STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

Reg. No.: 201232242

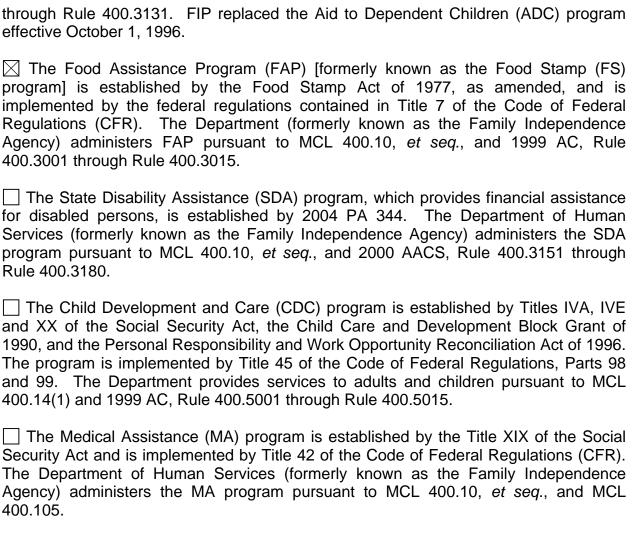
IN THE MATTER OF:

		Issue No.: Case No.: Hearing Date: County:	June 14, 2012 Clinton County DHS	
ΑC	OMINISTRATIVE LAW JUDGE: Christophe	er S. Saunders		
	HEARING DECISION FOR INTENT	IONAL PROGRAM V	<u>IOLATION</u>	
This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Department of Human Services' (Department) request for a hearing. After due notice, a telephone hearing was held on June 14, 2012 from Lansing, Michigan. The Department was represented by Inspector General (OIG).				
⊠ Respondent did not appear at the hearing and it was held in Respondent's absence pursuant to 7 CFR 273.16(e), Mich Admin Code R 400.3130(5), or Mich Admin Code R 400.3187(5).				
	ISSUE	<u>ES</u>		
1.	Did Respondent receive an overissuance (OI) of			
	☐ Family Independence Program (FIP) ☐ State Disability Assistance (SDA) ☐ Medical Assistance (MA)	☐ Food Assistance☐ Child Developme	Program (FAP) ent and Care (CDC)	
	benefits that the Department is entitled to r	ecoup?		
2.	. Did Respondent commit an Intentional Program Violation (IPV)?			
3.	Should Respondent be disqualified from receiving			
	☐ Family Independence Program (FIP) ☐ State Disability Assistance (SDA)	∑ Food Assistance ☐ Child Developme ☐ Child Developme	Program (FAP) ent and Care (CDC)?	

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1.	The Department's OIG filed a hearing request to establish an OI of benefits received by Respondent as a result of Respondent having allegedly committed an IPV.			
2.	The OIG \boxtimes has \square has not requested that Respondent be disqualified from receiving program benefits.			
3.	Respondent was a recipient of \square FIP \boxtimes FAP \square SDA \square CDC \square MA benefits during the period of July 1, 2011 through December 31, 2011.			
4.	Respondent \boxtimes was \square was not aware of the responsibility to report any changes in residency to the department within ten days of the date of change.			
5.	Respondent had no apparent physical or mental impairment that would limit the understanding or ability to fulfill this requirement.			
6.	The Department's OIG indicates that the time period they are considering the fraud period is July 1, 2011 through December 31, 2011.			
7.	During the alleged fraud period, Respondent was issued in ☐ FIP ☐ SDA ☐ CDC ☐ MA benefits from the State of Michigan.			
8.	Respondent was entitled to \$0.00 in $\hfill\Box$ FIP $\hfill\boxtimes$ FAP $\hfill\Box$ SDA $\hfill\Box$ CDC $\hfill\Box$ MA during this time period.			
9.	Respondent did did not receive an OI in the amount of under the FIP FAP SDA CDC MA program.			
10	.The Department $oxtimes$ has $oxtimes$ has not established that Respondent committed an IPV.			
11	.This was Respondent's ⊠ first ☐ second ☐ third IPV.			
12	.A notice of disqualification hearing was mailed to Respondent at the last known address and \square was \boxtimes was not returned by the US Post Office as undeliverable.			
CONCLUSIONS OF LAW				
	epartment policies are contained in the Bridges Administrative Manual (BAM), the dges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).			
☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, et seq. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101				



When a client group receives more benefits than they are entitled to receive, the Department must attempt to recoup the OI. BAM 700.

Suspected IPV means an OI exists for which all three of the following conditions exist:

- The client intentionally failed to report information or intentionally gave incomplete or inaccurate information needed to make a correct benefit determination, and
- The client was clearly and correctly instructed regarding his or her reporting responsibilities, and
- The client has no apparent physical or mental impairment that limits his or her understanding or ability to fulfill their reporting responsibilities.

IPV is suspected when there is clear and convincing evidence that the client has intentionally withheld or misrepresented information for the purpose of establishing, maintaining, increasing or preventing reduction of program benefits or eligibility. BAM 720.

The Department's OIG requests IPV hearings for cases when:

- benefit overissuances are not forwarded to the prosecutor.
- prosecution of welfare fraud is declined by the prosecutor for a reason other than lack of evidence, and
- the total overissuance amount is \$1000 or more, or
- the total overissuance amount is less than \$1000, and

A court or hearing decision that finds a client committed an IPV disqualifies that client from receiving program benefits. A disqualified recipient remains a member of an active group as long as he lives with them. Other eligible group members may continue to receive benefits. BAM 720.

Clients who commit an IPV are disqualified for a standard disqualification period except when a court orders a different period. Clients are disqualified for periods of one year for the first IPV, two years for the second IPV, lifetime disqualification for the third IPV, and ten years for a concurrent receipt of benefits. BAM 720.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, concludes that:

1.	Respondent 🖂 did 🗌 did not commit an IPV
2.	Respondent did did not receive an overissuance of program benefits in the amount of from the following program(s) FIP FAP SDA CDC MA.
\bowtie	The Department is ORDERED to initiate recoupment procedures for the amount of in accordance with Department policy.

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☑ It is FURTHER ORDERED that Respondent be disqualified from
☐ FIP ☑ FAP ☐ SDA ☐ CDC for a period of ☐ 12 months. ☐ 24 months. ☐ lifetime.
/s/ Christopher S. Saunders Administrative Law Judge for Maura Corrigan, Director Department of Human Services
Date Signed: June 18, 2012
Date Mailed: June 18, 2012
NOTICE : The law provides that within 30 days of receipt of the above Decision and Order, the Respondent may appeal it to the circuit court for the county in which he/she lives.
CSS/cr
cc: