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

IN T	HE MATTER OF:			
		Reg. No.: Issue No(s).: Case No.: Hearing Date: County:	2014-26723 3005 April 14, 2014 Mecosta (00)	
ADI	MINISTRATIVE LAW JUDGE: Eric Feldman			
	HEARING DECISION FOR INTENTION	AL PROGRAM V	IOLATION	
Upon the request for a hearing by the Department of Human Services (Department), this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, and in accordance with Titles 7, 42 and 45 of the Code of Federal Regulation (CFR), particularly 7 CFR 273.16, and with Mich Admin Code, R 400.3130 and R 400.3178. After due notice, a telephone hearing was held on April 14, 2014 from Detroit, Michigan. The Department was represented by Regulation Agent of the Office of Inspector General (OIG).				
purs	Respondent did not appear at the hearing and suant to 7 CFR 273.16(e), Mich Admin Code F.3178(5).			
	ISSUES			
1.	Did Respondent receive an overissuance (OI Family Independence Program (FIP) Food Assistance Program (FAP) Medical Assistance (MA) benefits that the Department is entitled to receive	State Disability A Child Developme	assistance (SDA) ent and Care (CDC)	
2.	Did Respondent, by clear and convincing evid Violation (IPV)?	dence, commit an	Intentional Program	

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

Should Respondent be disqualified from receiving

3.

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 February 13, 2014, 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 issued by the Department.
4.	Respondent \boxtimes was \square was not aware of the responsibility to report changes in income.
5.	Respondent had no apparent physical or mental impairment that would limit the understanding or ability to fulfill this requirement.
6.	The Department's OIG indicates that the time period it is considering the fraud period is May 1, 2011 to August 31, 2011 (fraud period).
7.	During the fraud period, Respondent was issued \$5,408 in \square FIP \boxtimes FAP \square SDA \square CDC \square MA benefits by the State of Michigan, and the Department alleges that Respondent was entitled to \$3,873 in such benefits during this time period.
8.	The Department alleges that Respondent received an OI in \square FIP \boxtimes FAP \square SDA \square CDC \square MA benefits in the amount of \$1,535.
9.	This was Respondent's \boxtimes first \square second \square 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

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT). Prior to August 1, 2008, Department policies were contained in the Department of Human Services Program Administrative Manuals (PAM), Department of Human Services Program Eligibility Manual (PEM), and Department of Human Services Reference Schedules Manual (RFS).

☑ 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.

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

- FAP trafficking Ols that are not forwarded to the prosecutor,
- prosecution of welfare fraud or FAP trafficking is declined by the prosecutor for a reason other than lack of evidence, and
 - the total OI amount for the 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 concurrent receipt of assistance (see BEM 222), or
 - the alleged fraud is committed by a state/government employee.

BAM 720 (July 2013), p. 12.

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 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 reporting responsibilities.

BAM 700 (July 2013), p. 7; 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 reduction of program benefits or eligibility. BAM 720, p. 1 (emphasis in original); see also 7 CFR 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.

In this case, the Department alleges that Respondent committed an IPV of her FAP benefits becauses she failed to report her employment and wages to the Department, which caused an overissuance of FAP benefits.

Clients must report changes in circumstance that potentially affect eligibility or benefit amount. BAM 105 (January 2011), p. 7. Changes must be reported within 10 days of receiving the first payment reflecting the change. BAM 105, p. 7.

Income reporting requirements are limited to the following:

- Earned income:
 - •• Starting or stopping employment.
 - •• Changing employers.
 - Change in rate of pay.
 - •• Change in work hours of more than five hours per week that is expected to continue for more than one month.

BAM 105, p. 7.

The Department's OIG indicates that the time period it is considering the fraud period is May 1, 2011 to August 31, 2011. At the hearing, the Department presented evidence to show why it believed the Respondent was aware of her responsibility to report her income and that she intentionally withheld or misrepresented information for the purpose of establishing, maintaining, increasing or preventing reduction of her FAP program benefits or eligibility.

First, the Department presented Respondent's application dated January 4, 2011, to show that the Respondent was aware of her responsibility to report changes. See Exhibit 1.

Second, the Department presented verification of Respondent's employment, which showed employment from March 4, 2011 to August 9, 2011. See Exhibit 1. This verification included Respondent's earnings throughout her employment period. See Exhibit 1.

Based on the foregoing information and evidence, the Department has failed to establish that Respondent committed an IPV of FAP benefits. There was no evidence to show that Respondent, during the alleged fraud period, intentionally withheld or misrepresented the income information for the purpose of maintaining, increasing or preventing reduction of program benefits or eligibility. BAM 720, p. 1.

Moreover, 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 reduction of program benefits or eligibility. BAM 720, p. 1 (emphasis in original). The Department did not present evidence to establish Respondent's intent during the alleged IPV usage other than verification from the employer. However, there was no evidence to show that Respondent, during the alleged fraud period, represented that she was intentionally withholding or misrepresenting the income information. The Department presented Respondent's application dated January 4, 2011, to show that she was aware of her responsibility to report changes. See Exhibit 1. However, this was prior to the alleged fraud period.

In summary, in the absence of any clear and convincing evidence that Respondent intentionally withheld or misrepresented the income information for the purpose of establishing, maintaining, increasing or preventing reduction of her FAP program benefits or eligibility, the Department has failed to establish that Respondent committed an IPV of FAP benefits.

Disqualification

A court or hearing decision that finds a client committed IPV disqualifies that client from receiving program benefits. BAM 720, p. 15. 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. 15.

Clients who commit an IPV are disqualified for a standard disqualification period except when a court orders a different period, or except when the OI relates to MA. BAM 720, p. 16. Refusal to repay will not cause denial of current or future MA if the client is otherwise eligible. BAM 710 (July 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.

In this case, the Department has failed to satisfy its burden of showing that Respondent committed an IPV concerning FAP benefits. Therefore, Respondent is not subject to a disqualification under the FAP program. BAM 720, p. 16.

Overissuance

As stated previously, the Department failed to show that Respondent purposely failed to report income. Thus, no IPV was committed. However, the Department can still proceed with recoupment of the OI when there is client error.

A client/CDC provider error OI occurs when the client received more benefits than they were entitled to because the client/CDC provider gave incorrect or incomplete information to the department. BAM 715 (July 2013), p. 1.

A client error is present in this situation because Respondent failed to notify the Department of her earned income until the employment earnings were received by the Department on August 5, 2011. See Exhibit 1. Based on this information, it is persuasive evidence that an OI is present due to client error.

In regards to policy, Respondent did not report the earned income changes within 10 days of receiving the first payment reflecting the change. BAM 105, p. 7. Thus, an OI was present for FAP benefits.

Regarding client error overissuances, the OI period begins the first month (or pay period for CDC) benefit issuance exceeds the amount allowed by policy or 72 months before the date the OI was referred to the RS, whichever is later. BAM 715, p. 4. To determine the first month of the OI period (for OIs 11/97 or later) the department allows time for: the client reporting period; the full standard of promptness (SOP) for change processing; and the full negative action suspense period. BAM 715, p. 4. Based on the above policy, the Department would apply the 10-day client reporting period, the 10-day processing period, and the 12-day negative action suspense period. BAM 715, p. 4.

Applying the above standard and in consideration of the Respondent receiving the unreported income on March 4, 2011, the Department determined that the OI period began on May 1, 2011. See Exhibit 1. It is found that the Department applied the appropriate OI begin date.

Additionally, 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. The amount of the OI is the benefit amount the group or provider actually received minus the amount the group was eligible to receive. BAM 720, p. 8.

For FAP cases, if improper reporting or budgeting of income caused the OI, the Department uses actual income for the OI month for that income source. BAM 715, p. 7. The Department converts all income to a monthly amount. BAM 715, p. 7. An exception for FAP only states that the Department does not convert the averaged monthly income reported on a wage match. BAM 715, p. 7. Any income properly budgeted in the issuance budget remains the same in that month's corrected budget. BAM 715, p. 7. Also, for client error OIs due, at least in part, to failure to report

earnings, the Department does not allow the 20% earned income deduction on the unreported earnings. BAM 715, p. 8.

In this case, the Department presented OI budgets for May 2011 to August 2011. See Exhibit 1. The budgets included Respondent's income that was not previously reported from the employer's verification. See Exhibit 1. A review of the OI budgets for May 2011 to August 2011 found them to be fair and correct.

Based on the above information, the Department established that from May 2011 to August 2011, Respondent was issued \$5,408 in FAP benefits. After budgeting the Respondent's income, the corrected total amount of FAP benefits issuance was \$3,873. The overissuance was established to be \$1,535 in FAP benefits. See Exhibit 1. Thus, the Department is entitled to recoup \$1,535 of FAP benefits.

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:

1.	The Department has established by clear and convincing evidence that Respondent \square did \boxtimes did not commit an intentional program violation (IPV).		
2.	Respondent \boxtimes did \square did not receive an OI of program benefits in the amount of \$1,535 from the following program(s) \square FIP \boxtimes FAP \square SDA \square CDC \square MA.		
The Department is ORDERED to			
	initiate recoupment procedures for the amount of \$1,535 in accordance with Department policy.		

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

Date Signed: April 23, 2014

Date Mailed: April 23, 2014

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.

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