



**Date Mailed:** July 25, 2025

**Docket No.:** 25-021534

**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.

**Date Mailed:** July 25, 2025

**Docket No.:** 25-021534

**Case No.:** [REDACTED]

**Petitioner:** [REDACTED] [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 15, 2025. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Kathleen Zewatsky, Overpayment Establishment Analyst. Department Exhibit 1, pp. 1-76 was received and admitted.

### **ISSUE**

Did the Department properly determine that Petitioner received an overissuance of Food Assistance Program (FAP) benefits due to agency error?

### **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 was a recipient of FAP benefits.
2. Petitioner had social security income that was not budgeted correctly due to agency error. (Ex. 1, pp. 17-31)
3. On May [REDACTED] 2025, Notice of Overissuance was sent to Petitioner alleging that he received an overissuance of FAP benefits in the amount of \$[REDACTED] from August 1, 2024, through May 31, 2025, because social security income was not budgeted correctly.
4. On June 9, 2025, Petitioner requested hearing disputing the determination of overissuance.
5. Petitioner testified at hearing that he has not used his FAP benefits for many months and benefits remain on his card.

---

## **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.

### **AGENCY ERROR EXCEPTIONS**

#### **FIP, SDA, CDC and FAP**

Agency error overissuances are not pursued if the estimated amount is less than \$250 per program. BAM 705 (October 2018)

### **OVERISSUANCE PROCESSING**

#### **FIP, SDA, CDC and FAP**

Agency errors (other than CDC **system** errors) are not pursued if the amount is under \$250 per program. BAM 705 (October 2018)

In this case, Petitioner was had social security income that was not budgeted correctly. As a result, Petitioner received \$[REDACTED] in FAP benefit from the time period from August 1, 2024, through May 31, 2025, due to agency error. Department policy requires that agency error overissuances be recouped if they are over \$250. BAM 705

At hearing, Petitioner questioned why he should be responsible for the overissuance when it resulted from Department error. It was explained that overissuances above \$250 must be recouped even if they resulted from agency error. Petitioner testified at hearing that he has not used his FAP benefits in many months and benefits remain on his card. It was explained that any balance on the card will offset the amount of the overissuance.

25-021534

\_\_\_\_\_

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 determined that Petitioner received an overissuance of FAP benefits in the amount of [REDACTED] during the time period from August 1, 2024, and May 31, 2025, due to agency error.

\_\_\_\_\_

### **DECISION AND ORDER**

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

*Aaron McClintic*

**AARON MCCLINTIC**  
**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](https://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

25-021534

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:**

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

**Agency Representative**  
KATHLEEN ZEWATSKY  
OVERPAYMENT ESTABLISHMENT  
SECTION (OES)  
235 S GRAND AVE STE 811  
LANSING, MI 48933  
**MDHHS-RECOUPMENT-  
HEARINGS@MICHIGAN.GOV**

**Respondent**  
MECOSTA COUNTY DHHS  
800 WATER TOWER RD  
BIG RAPIDS, MI 49307  
**MDHHS-MECOSTA-OSCEOLA-  
HEARINGS@MICHIGAN.GOV**

**Via First Class Mail:**

**Petitioner**

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