



Date Mailed: February 4, 2026
Docket No.: 25-048522
Case No.: [REDACTED]
Petitioner: [REDACTED]

[REDACTED] MI [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.

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Docket No.: 25-048522

Case No.: [REDACTED]

Petitioner: [REDACTED]

HEARING DECISION

On December 26, 2025, Petitioner [REDACTED] requested a hearing to dispute Petitioner's Food Assistance Program (FAP) benefits. As a result, a hearing was scheduled to be held on February 3, 2026. Public assistance hearings are held pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 42 CFR 438.400 to 438.424; 45 CFR 99.1 to 99.33; and 45 CFR 205.10; and Mich Admin Code, R 792.11002. Petitioner appeared and represented herself. Respondent Department of Health and Human Services (Department) had Family Independence Manager Sherri Polk appear as its representative.

An 8-page packet of documents provided by the Department was admitted collectively as the Department's Exhibit A.

ISSUE

Did the Department properly determine Petitioner's 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 December 8, 2025, Petitioner completed a FAP redetermination interview with the Department.
2. On December 15, 2025, Petitioner submitted verification of Petitioner's income to the Department.
3. Petitioner has a household size of one.
4. Petitioner is not a FAP senior/disabled/veteran (SDV) group.
5. Petitioner receives earned income of \$ [REDACTED] per week.
6. Petitioner pays \$800.00 per month in housing expenses.
7. Petitioner pays a telephone bill.

-
8. Prior to January 1, 2026, Petitioner received a Low Income Home Energy Assistance Payment (LIHEAP) payment from the Department.
 9. The Department processed Petitioner's redetermination and determined that Petitioner was no longer eligible for a heat and utility (h/u) standard, so the Department redetermined Petitioner's FAP benefit amount without the h/u standard.
 10. On December 15, 2025, the Department mailed a notice of case action to Petitioner to notify Petitioner that Petitioner was approved for a FAP benefit amount of \$24.00 per month, effective January 1, 2026.
 11. Petitioner's FAP benefit decreased from \$169.00 per month to \$24.00 per month.
 12. On December 26, 2025, Petitioner requested a hearing to dispute the reduction.

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 FAP 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 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, the Department decreased Petitioner's FAP benefit amount from \$169.00 per month to \$24.00 per month when the Department determined that Petitioner was no longer eligible for the h/u. Petitioner is disputing the decrease.

FAP SDV groups who are at redetermination and have received a LIHEAP payment or a LIHEAP payment was made on their behalf in an amount greater than \$20 in the certification month or in the immediately preceding 12 months prior to the certification month are eligible for the h/u standard. BEM 554 (November 1, 2025), p. 24. Effective November 1, 2025, FAP SDV groups that receive a \$20.01 LIHEAP payment by having a shelter expense greater than zero, are not homeless (based on the head of Household Living Arrangement) and do not meet any other eligibility factors to receive the h/u standard, will receive the h/u standard because of the \$20.01 LIHEAP payment. *Id.*

Petitioner did not present sufficient evidence to establish that Petitioner met any of the conditions to qualify for the h/u standard. Thus, based on the evidence presented, the Department properly determined that Petitioner did not qualify for the h/u standard.

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At the hearing, Petitioner also testified that Petitioner was unclear as to how the Department was calculating Petitioner's income and that the FAP budget did not accurately reflect how much money Petitioner has.

To determine a client's countable income, the Department must use past income to prospect income for the future, unless changes are expected. BEM 505 (June 1, 2025), p. 3. In general, the Department uses income from the past 30 days if it appears to accurately reflect what is expected to be received in the benefit month. *Id. at 6.* If income from the past 30 days does not appear to accurately reflect what is expected to be received in the benefit month, and fluctuations of income during the past 60 or 90 days appear to accurately reflect the income that is expected to be received in the benefit month, then the Department uses income from the past 60 or 90 days. *Id.* Weekly pay is multiplied by 4.3 and biweekly pay is multiplied by 2.15 to calculate a standard monthly amount. *Id. at p. 8.*

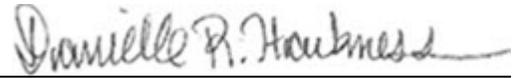
In this case, Petitioner submitted income verifications showing that Petitioner earns \$ [REDACTED] per week. Petitioner's weekly pay was then multiplied by 4.3. The Department determined that Petitioner's earned income is \$ [REDACTED] (\$ [REDACTED] x 4.3). At the hearing, Petitioner testified that Petitioner is not always paid timely. However, Petitioner failed to present evidence to show that the Department incorrectly calculated Petitioner's income based on the information that the Department had at the time the Department made its determination.

Based on Petitioner's income of \$ [REDACTED] per month, Petitioner's housing expenses of \$800.00 per month, and Petitioner's obligation to pay Petitioner's telephone bill, Petitioner's net income is \$ [REDACTED] per month. Based on Petitioner's net income of \$ [REDACTED] per month and Petitioner's group size of one, the maximum FAP benefit amount that Petitioner is eligible for is \$24.00 per month. The Department followed the applicable policies and used the maximum deductions it was permitted to use to calculate Petitioner's income and FAP benefit amount.

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 its policies and the applicable law when it determined Petitioner's FAP benefit amount.

IT IS ORDERED, the Department's decision is **AFFIRMED**.



DANIELLE R. HARKNESS
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, **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.

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Via Electronic Mail:

Respondent

GRAND TRAVERSE COUNTY DHHS

701 S ELMWOOD STE 19

TRAVERSE CITY, MI 49684

MDHHS-GRANDTRAVERSE-HEARINGS@MICHIGAN.GOV

Via First Class Mail:

Petitioner

[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]