



**Date Mailed:** July 18, 2025

**Docket No.:** 25-017713

**Case No.:** [REDACTED]

**Petitioner:** [REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED] MI [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.

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**Case No.:** [REDACTED]

**Petitioner:** [REDACTED]

**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 July 14, 2025. Petitioner appeared for the hearing and represented herself. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Lutrina Webster, Eligibility Specialist.

**ISSUE**

Did the Department properly calculate the amount of Petitioner’s Food Assistance Program (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:

1. Petitioner is an ongoing recipient of FAP benefits. Petitioner was previously approved for FAP benefits in the amount of \$292 monthly.
2. On or around December 7, 2024, the Department sent Petitioner a Notice of Case Action advising that effective January 1, 2025, her FAP benefits would be decreased to \$289.
3. The Department asserted that Petitioner’s income increased effective January 1, 2025, which resulted in the decrease in Petitioner’s FAP benefit eligibility.
4. On or around May 2, 2025, Petitioner requested a hearing disputing the Department’s actions with respect to the decrease in her FAP benefits.

**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

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Tables Manual (RFT), and Department of Health and Human Services Emergency Relief Manual (ERM).

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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.

In this case, Petitioner requested a hearing disputing the decrease in her FAP benefits to \$289. It was established that that Petitioner's FAP benefits were decreased effective January 1, 2025, and have since remained unchanged since that time.

The Department presented a FAP EDG Net Income Results Budget which was thoroughly reviewed to determine if the Department properly calculated the Petitioner's FAP benefits in the amount of \$289. (Exhibit A, pp. 29-31).

All countable earned and unearned income available to the client must be considered in determining a client's eligibility for program benefits and group composition policies specify whose income is countable. BEM 500 (April 2022), pp. 1 – 5. The Department considers the gross amount of money earned from RSDI/Social Security in the calculation of unearned income for purposes of FAP budgeting. BEM 503 (April 2024), p. 29-35.

The budget reflects unearned income of \$1,018, which consists of Petitioner's monthly Social Security Disability benefits. Petitioner's confirmed that effective January 1, 2025, the gross amount of her Social Security Disability benefits is \$1,018. Thus, the Department properly calculated Petitioner's unearned income.

The deductions to income on the net income budget were also reviewed. Petitioner's FAP group includes a senior/disabled/veteran (SDV) member. BEM 550 (October 2024), pp. 1-2. Petitioner's FAP group is eligible for the following deductions to income:

- Dependent care expense.
- Excess shelter.
- Court ordered child support and arrearages paid to non-household members.
- Standard deduction based on group size.
- Medical expenses for the SDV member(s) that exceed \$35.
- An earned income deduction equal to 20% of any earned income.

BEM 554 (October 2024), p. 1; BEM 556 (October 2024), p. 1-8.

Petitioner's group did not have any earned income; thus, there was no applicable earned income deduction. There was no evidence presented that Petitioner had any

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out-of-pocket dependent care or child support expenses and therefore, the budget properly did not include any deduction for dependent care or child support. The budget also reflects a medical deduction of \$0. The Department asserted that no medical expenses were submitted for consideration. Upon review, the Department properly determined that Petitioner was ineligible for a medical deduction. Petitioner was advised that should she submit medical expenses, the Department would process the expenses and apply them to the medical deduction if applicable. The Department properly applied a standard deduction of \$204 which was based on Petitioner's confirmed group size of one. RFT 255 (October 2024), p. 1.

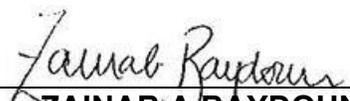
With respect to the calculation of the excess shelter deduction, the Department representative testified that it considered \$550 in monthly rent and the \$664 heat and utility standard, which covers all heat and utility costs including cooling expenses and is the maximum total utility and most beneficial standard available to the client. BEM 554, pp. 13-21; RFT 255, p.1. Petitioner confirmed the amount of her housing expenses of \$550 and the Department properly applied the \$664 heat and utility standard as Petitioner received a LIHEAP payment. The excess shelter deduction is calculated by subtracting 50% of the adjusted gross income from the total shelter amount. The Department determined that Petitioner's total shelter amount was \$1,214 and 50% of her adjusted gross income of [REDACTED] was [REDACTED]. Thus, the Department properly determined that Petitioner was eligible for an excess shelter deduction of [REDACTED].

After further review, the Department properly determined Petitioner's income and took into consideration the appropriate deductions to income. Based on net income of [REDACTED] Petitioner's one person FAP group is eligible for \$289 in monthly FAP benefits. RFT 260 (October 2024), p.1.

### **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 calculated the amount of Petitioner's FAP benefits of \$289 for January 1, 2025, ongoing.

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

  
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**ZAINAB A BAYDOUN**  
**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](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 [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. 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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**Via First Class Mail:**

**Petitioner**

[REDACTED]

[REDACTED]

[REDACTED], MI [REDACTED]

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