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

IN THE MATTER OF:



Reg. No.: 2013-13455 Issue No.: 3055; 1052

Case No.: Hearing Date:

March 12, 2012

County: Genesee County DHS #6

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION

| an | nis 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 | | |
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| frc | earing. After due notice, a telephone hearing was held on Tuesday, March 12, 2013, om Lansing, Michigan. The Department was represented by gent #42, of the Office of Inspector General (OIG). | | |
| | Participants on behalf of Respondent included: . | | |
| ☑ Respondent did not appear at the hearing and it was he ld in Respondent's absence pursuant to 7 CFR 273.16(e), Mich Admin Code R 400.3130(5), or Mich Admin Code R 400.3178(5). | | | |
| <u>ISSUES</u> | | | |
| 1. | Did Respondent receive an overissuance (OI) of | | |
| | ☐ State Disability Assistance (SDA) ☐ Child Development and Care (CDC) ☐ Medical Assistance (MA) benefits that the Department is entitled to recoup? | | |
| 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

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

| 1. | The Department's OIG filed a hearing r equest on November 8, 2012 to establish an OI of benefits received by Respondent as a result of Respondent having allegedly committed an IPV. |
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| 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 \boxtimes FIP \boxtimes FAP \square SDA \square CDC \square MA benefits during the period of July 1, 2011 through July 31, 2011 and September 1, 2011 through February 29, 2012 for FIP and J uly 1, 2011 through July 31, 2011 an d September 1, 2011 through March 31, 2012 for FAP. |
| 4. | On the Redetermination Assistance Ap plication, DHS 1010, signed by Res pondent on March 31, 2011 an May 30, 2011 and the Assistance Application, DHS 1171 signed by the Respondent on December 29, 2010 and February 5, 2012, and March 28, 2012, Respon dent report ed that she/he understood the responsibility to report changes in household composition and income to the department within 10 days. Department Exhibit 1-47. |
| 5. | Respondent 🖂 was 🗌 was not aware of the responsi bility to and failed to report changes in household income where he wa s employed and earning income from employment at Payday, Inc. Department Exhibit 48-94. |
| 6. | Respondent had no apparent physical or m ental impairment that would limit the understanding or ability to fulfill this requirement. |
| 7. | The Department's OIG indicates that the time period they are considering the fraud period is July 1, 2011 th rough July 31, 2011 and S eptember 1, 2011 through February 29, 2012 for FIP and July 1, 2011 through July 31, 2011 and September 1, 2011 through March 31, 2012 for FAP. |
| 8. | During the alleged fraud period, Respondent was issued \$ in \boxtimes FIP \boxtimes FAP \subseteq SDA \subseteq CDC \subseteq MA benefits from the State of Michigan. |
| 9. | Respondent was entitled to \$ \square in \square FIP \square FAP \square SDA \square CDC \square MA during this time period. |
| 10 | . Respondent ⊠ did ☐ did not receive an OI in the amount of \$ under the ⊠ FIP ⊠ FAP ☐ SDA ☐ CDC ☐ MA program. |
| 11 | . The Department $oxtimes$ has $oxtimes$ has not established that Respondent committed an IPV. |
| 12 | .This was Respondent's ⊠ first ☐ second ☐ third IPV. |
| 13 | . A notice of 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

Department policies are contained in the Br idges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

| 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 known as the Family Independence |
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| Agency) administers FIP pursuant to MCL 400.10, <i>et seq</i> ., and 1999 AC, Rule 400.3101 chrough 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 regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3001 through Rule 400.3015. |
| The State Disabilit y 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 Soc ial 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 Independenc e 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 OI. BAM 700.

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

 The client intentionally failed t o report information or intentionally gave incomplete or inaccurate information needed to make a correct benefit determination, and

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- 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 evidence that the client has intentionally withheld or misr epresented 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 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 c oncurrent receipt of assistance.
 - 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 he lives with t hem. 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, or except when the overissuance relates to MA. Refusal to repay will not cause denial of current or future MA if the client is otherwise eligible. BAM 710. Clients are disqualified for periods of one year for the first IPV, two years for the second IPV, lifet ime disqualification for the third IPV, and ten years for a concurrent receipt of benefits. BAM 720.

Additionally, the respondent failed to report that he was employed and earning income to the department during the contested time per iod, which resulted in his receiving an overissuance of FAP benefits of \$ and FIP benefits of \$ that the department is required to recoup.

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. |
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| 2. Respondent ⊠ did ☐ did not receive an OI of prog ram benefits in the amount of 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 in accordance with Department policy. |
| $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ |
| ☑ It is FURTHER ORDERED that Respondent be disqualified from |
| ☐ FIP ☐ FAP ☐ SDA for a period of ☐ 12 months. ☐ 24 months. ☐ lifetime. |
| <u>/s/</u> |
| Carmen G. Fahie Administrative Law Judge |
| for Moure Corrigen Director |

for Maura Corrigan, Director Department of Human Services

Date Signed: March 21, 2013

Date Mailed: March 22, 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.

CGF/hj

CC:

