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

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owing to the Department.

		Reg. No.: Issue No(s).: Case No.: Hearing Date: County:	2013-25293 1006, 3006 February 11, 2014 Wayne County DHS #17					
ADMINISTRATIVE LAW JUDGE: Colleen Lack								
HEARING DECISION								
Upon a hearing request by the Department of Human Se rvices (Department) to establish an overissuance (OI) of benefits to Res pondent, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, 400.43a, and 24.201, et seq., and Mich Admin Code, R 400.941, and in acc ordance with 7 CFR 273.15 to 273.18, 42 CFR 431.200 to 431.250, 45 CFR 99.1 to 99.33, and 45 CFR 205.10. After due notice, a telephone hearing was held on Febr uary 11, 2014, from Lansin g, Michigan. Participants on behalf of the Department included Recoupment Specialist, and Hearing Coordinator.								
Participants on behalf of Respondent included , the Respondent.								
ISSUE								
Did Respondent receive an OI of ☐ Family Independence Program (FIP) ☐ State Disability Assistance (SDA) ☐ Child Development and Care (CDC) Denefits?								
FINDINGS OF FACT								
The Administrative Law Judge, based on t he competent, material, and substantial evidence on the whole record, finds as material fact:								
	Respondent was a rec ipient of $\ igotimes$ FIP $\ igotimes$ Fthe Department.	AP □SDA □	CDC be nefits from					
(The Department alleges Respondent received a ☐ FIP ☐ FAP ☐ SDA ☐ CDC OI during the period July 1, 2012, through July 31, 2012, due to ☐ Department's error ☐ Respondent's error.							

The Department alleg es that Respondent received a \$ OI that is still due and

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Service s Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, PL 104-193, and 42 USC 601 to 679c. The Depar tment (formerly known as the Family Independenc e Agency) administers FIP pursuant to MC L 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131.

The Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.

When a client group receives more benefits t han it is entitled to receive, DHS mus t attempt to recoup the overi ssuance (OI). BAM 700, p 1 (12-1-2011). An ov erissuance (OI) is the amount of benefits issued to the client group or CDC provider in exc ess of what it was eligible to receive. For FAP benefits, an OI is also the amount of benefits trafficked (traded or sold). BAM 700, p 1 (12-1-2011).

An agency error OI is caused by incorrec taction (including delayed or no action) by DHS staff or DIT staff or department processes. BAM 700, p 3 (12-1-2011). If unable to identify the type of OI, the Department records it as an agency error. BAM 700, p 3 (12-1-2011).

A client error OI occurs when the client re ceived more benefits than they were entitled to because the client gave inc orrect or in complete information to the department. BAM 700, p 5 (12-1-2011).

A Claimant must report changes in circumstance that potentia Ily affect eligibility or benefit amount. Changes must be reported within 10 days of receiving the first payment reflecting the change. BAM 105, p.7 (12/1/2011).

Client and Agency error Ols ar e not pursued if the estimated Ol amount is less than per program. BAM 700, p 7 (12-1-2011).

Here, the Department contends that Res pondent received an OI of FIP and F AP benefits due to an agency erro r. Specifically, the Department asserts that the Department failed to timely and properly re-determine Respondent's FI P and F AP eligibility after Respondent reported that she returned to work after a medical leav e of absence. It was uncontested that the Respondent timely reported her return to work on April 19, 2012 and timely provided verific ation when it was requested in June 2012.

However, the Depart ment's failure to timely re-determine the Resp ondent's eligibility resulted in OIs of FIP and F AP benefits in excess of the \$ threshold for pursing the OIs.

This Administrative Law Judge has carefully considered and weighed the testimony and other evidence in the record. The record evidence shows that the Department did err when it failed to timely re-determine Res pondent's FIP and FAP eligib ility status after she reported returning to work. In determining the OI period, the Department properly considered that the Respondent did not receive her first pay check after returning to work until May 4, 2012, the full timeframes allowed by policy for the reporting period, the standard of promptness and the negative action period suspense period. Accordingly, the Department determined the OI period is only the month of July 20 12. When the income from the Respondent's return to work was included in the July 2012 budgets, the difference between the benefit amount sithe Respondent received and the benefit amounts the Respondent was entitled to receive were for FAP and for FIP. Accordingly the total OI for July 2012 for both FIP and FAP was \$557.

The Respondent testified that the Department has already taken more than \$ from her child support and tax return. (See also Exhibit 1) The Recoupment Specialist testified that the Respondent had prior OI claims, whic may have been the reason for the amounts the St ate has already taken. However, the claim statuses for the two July 2012 OI claims are still pending the administrative hearing outcome. (See Exhibit B, page 2) The Depar tment should ensure the \$ wit hheld from the R espondent's 2012 tax return for State Agency Collections was a separate collection from the \$ July 2012 FIP benefits at issue for this administrative hearing. (See Exhibit 1, page 2) The Administrative Law Judge, based upon the above Findings of Fact and Conclusions \boxtimes did of Law, finds that the Department | | did not

DECISION AND ORDER

establish a X FIP X FAP X SDA X CDC benefit OI to Respondent totaling \$

Accordingly, the Department is

AFFIRMED.

REVERSED.

AFFIRMED IN PART with respect to and REVERSED IN PART with respect to .

The Department is ORDERE D to initiate collection procedures for a \$ OI in accordance with Department policy. The Department should ensure the \$ withheld from the Respondent's 2012 tax return fo r State Agency Collect ions was a separate collection from the \$ OI for the July 2012 FIP benefits at issue for this administrative hearing.

Colleen Lack
Colleen Lack
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: February 19, 2014

Date Mailed: February 19, 2014

NOTICE OF APPEAL: The claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the req uest of a p arty within 30 days of the mailing date of this De cision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final deci sion cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly discovered evidence that existe d at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to a ddress in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the claimant must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

The written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings Reconsideration/Rehearing Request P.O. Box 30639 Lansing, Michigan 48909-07322

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