RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM Christopher Seppanen Executive Director

SHELLY EDGERTON DIRECTOR



Date Mailed: September 30, 2016 MAHS Docket No.: 15-026187 Agency No.: Petitioner: OIG Respondent:

ADMINISTRATIVE LAW JUDGE: Darryl Johnson

HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION

Upon the request for a hearing by the Department of Health and 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 45 CFR 235.110; and with Mich Admin Code, R 400.3130 and 400.3178. After due notice, a telephone hearing was held on September 29, 2016, from Lansing, Michigan. The Department was represented by **Exercise**, Regulation Agent of the Office of Inspector General (OIG). 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).

ISSUES

- 1. Did Respondent receive an overissuance (OI) of Food Assistance Program (FAP) and Family Independence Program (FIP) benefits that the Department is entitled to recoup?
- 2. Did the Department establish, by clear and convincing evidence, that Respondent committed an Intentional Program Violation (IPV)?
- 3. Should Respondent be disqualified from receiving benefits for FAP and FIP?

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 December 2, 2015, to establish an OI of benefits received by Respondent as a result of Respondent having allegedly committed an IPV.
- 2. The OIG has requested that Respondent be disqualified from receiving program benefits.
- 3. Respondent was a recipient of FAP and FIP benefits issued by the Department.
- 4. Respondent was aware of the responsibility to report changes in employment and income.
- 5. Respondent did not have an 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 January 1, 2014, through January 31, 2014, for FAP, and January 1, 2014, through February 28, 2014, for FIP (fraud period).
- 7. During the fraud period, Respondent was issued \$ in FAP benefits and \$ in FIP benefits by the State of Michigan, and the Department alleges that Respondent was entitled to \$ in FAP benefits and \$ in FIP benefits during this time period.
- 8. The Department alleges that Respondent received an OI in FAP benefits in the amount of \$ and an OI in FIP be
- 9. This was Respondent's first alleged IPV.
- 10. A notice of hearing was mailed to Respondent at the last known address and was not returned by the US Post Office as undeliverable.

CONCLUSIONS OF LAW

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

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Department of Human Services) administers FIP pursuant to 45 CFR 233-260; MCL 400.10; the Social Welfare Act, MCL 400.1-.119b; 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 and Nutrition Act of 2008, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 273. The Department (formerly known as the Department of Human Services) administers FAP pursuant to MCL 400.10; the Social Welfare Act, MCL 400.1-.119b; and Mich Admin Code, R 400.3001 to .3015.

Effective January 1, 2016, the Department's OIG requests IPV hearings for the following cases:

- Willful overpayments of \$500.00 or more under the AHH program.
- FAP trafficking overissuances 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 amount for the FIP, SDA, CDC, MA and FAP programs combined is \$500 or more, or
 - the total amount is less than \$500, 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 (1/1/16), p. 12-13.

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 (1/1/16), 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 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, Petitioner was an on-going recipient of FIP and FAP. She was approved for benefits because, when she applied on July 8, 2013, (Exhibit 1 Pages 31-68) she reported that she had no income. She submitted a semi-annual contact (Pages 29-32) on January 31, 2014, in which she reported that she had started working in November 2014. That was the first time she reported her employment and income.

Once the Department learned of her employment, they obtained a Verification of Employment (Page 17) which showed she started working November 10, 2013, and was still working as of February 16, 2014. Wage records (Page 19) show her gross and net pay from November 14, 2013, through February 20, 2014.

Although Respondent was aware of the requirement that she report changes in her income, she did not inform the Department when she began working in November 2013. She waited until January 31, 2014, to report that employment. She received FAP and FIP during the fraud period (Pages 71-72) and when the Department recalculated her benefits based upon her actual income they found she received benefits that she would not have received if the Department had been aware of his employment. The Department has established that Respondent has committed an IPV.

Disqualification

A client who is found to have committed a FAP IPV by a court or hearing decision is disqualified from receiving program benefits. BAM 720, p. 15; BEM 708 (4/1/14), p. 1. Clients are disqualified for ten years for a FAP IPV involving concurrent receipt of benefits, and, for all other IPV cases involving FIP, FAP or SDA, for standard disqualification periods of one year for the first IPV, two years for the second IPV, and lifetime for the third IPV. BAM 720, p. 16. CDC clients who intentionally violate CDC program rules are disqualified for six months for the first occurrence, twelve months for the second occurrence, and lifetime for the third occurrence. BEM 708, p. 1. A disqualified recipient remains a member of an active group as long as he/she lives with

them, and other eligible group members may continue to receive benefits. BAM 720, p. 16.

In this case, Respondent committed IPVs in both the FAP and the FIP programs. These are her first IPVs. She is subject to disqualification in each program for 12 months.

<u>Overissuance</u>

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

In this case, the Department has provided budgets (Pages 21-28) detailing the calculations in which her OI amounts were determined. Respondent was awarded for the fraud period, but she was eligible to receive just for the fraud period, but she was eligible to that is to be recouped.

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 committed an IPV.
- 2. Respondent received an OI of program benefits in the amount of **\$** from the FAP and FIP programs.

The Department is ORDERED to initiate recoupment/collection procedures for the amount of **\$ 100 minimum for the second se**

It is FURTHER ORDERED that Respondent be disqualified from FAP and FIP for a period of 12 months.

Darryl Johnson Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

DJ/mc

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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 48909-8139

DHHS	
Petitioner	
Respondent	