



Date Mailed: February 18, 2026
Docket No.: 25-048456
Case No.: [REDACTED]
Petitioner: [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

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

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Docket No.: 25-048456

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 February 12, 2026. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Ravinder Bhatia, Family Independence Program Specialist.

ISSUE

Did the Department properly determine Petitioner's eligibility for Family Independence Program (FIP) and Food Assistance Program (FAP) benefits?

Did the Department properly continue Petitioner's FAP benefits pending the administrative hearing?

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 an ongoing recipient of FIP and FAP benefits for a household of 4 that included Petitioner, [REDACTED] [REDACTED] (Spouse) and their two children.
2. In June 2025, Spouse suffered a brain injury and spent 2 months in [REDACTED] [REDACTED] Royal Oak, Michigan.
3. On or about August 2025, Spouse was transferred to [REDACTED] [REDACTED] for one week.
4. On or about August 2025, Spouse was transferred to [REDACTED] [REDACTED]
5. On October 2, 2025, Spouse was transferred to [REDACTED] [REDACTED].
6. On December [REDACTED] 2025, the Department sent Petitioner a Notice of Case Action (NOCA) that informed Petitioner that his FIP and FAP household sizes were reduced from 4 to 3 thus reducing his monthly FIP and FAP benefits, effective January 1, 2026 ongoing. Exhibit A, pp. 6-13.

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7. On December 29, 2025, the Department received Petitioner's request for hearing that disputed the FIP and FAP group size reduction and requested that he continue to receive FAP benefits in the same amount until after his hearing. Exhibit A, pp. 3-5.
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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 Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Department of Human Services) administers FIP pursuant to 45 CFR 233-260, MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3101-.3131.

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.

In this case, Petitioner disputed the Department's reduction of his FIP and FAP household group size. The Department explained that it reduced Petitioner's household group size from 4 to 3 members due to Spouse's absence from the home for more than 30 days.

For FIP, group composition is the determination of which individuals living together are included in the FIP eligibility determination group/program group and the FIP certified group. BEM 210 (January 2026), p. 1. Living together means sharing a home where family members usually sleep except for temporary absences. BEM 210, p. 3. A temporarily absent person is considered to be living in the home when all of the following are true: individual's location is known; there is a definite plan to return; the individual lived with the FIP EDG before the absence; the absence has lasted or is expected to last *30 days or less*. Policy provides an exception where an individual is still considered to be living in the home, even after 30 days if the absence reason is any of the following: *in the hospital* (including a psychiatric hospital); in a residential substance abuse treatment center; absent for school or training; absent due solely to active duty in the uniformed services of the U.S.; or a child who is living apart from a parent due solely to the parent residing in a domestic violence shelter. BEM 210, pp. 3-4 (emphasis added).

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For FAP, the relationship(s) of the people who live together affects whether they must be included or excluded from the group. BEM 212 (June 2025), p. 1. Spouses who are legally married and live together must be in the same group. BEM 212, p. 1. A person who is temporarily absent from the group is considered living with the group. A person's absence is temporary if all of the following are true: the person's location is known; the person lived with the group before an absence; there is a definite plan for return; the absence has lasted or is expected to last *30 days or less*. Policy provides an exception to the absence duration requirement that allows the absence to last longer than 30 days if the absent person is *in a hospital* and there is a *plan for them to return to the home*. BEM 212, p. 3.

The term "hospital" is not defined in either BEM 210 or BEM 212. The Bridges Policy Glossary (BPG) contains definitions of terms used in policies for cash, food, and medical assistance programs, as well as child development and care and preventive services. BPB 2008-001 (August 2008), p. 3. BPG defines "hospital" as, "a facility (including any psychiatric ward of the facility) that is licensed by the MDHHS and that offers inpatient medical care and services. A long-term care facility and a facility operated by the MDHHS are not considered hospitals." BPG (June 2024), p. 34. BPG defines "long-term care" (LTC) as, "being in any of the following: a nursing home that provides nursing care; a county medical care facility that provides nursing care; a hospital long-term care unit; a MDHHS facility that provides active psychiatric treatment; special MR nursing home; a MDHHS facility for individuals with intellectual disability that provides ICF/ID nursing care." BPG, p. 42.

Here, there was no dispute that Spouse's location was known, there was a plan for her return to the home, and she lived with the group before the absence. It was also undisputed that Spouse had been absent from the home for more than 30 days. Petitioner's position was that Spouse's absence was covered by the absence duration exception to both FIP and FAP policies that permits a group member to be absent more than 30 days and still be considered living in the home if the absent person is in a hospital. Spouse was receiving inpatient care, including physical, occupational and speech therapy in addition to assistance with activities of daily living, at [REDACTED] [REDACTED]. The Department's position was that [REDACTED] [REDACTED] did not qualify as a hospital and therefore the exception did not apply to Spouse's absence.

Both FIP and FAP policies provide an exception to the absence duration requirement for a group member who is absent from the home for more than 30 days if that group member is in a hospital and, in the case of FAP, there is a plan for that member to return to the home. A hospital is a facility licensed by MDHHS and specifically excludes LTC facilities. LTC includes a nursing home. Father Murray is licensed with a facility type [REDACTED] designation [REDACTED] of [REDACTED] nursing [REDACTED] home. <https://statelicensing.apps.lara.state.mi.us/details?license=1927947>, last accessed February 13, 2026. Because Father Murray is a nursing home, which is an LTC, it does not satisfy the definition of a hospital. Therefore, the exception to the absence duration

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requirement does not apply to Spouse and the Department properly excluded Spouse from the FIP and FAP groups.

Petitioner also raised an issue at the hearing regarding continuation of FAP benefits pending the administrative hearing. Petitioner indicated on his request for hearing that he wanted to “continue receiving the amount of food assistance I now receive until after my hearing,” but testified that the Department reduced his FAP benefits effective January 1, 2026, prior to the hearing. The Department did not refute Petitioner’s assertion.

For all benefit programs, a timely hearing request is a request received by the Department within 10 days of the date the notice of case action was issued. While waiting for the hearing decision, recipients must continue to receive the assistance authorized prior to the notice of negative action when the request was filed timely. Upon receipt of a timely hearing request, the Department reinstates program benefits to the former level for a hearing request filed because of a negative action. BAM 600 (July 2025), pp. 25-26. If a hearing request is filed timely and program benefits are restored, the Department may *recoup overissuances* of benefits if: the RFH is later withdrawn; MOAHR denies the request; the client or AHR fails to appear for the hearing and MOAHR issues an order of dismissal or *the hearing decision upholds the department’s action*. BAM 600, p. 28 (emphasis added).

Here, Petitioner’s RFH was filed timely and indicated he wanted to continue receiving the same level of FAP benefits. However, the Department reduced his FAP benefits based on the reduction to group size. Although the Department should have continued his FAP benefits at his current rate, because the hearing decision upheld the Department’s action reducing Petitioner’s group size, had the Department continued to issue benefits at that rate, Petitioner would have received an overpayment that would be subject to recoupment. Although the Department did not act in accordance with policy when it failed to continue Petitioner’s FAP benefits, reversing the Department on this issue would result in creating an overpayment to Petitioner that the Department would then seek to recover.

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 eligibility for FIP and FAP.

Accordingly, the Department's decisions regarding **FIP** and **FAP** are **AFFIRMED**.



JULIA NORTON
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://irs.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

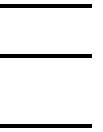
- by email to MOAHR-BSD-Support@michigan.gov, **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to
Michigan Office of Administrative Hearings and Rules
Rehearing/Reconsideration Request
P.O. Box 30639
Lansing Michigan 48909-8139

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