

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

IN THE MATTER OF:



Registration No: 201320487
Issue No: 6052
Case No: [REDACTED]
Hearing Date: May 9, 2013
Branch County DHS

Administrative Law Judge: Suzanne D. Sonneborn

HEARING DECISION

This matter is before the undersigned Administrative Law Judge in accordance with 7 CFR 273.16, MCL 400.9, MCL 400.37, and Mich Admin Code, R 400.3130, on the Department of Human Services' (the Department's) request for hearing. After due notice, a hearing was held on May 9, 2013, at which Respondent failed to appear. The hearing was held in Respondent's absence in accordance with Department of Human Services Bridges Administrative Manual (BAM) 720, pp 9-10. The Department was represented by [REDACTED], a regulation agent with the department's Office of Inspector General (OIG).

ISSUE

Whether Respondent committed an intentional program violation (IPV) involving the Child Development and Care (CDC) program and whether Respondent received an overissuance of CDC benefits that the Department is entitled to recoup?

FINDINGS OF FACT

Based on the clear and convincing evidence pertaining to the whole record, the Administrative Law Judge finds as material fact:

1. The Department's OIG filed a request for hearing to establish an over issuance of CDC benefits received as a result of a determination that Respondent committed a first IPV in this program.
2. Respondent was a recipient of CDC benefits at all times relevant to this hearing.
3. On July 15, 2010, Respondent signed an assistance application (DHS-1171) and indicated that she resided at [REDACTED], Michigan and that her household consisted of herself and her son. In signing the application, Respondent certified with her signature, under penalty of perjury, that the application had been examined by or read to

her and, to the best of her knowledge, the facts were true and complete. Respondent further certified with her signature that she received a copy, reviewed, and agreed with the sections in the assistance application Information Booklet, which include the obligation to report changes in one's circumstances within ten days. Respondent further certified with her signature that she understood she could be prosecuted for perjury and for fraud and/or be required to repay the amount wrongfully received if she intentionally gave false or misleading information, misrepresented, hid or withheld facts that may cause her to receive assistance she should not have received. (Department Exhibit 1, pp. 10-25)

4. On October 24, 2011, Respondent signed an assistance application (DHS-1171), requesting CDC benefits, as well as Food Assistance Program (FAP) benefits, and Medical Assistance (MA) benefits. In the application, she indicated that she resided at [REDACTED], Michigan and that her household consisted of herself and her children. In signing the application, Respondent certified with her signature, under penalty of perjury, that the application had been examined by or read to her and, to the best of her knowledge, the facts were true and complete. Respondent further certified with her signature that she received a copy, reviewed, and agreed with the sections in the assistance application Information Booklet, which include the obligation to report changes in one's circumstances within ten days. Respondent further certified with her signature that she understood she could be prosecuted for perjury and for fraud and/or be required to repay the amount wrongfully received if she intentionally gave false or misleading information, misrepresented, hid or withheld facts that may cause her to receive assistance she should not have received. (Department Exhibit 3, pp. 45-68)
5. On October 25, 2011, an agent with the Department's Office of Inspector General obtained verification from [REDACTED] the owner of Respondent's home at [REDACTED], Michigan, that Respondent has lived at the home for the past 18 months with her boyfriend, [REDACTED], and their children. (Department Exhibit 4)
6. On January 23, 2012, the Department obtained verification from the Michigan Department of Corrections that [REDACTED] was released from jail on June 10, 2011 and began residing at [REDACTED], Michigan on July 7, 2011. (Department Exhibit 2, pp. 26-44)
7. As a result of Respondent's refusal or failure to properly and timely report that [REDACTED] resided with her and was therefore able to provide child care to their children, she received an over issuance of CDC benefits in the amount of \$2,867.82 during the period July 3, 2011 through September 30, 2011. (Department Exhibit 5, p. 71)

8. Respondent was clearly instructed and fully aware, or should have been fully aware, of her responsibility to properly report all changes in circumstances, including a change in her household's group composition, to the Department within ten days of the occurrence, as required by agency policy.
9. There was no apparent physical or mental impairment present that limited Respondent's ability to understand and comply with her reporting responsibilities.
10. This was the first determined CDC IPV committed by Respondent.

CONCLUSIONS OF LAW

The Child Development and Care program was 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 of Human Services (DHS or Department) provides services to adults and children pursuant to MCL 400.14(1) and MAC R 400.5001-5015. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), Reference Table Manual (RFT), and the Bridges Reference Manual (BRM).

In the present matter, the Department requested a hearing to establish an overissuance of CDC benefits, claiming that the overissuance was the result of an IPV committed by Respondent.

Generally, a client is responsible for reporting any change in circumstances that may affect eligibility or benefit level within ten days of the change. BAM 105, p 7. When a client or group receives more benefits than they are entitled to receive, the Department must attempt to recoup the overissuance. BAM 700, p 1. A suspected IPV is defined as an overissuance where:

- 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. [BAM 720, p 1.]

An IPV is suspected by the Department when a client intentionally withheld or misrepresented information for the purpose of establishing, maintaining, increasing, or preventing a reduction of, program eligibility or benefits. BAM 720, p 1. In bringing an IPV action, the agency carries the burden of establishing the violation with clear and convincing evidence. BAM 720, p 1.

An overissuance period begins the first month the benefit issuance exceeds the amount allowed by Department policy or six years before the date the overissuance was referred to an agency recoupment specialist, whichever is later. This period ends on the month before the benefit is corrected. BAM 720, p 6. The amount of overissuance is the benefit amount the client actually received minus the amount the client was eligible to receive. BAM 720, p 6.

Suspected IPV matters are investigated by the OIG. This office: refers suspected IPV cases that meet criteria for prosecution to the appropriate prosecuting attorney; refers suspected IPV cases that meet criteria for IPV administrative hearings to the Michigan Administrative Hearings System (MAHS); and returns non-IPV cases back to the Department's recoupment specialist. BAM 720, p 9.

The OIG will request an IPV hearing when:

- Benefit overissuances are not forwarded to the prosecuting attorney's office;
- Prosecution of the matter is declined by the prosecuting attorney's office for a reason other than lack of evidence, and
- The total OI amount for the FAP is \$1000 or more, or
- The total OI amount is less than \$1000, and
 - The group has a previous IPV, 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. BAM 720, p 10.

The OIG represents the Department during the hearing process in IPV matters. BAM 720, p 9. When a client is determined to have committed an IPV, the following standard periods of disqualification from the program are applied (unless a court orders a different length of time): one year for the first IPV; two years for the second IPV; and lifetime for the third IPV. BAM 720, p 13. Further, IPV's involving the FAP result in a ten-year disqualification for concurrent receipt of benefits (i.e., receipt of benefits in more than one State at the same time). BAM 720, p 13.

A disqualified client remains a member of an active benefit group, as long as he or she continues to live with the other group members – those members may continue to receive benefits. BAM 720, p 12.

In this case, at the May 9, 2013 disqualification hearing, the OIG provided credible and sufficient testimony and other evidence establishing that, on July 15, 2010, Respondent signed an assistance application (DHS-1171) and indicated that she resided at [REDACTED], Michigan and that her household consisted of herself and her son. In signing the application, Respondent certified with her signature, under penalty of perjury, that the application had been examined by or read to her and, to the best of her knowledge, the facts were true and complete. Respondent further certified with her signature that she received a copy, reviewed, and agreed with the sections in the assistance application Information Booklet, which include the obligation to report changes in one's circumstances within ten days. Respondent further certified with her signature that she understood she could be prosecuted for perjury and for fraud and/or be required to repay the amount wrongfully received if she intentionally gave false or misleading information, misrepresented, hid or withheld facts that may cause her to receive assistance she should not have received.

The OIG further established that, as of October 25, 2011, Respondent's boyfriend, [REDACTED], has lived at her home at [REDACTED] since at least July 7, 2011, which information Respondent failed to properly and timely report to the Department. The OIG further established that as a result of Respondent's refusal or failure to properly and timely report that [REDACTED] resided with her and was therefore able to provide child care to their children, she received an over issuance of CDC benefits in the amount of \$2,867.82 during the period July 3, 2011 through September 30, 2011.

Testimony and other evidence must be weighed and considered according to its reasonableness. *Gardiner v Courtright*, 165 Mich 54, 62; 130 NW 322 (1911); *Dep't of Community Health v Risch*, 274 Mich App 365, 372; 733 NW2d 403 (2007). Moreover, the weight and credibility of this evidence is generally for the fact-finder to determine. *Dep't of Community Health*, 274 Mich App at 372; *People v Terry*, 224 Mich App 447, 452; 569 NW2d 641 (1997).

Respondent was, or should have been, fully aware of her responsibility to properly report that her child care needs should be reduced or discontinued during the time period in question because her boyfriend and the father of her children resided with her and was able to provide child care. Moreover, Respondent's signature on her assistance application established that she was, or should have been, fully aware that the intentional withholding or misrepresentation of information potentially affecting her eligibility or benefit level could result in criminal, civil, or administrative action. Finally, there was no evidence presented indicating that Respondent suffered from any physical or mental impairment that limited her ability to understand and fulfill her reporting responsibilities. See BEM 720, p 1.

Based on the credible and sufficient testimony and other evidence presented by the OIG, the Administrative Law Judge finds that the OIG established, under the clear and convincing standard, that Respondent committed an IPV in this matter, resulting in an over issuance of FAP benefits in the \$2,867.82 during the period July 3, 2011 through September 30, 2011.

DECISION AND ORDER

Based on the above findings of fact and conclusions of law, this Administrative Law Judge decides that Respondent committed an intentional program violation of the CDC program by misrepresenting, refusing or failing to properly report that her child care needs should be discontinued because Respondent's household member was able to provide child care during the time period in question.

It is therefore ORDERED THAT Respondent shall reimburse the Department for CDC benefits ineligibly received as a result of her intentional program violation in the amount of \$2,867.82.

/s/ _____
Suzanne D. Sonneborn
Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: May 10, 2013

Date Mailed: May 10, 2013

201320487/SDS

NOTICE: Respondent may appeal this decision and order to the circuit court for the county in which she resides within 30 days of receipt of this decision and order.

SDS/aca

cc:

