



**Date Mailed:** October 16, 2025  
**Docket No.:** 25-031877  
**Case No.:** [REDACTED]  
**Petitioner:** [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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**Docket No.:** 25-031877

**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 October 9, 2025. Petitioner was represented by his mother [REDACTED]. [REDACTED] Petitioner also appeared. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Amber Gibson, Hearing Facilitator. Department Exhibit 1, pp. 1

### **ISSUE**

Did the Department properly close Petitioner's State SSI Payment (SSP) because he did not receive a full SSI payment on the first of the month?

### **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 receiving SSP benefit based on his receipt of SSI.
2. On August [REDACTED] 2025, Notice of State SSI Payment change was sent to Petitioner informing him that his quarterly State SSI payment was canceled.
3. On August [REDACTED] 2025, Petitioner requested hearing disputing the closure of SSP.
4. [REDACTED] [REDACTED] credibly testified at hearing that Petitioner resides with her in her home and that he has received his full SSI payment on the first of the month since April 2025. She also credibly testified that she updated Petitioner's address with the Social Security Administration and was given assurances that her home address of [REDACTED] was the address of record for Petitioner.

### **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

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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).

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The State SSI Payments (SSP) program is established by 20 CFR 416.2001-.2099 and the Social Security Act, 42 USC 1382e. The Department administers the program pursuant to MCL 400.10.

### **State SSI Payment**

The Michigan Department of Health and Human Services (MDHHS) issues the State SSI Payment (SSP) to SSI recipients in the following living arrangements: • Independent living. • Household of another. (Living in the household of another person and receiving partial or total support and maintenance in kind from that person.) Note: For payment levels see RFT 248 Reference Tables. Payments are made for only those months the recipient received a regular first of the month federal benefit. These are shown on SOLQ as a recurring payment dated the first of the month. BEM 660 (October 2021)

In this case, on August ■ 2025, Notice of State SSI Payment change was sent to Petitioner informing him that his quarterly State SSI payment was canceled. ■ credibly testified at hearing that Petitioner resides with her in her home and that he has received his full SSI payment on the first of the month since April 2025. She also credibly testified that she updated Petitioner's address with the Social Security Administration and was given assurances that her home address of ■ was the address of record for Petitioner. Petitioner was present with his mother at the hearing on October ■ 2025, and was not residing in an Adult Foster Care home. The Department failed to present sufficient evidence to establish that there was a basis to close Petitioner's SSP benefit.

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## **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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it closed Petitioner's SSP case because he was residing in an Adult Foster Care home.

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

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reinstate Petitioner's SSP payment going back to the date of closure.
2. Issue a supplement for any missed benefits.



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**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

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**  
INGHAM COUNTY DHHS  
5303 S CEDAR ST  
PO BOX 30088  
LANSING, MI 48911  
**MDHHS-INGHAM-**  
**HEARINGS@michigan.gov**

**Via First Class Mail:**

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Authorized Hearing Rep**

[REDACTED]  
[REDACTED]  
[REDACTED]