



Date Mailed: July 7, 2025

Docket No.: 25-021351

Case No.: [REDACTED]

Petitioner: [REDACTED]

[REDACTED]
MI [REDACTED]

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

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

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Case No.: [REDACTED]

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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 2, 2025. Petitioner was represented by her husband and household member, [REDACTED] (Husband). [REDACTED] understanding of the hearing was facilitated by his adult son, [REDACTED], translating from English to Arabic. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Danielle Moton, Assistance Payments Worker.

ISSUE

Did MDHHS properly close Petitioner's Food Assistance Program (FAP) case and Medical Assistance/Medicaid (MA) case for failure to return verifications of income?

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's household were ongoing recipients of MA coverage.
2. On [REDACTED] 2025, Petitioner applied for FAP benefits for a group size of six. Petitioner reported that Husband is employed with [REDACTED]. (Employer) (Exhibit A, pp. 8-16).
3. On May 13, 2025, MDHHS issued a Verification Checklist (VCL) to Petitioner, requesting that she submit verification of Husband's income from Employer to MDHHS by May 23, 2025 (Exhibit A, pp. 28-30).
4. MDHHS received income verification from Petitioner that they found to be incomplete and showed discrepancies. On May 14, 2025, MDHHS asked Petitioner for Employer to complete an Employment Verification form (Exhibit A, p. 25; pp. 43-45).

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5. On May 14, 2025, MDHHS issued a Notice of Case Action to Petitioner, informing her that her FAP application was denied for failure to return verification of employment and income for Husband (Exhibit A, pp. 31-34).
 6. On May 14, 2025, MDHHS issued a Healthcare Coverage Determination Notice to Petitioner, informing her that her MA case was closed for failure to return verification of Husband's income.
 7. On May 29, 2025, Petitioner submitted a request for hearing, disputing the denial of her FAP application and closure of her MA case (Exhibit A, pp. 3-5).

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) [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 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.

Upon Petitioner's submission of an application for FAP reporting Husband's employment income, MDHHS requested verification of Husband's income. Petitioner failed to return the requested complete verifications. MDHHS then denied Petitioner's FAP application and closed Petitioner's MA case as they were unable to determine eligibility without complete household income information. Petitioner disputes this determination.

On May 13, 2025, MDHHS issued a VCL to Petitioner, requesting that she submit verification of Husband's income from Employer to MDHHS by May 23, 2025. Verification is usually required at application and for a reported change affecting

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eligibility or benefit level. BAM 130 (May 2024), p. 1. MDHHS determines a client's eligibility for program benefits based on the client's actual income and/or prospective income. Prospective income is income not yet received but expected. BEM 505 (October 2023), pp. 1-2. In prospecting income, MDHHS is required to use income from the past 30 days if it appears to accurately reflect what is expected to be received in the benefit month, discarding any pay if it is unusual and does not reflect the normal, expected pay amounts. BEM 505, pp. 5-6. 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.

Here, on April 30, 2025, MDHHS received a verification of employment form completed by Husband. This form listed Husband's work hours, rate of pay, and frequency of pay (see Exhibit A, pp. 35-37). Husband also included his bank statements and three paychecks, showing his net income (see Exhibit A, pp. 38-42). MDHHS reviewed these submissions and found discrepancies between Husband's statements on the verification form and the frequency of pay shown in his bank statements. Additionally, MDHHS questioned whether Husband's income should be categorized as self-employment. MDHHS attempted to contact Employer but did not receive a response. On May 14, 2025, MDHHS requested Employer complete an Employment Verification form. The form was submitted without income information (see Exhibit A, pp. 43-45).

As Petitioner did not submit the required verification of income information to MDHHS, and did not seek assistance in obtaining verification, MDHHS was unable to determine Petitioner's eligibility for FAP or Petitioner's ongoing eligibility for MA coverage. Therefore, MDHHS acted in accordance with policy in denying Petitioner's FAP application and closing Petitioner's MA case.

Petitioner was encouraged by MDHHS to reapply for FAP benefits and MA coverage and submit all documentation requested by MDHHS in a timely manner.

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 MDHHS acted in accordance with Department policy when it denied Petitioner's FAP application and closed Petitioner's MA case for failure to submit completed verifications of income.

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



DANIELLE NUCCIO

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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

WAYNE-GREENFIELD/JOY-DHHS
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MDHHS-WAYNE-17-HEARINGS@MICHIGAN.GOV

Interested Parties

EQAD HEARINGS
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B. CABANAW
M. HOLDEN
BSC4

Via First Class Mail:

Petitioner

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