



**Date Mailed:** August 1, 2025

**Docket No.:** 25-024158

**Case No.:** [REDACTED]

**Petitioner:** [REDACTED]

[REDACTED]  
[REDACTED]  
[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:** August 1, 2025  
**Docket No.:** 25-024158  
**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 23, 2025. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Jennifer Richard, Hearing Facilitator. Department Exhibit 1, pp. 1-32 was received and admitted.

### **ISSUE**

Did the Department properly determine Petitioner's Food Assistance Program (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. On May [REDACTED] 2025, Petitioner submitted mid-certification forms and reported he was homeless.
2. On May [REDACTED] 2025, Petitioner reported change in rental expense.
3. On May [REDACTED] 2025, a Notice of Case Action was sent to Petitioner informing him that his FAP benefit would be reduced to \$[REDACTED] per month effective June 1, 2025.
4. On June [REDACTED] 2025, Petitioner reported a change in his shelter expense.
5. On June [REDACTED] 2025, Petitioner submitted shelter verification documents.
6. On June [REDACTED] 2025, a Notice of Case Action was sent to Petitioner informing him that his FAP benefit will be \$[REDACTED] per month effective July 1, 2025.
7. On June [REDACTED] 2025, Petitioner requested hearing disputing the determination of his FAP benefits.

8. Petitioner testified at hearing that the only month he was disputing for FAP was June 2025.

## **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.

### **FAP Only**

Act on a change reported by means other than a data match within 10 days of becoming aware of the change if one or more of the following is true: • Additional verification is not required to make the change. • The change has been verified by another program. • The information is required for the group's reporting status. If none of the above bullets are true, the change(s) will be held and addressed at the next semi-annual, mid-certification, or redetermination (whichever comes first). Unless a change is reported that conflicts with information used at the time of application, semi-annual, mid-certification or redetermination, indicating the household may have failed to report eligibility information. Then, verification would be requested for all reporting groups. Benefit Increases: Changes which result in an increase in the household's benefits must be effective no later than the first allotment issued 10 days after the date the change was reported, provided any necessary verification was returned by the due date. A supplemental issuance may be necessary in some cases. If necessary verification is not returned by the due date, take appropriate action based on what type of verification was requested. If verification is returned late, the increase must affect the month after verification is returned. BAM 220

In this case, the only month Petitioner was contesting his FAP benefit amount was June 2025. Petitioner's June FAP benefit amount was based on what he reported and verified in May 2025. Petitioner reported that he was homeless, and shelter expense was \$ [REDACTED] Petitioner had \$ [REDACTED] in unearned income. After deducting the \$204 standard deduction and \$ [REDACTED] for the excess shelter deduction, Petitioner had net income of \$ [REDACTED] A household of 1 with net income of \$ [REDACTED] is entitled to \$ [REDACTED] in FAP. This was the determination made by the Department and it was proper and correct and consistent with Department policy. Petitioner provided verification of his rental obligation in June 2025 and his FAP benefit was increased effective July 1, 2025. That processing of that updated information was consistent with Department policy. BAM 220

25-024158

25-024158

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

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. 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**

KENT COUNTY DHHS  
121 MARTIN LUTHER KING JR ST SE  
STE 200  
GRAND RAPIDS, MI 49507  
**MDHHS-KENT-**  
**HEARINGS@MICHIGAN.GOV**

**Via First Class Mail:**

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED]