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

IN THE MATTER OF:

2.

3.

Violation (IPV)?

	Reg. No.: Issue No(s).: Case No.: Hearing Date: County:	201410670 3005 January 7, 2014 Muskegon County DHS	
ADMINISTRATIVE LAW JUDGE: Kevin Scully			
HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION			
Upon the request for a hearing by the Depar true this matter is before the under signed Administrativ and in acc ordance with Titles 7, 42 and 45 of the particularly 7 CFR 273.16, and with Mich Admin CAfter due notice, a telephone hearing was held of Michigan. The Department was represented by Office of Inspector General (OIG).	e Law Judge pur Code of Federal Code, R 400.31 n January 7, 2	suant to MCL 400.9, I Regulat ion (CFR),	
☐ Participants on behalf of Respondent included:			
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 400.3178(5).			
<u>ISSUES</u>			
<u> </u>	State Disability A Child Developm	assistance (SDA) ent and Care (CDC)	

FINDINGS OF FACT

☐ Family Independence Program (FIP)? ☐ State Disability Assistance (SDA)? ☐ Child Development and Care (CDC)?

Did Respondent, by clear and convincing evidence, commit an Intentional Program

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

Should Respondent be disqualified from receiving

1.	The Department's OIG filed a hearing request on October 2, 2013, to establis h an OI of benefits received by Respondent as a result of Respondent having allegedly committed an IPV.
2. Tł	ne OIG \boxtimes has \square has not requested that Respondent be dis qualified from receiving program benefits.
3.	Respondent was a recipient of $\ \ \Box$ FIP $\ \ \Box$ FAP $\ \ \Box$ SDA $\ \ \Box$ CDC $\ \ \Box$ MA benefits issued by the Department.
4. R	espondent \boxtimes was \square was not aware of the res ponsibility to report any change of residency to the Department.
5.	Respondent had no apparent ph ysical or m ental impairment that would limit the understanding or ability to fulfill this requirement.
6.	The Department's OIG indicates that the time period it is period is February 1, 2012, through September 30, 2012.
7.	During the fraud period, Re spondent was issued \$ in FIP FAP SDA CDC MA benefits by the State of Michigan, and the Department alleges that Respondent was entitled to \$0 in such benefits during this time period.
8.	The Department alleges that Respondent received an OI in
9.	This was Respondent's ⊠ first ☐ second ☐ third alleged IPV.
10.	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
Adm (BEN Augu Serv Prog	artment policies are contained in the Department of Human Service s Bridges inistrative Manual (BAM), Department of Human Services Bridges Eligibility Manual M), and Department of Human Services Re ference Tables Manual (RFT). Prior to ust 1, 2008, Department policies were contained in the Department of Human rices Program Administra tive Manuals (PAM), Depar tment of Human Services gram Eligibility Manual (PEM), and Department of Human Services Reference edules Manual (RFS).
Resp USC Agei	The Family Independence Program (FIP) was established pursuant to the Personal consibility and W ork Opportunity Reconciliation Act of 1996, PL 104-193, and 42 601 to 679c. The Department (formerly known as the Family Independence ncy) administers FIP pursuant to MC L 400.10 and 400.57a and Mich Admin Code, 10.3101 to .3131.

∑ The Food Assistance Program (FAP) [fo rmerly known as the Food Stamp program] s established by the Food Stamp Act of 1977, as ame nded, 7 USC 2011 to 2036a and s implemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The Department (formerly known as the Fam ily Independence Agency) administers FAP oursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.
☐ The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family ndependence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105.
The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.31513180.
The Child Development and Care (CDC) program is establis hed by Titles IVA, IVE and XX of the Social Security Ac t, 42 USC 601-619, 670-679c, and 1397-1397m-5; the Child Care and Development Block Grant of 1990, PL 101-508, 42 USC 9858 to 9858q; and the Personal Res ponsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193. The program is implemented by 45 CFR 98.1-99.33. The Department administers the program pursuant to MCL 400.10 and provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.50015020.

The Department's OIG requests IPV hearings for the following cases:

- FAP trafficking OIs that are not forw arded to the prosecutor,
- prosecution of welfare fraud or FAP trafficking is declined by the prosecutor for a r eason other than lack of evidence, and
 - the total OI amount for t he FIP, SDA, CDC, MA and FAP programs 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 c oncurrent receipt of assistance (see BEM 222), or
 - the alleged fraud is committed by a state/government employee.

BAM 720 (July 1, 2013), p. 10.

Intentional Program Violation

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 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 ab ility to fulfill reporting responsibilities.

BAM 700 (July 1, 2013), p. 6; BAM 720, p. 1.

An IPV is also suspected for a client who is alleged to have trafficked FAP benefits. BAM 720, p. 1.

An IPV requires that the Department establish by clear and convincing evidence that the client has intentionally withheld or misrepresented information for the **purpose** of establishing, maintaining, increasing or preventing r eduction of program benefits or eligibility. BAM 720, p. 1 (emphasis in original); se e also 7 CF R 273(e)(6). Clear and convincing evidence is evidence sufficient to result in a clear and firm belief that the proposition is true. See M Civ JI 8.01.

Disqualification

A court or hearing decision that finds a client committed IPV di squalifies that client from receiving program benefits. BAM 720, p. 12. A disqualified recipient remains a member of an active group as long as he lives with them, and other eligible group members may continue to receive benefits. BAM 720, p. 13.

Clients who commit an IPV are disqualified for a standard di squalification period except when a court orders a different period, or except when the OI relates to MA. BAM 720, p. 13. Refusal to repay will no t cause denial of current or future MA if the client is otherwise eligible. BAM 710 (July 1, 2013), p. 2. 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 FAP concurrent receipt of benefits. BAM 720, p. 16.

Overissuance

When a client group receives more benefits than they are entitled to receive, the Department must attempt to recoup the OI. BAM 700, p. 1.

In this case, the Res pondent acknowledged the responsibility to report any change of residency on the application for assistance he signed on November 30, 2011. The Department established by clear and convincing evidence that the Respondent received Food Assistance Program (FAP) based on his failure to report that he no longer had an intent to remain a Michigan resident from February 1, 2012, through September 30,

2012. The Respondent would not have been eligib le to receive these benef its except for his intentional failure to report his change of residency.

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, if any, concludes that:

of Law, and for the reasons stated on the record, if any, concludes that.
1. Respondent ☐ did ☐ did not commit an IPV by clear and convincing evidence.
2. Respondent
The Department is ORDERED to ☐ delete the OI and cease any recoupment action. ☐ initiate recoupment procedures for the amount of \$1,600 in accordance with Department policy. ☐ reduce the OI to \$ for the period, and initiate recoupment procedures 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.
<u>/s/</u>
Kevin Scully
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services
Date Signed: January 8, 2014
Date Mailed: January 8, 2014

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.

KS/hj

CC:

