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

IN THE MATTER OF:

Reg. No.: 2013-7313

Issue No.: 3052 Case No.:

Hearing Date: December 13, 2012

County: Wayne (17)

ADMINISTRATIVE LAW JUDGE: Jan Leventer

HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION

| an he De wa Th | This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Departm ent of Human Servic es' (Department) request for a nearing. After due notice, a telephone hearing was held on December 13, 2012, from Detroit, Michigan before Administrative Law Judge Michael Bennane. The Department was represented by Lead Agent of the Office of Inspector General (OIG). The writing of the Decision and Order in this case was subsequently assigned to Administrative Law Judge Jan Leventer. | | | | |
|---|---|--|--|--|--|
| | Participants on behalf of Respondent included: . | | | | |
| \boxtimes Respondent did not appear at the heari ng 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). | | | | | |
| <u>ISSUES</u> | | | | | |
| 1. | Did Respondent receive an overissuance | (OI) of | | | |
| | ☐ Family Independence Program (FIP) ☐ State Disability Assistance (SDA) ☐ Medical Assistance (MA) | ☐ Food Assistance Program (FAP)☐ Child Development and Care (CDC) | | | |
| | benefits that the Department is entitled to | recoup? | | | |
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2. Did Respondent commit an Intentional Program Violation (IPV)?

| 3. | Should Respondent be disqualified from receiving | | | |
|----|--|--|--|--|
| | ☐ Family Independence Program (FIP)☐ State Disability Assistance (SDA)☐ Child Development and Care (CDC)? | | | |
| | FINDINGS OF FACT | | | |
| | e Administrative Law Judge, based on t he competent, material, and substantial idence on the whole record, finds as material fact: | | | |
| 1. | The Department's OIG filed a hearing request on November 13, 2012 to establish an OI of benefits received by Respondent as a result of Respondent having allegedly committed an IPV. | | | |
| 2. | The OIG $oxtimes$ has $oxtimes$ has not requested that Resp $$ ondent be dis $$ qualified fr $$ om receiving program benefits. | | | |
| 3. | Respondent was a recipient of $\ \ \ \ \ \ \ \ \ \ \ \ \ $ | | | |
| 4. | Respondent \boxtimes was \square was not aware of the respons \square ibility to report changes of status within ten (10) days. | | | |
| 5. | Respondent had no apparent physical or m ental impairment that would limit her understanding or ability to fulfill this requirement. | | | |
| 6. | The Department's OIG indicates that the time period they are considering the fraud period is September 1, 2010-September 30, 2011. | | | |
| 7. | During the alleged fr aud period, Respondent was issued \$6,746 in \square FIP \boxtimes FAP \square SDA \square CDC \square MA benefits from the State of Michigan. | | | |
| 8. | Respondent was ent itled to \$0.00 in $\ \ \Box$ FIP $\ \ \Box$ FAP $\ \ \Box$ SDA $\ \ \Box$ CDC $\ \ \Box$ MA during this time period. | | | |
| 9. | Respondent 🛭 did 🗌 did not receive an OI in the amount of \$6,746 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 hearing was mailed to Respondent at the last known address and \square was \bowtie was not returned by the US Post Office as undeliverable. | | | |

CONCLUSIONS OF LAW

| Department policies are contained in the Bri dges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT). |
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| ☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, et seq. The Department (formerly k nown as the Family Independence Agency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996. |
| ∑ The Food Assistanc e Program (FAP) [form erly known as the Food Stamp (FS) program] is establis hed by the Food St amp Act of 1977, as amend ed, and is implemented by the federal r egulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independenc e Agency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3001 through Rule 400.3015. |
| ☐ The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The D epartment of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, et seq., and 20 00 AACS, Rule 400.3151 through Rule 400.3180. |
| ☐ The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015. |
| ☐ The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independ ence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MC L 400.105. |
| When a client group receives more benefits than they are entitled to receive, the Department must attempt to recoup the overissuance (OI). Department of Human Services Bridges Administrative Manual (BAM) 700 (2011). |

BAM 720 requires that three conditions must exist in order to establish an IPV:

- The client intentionally failed t o report information or intentionally gave incomplete or inaccurate information needed to make a correct benefit determination, and
- The client was clearly and co rrectly 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 sus pected when there is clear and convinc ing evidenc e that the client has intentionally withheld or misr epresented information for the purpose of establishing, maintaining, increasing or preventing reduct ion of program benefits or eligibility. Department of Human Services Bridges Administrative Manual (BAM) 720 (2011).

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

- benefit overissuanc es 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
 - the group has a previ ous intentional program violation, or
 - the alleged IPV involves FAP trafficking, or
 - the alleged fraud involves concurrent receipt of assistance, or
 - the alleged fraud is committed by a state/government employee.

A court or hearing decision that finds a client committed an IP V disqualifies that client from receiving certain program benefits. A disqualified reci pient remains a member of an active group as long as she or he lives with them. Other eligible group members may continue to receive benefits. *Id.*

Clients who commit an IPV are disqualified for a standard disqualification period except when a court orders a different period, or except when the OI relates to MA. Refusal to repay will not cause denial of current or future MA if the culient is otherwise eligible. Department of Human Services Bridges Administrative Manual (BAM) 710 (2009). 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 y ears for a concurrent receipt of benefits. BAM 720.

Additionally, the evidence in this case establishes that from January 16, 2009 to July 16, 2010, a period of eighteen months, Respondent made FAP purchases solely in the State of Michigan, with two exceptions. Respondent Made FAP pur chases on one day in and three consecutive days in A period of three weeks then elapsed in which Respondent made no FAP purchases. Dept. Exh. 1, p. 31.

Next, beginning August 5, 2010 through November 11, 2011, a period of fifteen months, Respondent made FAP purchas es solely in the State of with one exception. There were nine consecutive days, when she made purchases in Michigan. *Id.*, pp. 31-43.

Applying BAM 720 to this case, it is found and determined that on or after July 16, 2010, Respondent underwent a change of address from Michigan to this conclus ion is based on the purchase receipts showing a consistent pattern of food purchases in the ld. It must next be determined whet the Respondent reported her address so change to the Department.

Having taken into consideration all of the evidence in this case it is found and determined that Respondent failed to report a change of address to the Department. There is no record of a Change Report su bmitted by Respondent announcing a change of address. Also, the Department requested this information in a Redetermination sent to Respondent on September 14, 2010, and Respondent failed to announce her change. *Id.*, pp. 27-30.

Next, it must be considered whether Resp ondent was aware of her responsibility to report changes of information. It is found and concluded that Respondent did know her responsibilities. Respondent signed an application indi cating she received an information booklet telling her of her res ponsibilities. Also , Respondent signed a Redetermination application form, requesting change of address information on page 2. *Id.*, p. 28. Accordingly it is found and determined that Re spondent was aware of her responsibility to report a change of address.

Third, it must be considered whether Resp ondent had a physic all or mental impairment that would prevent her from fulfilling her reporting responsibilities. Having considered all of the evidence in this case as a whole, it is found and determined that there is no evidence whatsoever to establish an impairment on the part of Respondent.

Having taken into consideration the thr ee requirements of BAM 720, and having taken into consideration all of the evidence in this case as a whole, it is found and determined that an IPV has occurred, and the Department's request to recoup is granted.

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 OI of prog ram benefits in the amount of \$6,746 from the following program(s) ☐ FIP ☒ FAP ☐ SDA ☐ CDC ☐ MA. | | | | |
| ☐ The Department is ORDERED to delete the OI and cease any recoupment action. | | | | |
| ☑ The Department is ORDERED to initiate recoupment procedures for the amount of \$6,746 in accordance with Department policy. | | | | |
| ☐ The Department is ORDERED to reduce the OI to for the period , in accordance with Department policy. | | | | |
| ☑ It is FURTHER ORDERED that Respondent be disqualified from | | | | |
| ☐ FIP ☑ FAP ☐ SDA ☐ CDC for a period of ☐ 12 months. ☐ 24 months. ☐ lifetime. | | | | |
| Jan Coventr | | | | |
| Jan Leventer Administrative Law Judge for Maura Corrigan, Director Department of Human Services | | | | |
| Date Signed: March 4, 2013 | | | | |
| Date Mailed: March 4, 2013 | | | | |
| NOTICE : The law pr ovides that within 30 days of receipt of the above Decision and Order, the Respondent may appeal it to the circuit court fo r the county in which he/she lives. | | | | |
| JL/cl | | | | |
| cc: | | | | |