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

IN THE MATTER OF:



Reg. No.: 2013-38974

Issue No.: 3055 Case No.:

Hearing Date: July 2, 2013 County: Wayne #35

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION

an he La	d MCL 400.37 upon the Department of Huaring. After due notice, a telephone hearin	strative Law Judge pursuant to MCL 400.9 uman Services' (Department) request for a g was held on Tuesday, July 2, 2013, from presented by, James Linaras, Agent #134,
	Participants on behalf of Respondent incl	uded:
pu		g and it was held in Respondent's absence ode R 400.3130(5), or Mich Admin Code R
	<u>ISSU</u>	<u>ES</u>
1.	Did Respondent receive an over-issuance	e (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?
2.	Did Respondent commit an Intentional Pro	ogram Violation (IPV)?
3.	Should Respondent be disqualified from re	eceiving:
	☐ Family Independence Program (FIP) ☐ State Disability Assistance (SDA)	☐ Food Assistance Program (FAP)☐ Child Development 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 on March 14, 2013, 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 May 1, 2011 through February 29, 2012.
4.	On the Assistance Application, DHS 1171, signed by Respondent on March 15, 2011, Respondent reported that she/he intended to stay in Michigan.
5.	Respondent \boxtimes was \square was not aware of the responsibility to report changes in her/his residence to the Department where the respondent used FAP benefits exclusively in the State of Ohio for over thirty (30) consecutive days.
6.	Respondent had no apparent physical or mental 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 May 1, 2011, through February 29, 2012.
8.	Respondent began using \boxtimes FAP \square FIP \square MA \square SDA benefits outside of the State of Michigan beginning in April 2011.
9.	During the alleged fraud period, Respondent was issued ☐ in ☐ FIP ☒ FAP ☐ SDA ☐ CDC ☐ MA benefits from the State of Michigan.
10	. Respondent was entitled to \$0 in \square FIP \boxtimes FAP \square SDA \square CDC \square MA during this time period.
11.	Respondent 🖂 did 🗌 did not receive an OI in the amount of under the 🗌 FIP 🖂 FAP 🔲 SDA 🔲 CDC 🔲 MA program.
12	. The Department $oxtimes$ has $oxtimes$ has not established that Respondent committed an IPV.
13	.This was Respondent's ⊠ first ☐ second ☐ third IPV.
14.	. 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 Bridges 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 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 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.
∑ The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, 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, <i>et seq.</i> , 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 Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, <i>et seq.</i> , and 2000 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 Assistance (MA) program is established by the Title XIX of the Social 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 Independence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 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 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 over-issuances 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 over-issuance amount is \$1000 or more; or
- the total over-issuance amount is less than \$1000; and
 - the group has a previous intentional program violation; or
 - the alleged IPV involves FAP trafficking; or
 - the alleged fraud involves concurrent receipt of assistance;
 - the alleged fraud is committed by a state/government employee.

A court or hearing decision that finds a client committed an IPV disqualifies that client from receiving certain 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, or except when the over-issuance 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, lifetime disqualification for the third IPV, and ten years for a concurrent receipt of benefits. BAM 720.

Additionally, the Respondent failed to report her/her change in residency from the State of Michigan to the Department, which resulted in his/her receiving an over-issuance of FAP benefits of \$2,800 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.
2. Respondent \boxtimes did \square did not receive an OI of program benefits in the amount of from the following program(s) \square FIP \boxtimes FAP \square SDA \square CDC \square 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.
☐ 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 for a period of ☐ 12 months. ☐ 24 months. ☐ lifetime.
<u>/s/</u> Carmen G. Fahie
Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Mailed: <u>07/17/2013</u>

Date Signed: <u>07/16/2013</u>

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.

CGF/pw

