petitioner a Notice of Case Action (NOCA) that denied his application for CA because Petitioner's countable income exceeded the program limits. (Exhibit A, pp. 37 – 38).
4. On January 14, 2025, the Department sent Petitioner a Verification Checklist (VCL) that requested verifications for FAP. (Exhibit A, pp. 34 – 35).
5. On January 24, 2025, the Department received a request for hearing from Petitioner regarding FIP, FAP, State Emergency Relief (SER), and SDA. (Exhibit A, pp. 4 – 17).
6. On January 31, 2025, the Department sent Petitioner a NOCA that approved Petitioner for FAP benefits of \$292 per month, prorated from January 2, 2025 ongoing, for a one-person FAP group. (Exhibit A, pp. 44 – 45).
7. On January 31, 2025, the Department sent Petitioner a second VCL requesting additional verifications for FAP and providing Petitioner a blank Shelter Verification form. (Exhibit A, pp. 52 – 58).

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).

Petitioner requested a hearing to dispute the Department's determinations under four programs: FIP CA, FAP, SER, and SDA CA. The Department denied Petitioner's application for CA due to excess income and approved Petitioner's application for FAP. There was no evidence Petitioner applied for SER.

As a preliminary matter, during the hearing, the Department confirmed that Petitioner was approved for FAP benefits in the maximum monthly benefit amount for a household of one and Petitioner requested to withdraw his request for hearing as to FAP. Additionally, Petitioner testified that he did not apply for SER and requested to withdraw his request for hearing as to SER. The Department had no objection to Petitioner's withdrawals. Therefore, Petitioner's requests for hearing as to FAP and SER were dismissed. The hearing continued to address Petitioner's dispute as to the Department's denial of his application for CA only.

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193,

and 42 USC 601 to 679c. The Department (formerly known as the Department of Human Services) administers FIP pursuant to 45 CFR 233-260, MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3101-.3131.

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Health and Human Services (formerly known as the Department of Human Services) administers the SDA program pursuant to 42 CFR 435, MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

FIP and SDA are both CA programs designed to help individuals and families become self-sufficient. BEM 209 (January 2022), p. 1. The Department determines the eligibility of clients who apply for CA, and who are not refugees, first under FIP and then under SDA. BEM 209, p. 1. Clients must meet all financial and non-financial requirements of the programs to be eligible for assistance. BEM 209, p. 1.

To be eligible for CA under FIP, the client must be the legal parent, stepparent or other qualifying caretaker of a dependent child who lives with the client. BEM 210 (July 2021), p. 1. Although there are additional eligibility requirements for FIP CA, here there was no dispute that Petitioner does not have any dependent children. Therefore, Petitioner was not eligible for CA under FIP.

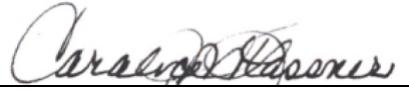
SDA CA is a program for individuals who are not eligible for FIP CA and are disabled or the caretaker of a disabled person. BEM 124 (April 2019), p. 1. Although Petitioner testified that he is not disabled and there was no evidence that Petitioner is the caretaker of a qualified disabled person (BEM 124, pp. 1 – 3), eligibility for SDA CA is subject to an asset test, which requires consideration of a client's countable assets. BEM 400 (January 2025), pp. 1, 3 – 5. An asset is countable if it meets the availability tests and is not specifically excluded by policy. BEM 400, p. 2. For purposes of SDA CA, countable assets include cash and funds in bank accounts and must be verified at application, redetermination, and when a change is reported. BEM 400, pp. 1 – 3, 15 – 16, 18, 62. However, the Department is not required to obtain verification of values when the client's valuation of reported assets is in excess of CA program limits. BEM 400, p. 61. For CA, the client's cash, investments, and retirement plans must have a value of \$15,000 or less to be eligible for benefits. BEM 400, p. 5.

In this case, Petitioner reported on his application, and confirmed during his interview, that he had checking and savings account assets of \$ [REDACTED]. (Exhibit A, pp. 20, 23, 29). There was no evidence that any of Petitioner's assets were subject to exclusion pursuant to BEM 400. Therefore, although there are additional eligibility requirements for SDA CA, and the NOCA issued by the Department denied Petitioner SDA CA due to excess income, the Department properly denied Petitioner CA because Petitioner was not disabled or the caretaker of a disabled person and Petitioner had assets in excess of CA program limits.

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 CA under FIP and SDA.

Accordingly, Petitioner's request for hearing as to FAP and SER are **DISMISSED** and the Department's decision as to CA is **AFFIRMED**.



CARALYCE M. LASSNER
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. 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, 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

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Via Electronic Mail:

Respondent

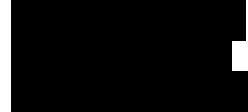
OAKLAND COUNTY DHHS - MADISON
HTS DIST
30755 MONTPELIER DR
MADISON HTS, MI 48071
MDHHS-OAKLAND-DISTRICTII-
HEARINGS@MICHIGAN.GOV

Interested Parties

L. KARADSHEH
B. SANBORN
BSC4

Via First Class Mail:

Petitioner

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