



**Date Mailed:** September 17, 2025

**Docket No.:** 25-029678

**Case No.:** [REDACTED]

**Petitioner:** [REDACTED] [REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]

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দ্রষ্টাবেজ অনুবাদ করুন।

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Ky është një dokument ligjor i rëndësishëm. Ju  
lутем, кини дикë та пëркtheni dokumentin.

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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 September 10, 2025. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Toni Jolman, AP Supervisor. Department Exhibit 1, pp. 1-18 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 July [REDACTED] 2025, a Notice of Case Action was sent to Petitioner informing her that her FAP benefit amount would be \$[REDACTED] per month effective August 1, 2025.
2. On [REDACTED] 25, 2025, a Notice of Case Action was sent to Petitioner informing her that her FAP benefit amount would be \$[REDACTED] per month effective September 1, 2025.
3. On August [REDACTED] 2025, Petitioner requested hearing disputing the amount of her FAP benefits.
4. Petitioner receives \$[REDACTED] per month in unearned income.
5. Petitioner does not pay rent or for utilities.

### **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.

### **Allowable Expenses**

Allow the following expenses:

- Basic shelter expenses as described above.
- Heat and Utility Standard, or individual utility standards.
- Utility installation fees charged by the utility provider, excluding deposits.
- Well/septic installation and maintenance. BEM 554

### **Cooking Fuel Standard**

A FAP group which has no heating/cooling expense but has a responsibility to pay for cooking fuel separate from rent/mortgage or condo fees must use the cooking fuel standard. The standard covers only cooking fuel expenses.

### **Verification**

Do not verify the cooking fuel expense, unless questionable; see BAM 130 regarding verification of questionable data. Verification Sources Acceptable verification sources include, but are not limited to:

- Current bills or a written statement from the provider for cooking fuel expenses.
- Collateral contact with the cooking fuel provider.
- Cancelled checks, receipts, or money order copies, if current. The receipt must contain minimum information to identify the expense, the amount of the expense, the expense address, the provider of the service and the name of the person paying the expense. BEM 554

In this case, Petitioner argued at hearing that the propane she uses for her gas grill should be allowable as a utility expense. Petitioner had not previously reported her cooking fuel expense. Petitioner should report her cooking fuel expense for consideration by the Department.

Petitioner receives \$ [REDACTED] in unearned income. After subtracting \$204 for the standard deduction, Petitioner has \$ [REDACTED] in net income. A household of 1 with \$ [REDACTED] in net income is entitled to \$ [REDACTED] per month in FAP. That was the amount determined by the Department and it was proper and correct and consistent with Department policy.

## **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**  
CALHOUN COUNTY DHHS  
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PO BOX 490  
BATTLE CREEK, MI 49016  
**MDHHS-CALHOUN-**  
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**Via First Class Mail:**

**Petitioner**  
[REDACTED]  
[REDACTED]  
[REDACTED]