



RICK SNYDER  
GOVERNOR

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

SHELLY EDGERTON  
DIRECTOR

[REDACTED]

Date Mailed: October 17, 2016  
MAHS Docket No.: 15-026646  
Agency No.: [REDACTED]  
Petitioner: OIG  
Respondent: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: Christian Gardocki**

**HEARING DECISION FOR INTENTIONAL PROGRAM VIOLATION AND  
OVERISSUANCE**

Upon the request for a hearing by the Michigan Department of Health and Human Services (MDHHS), 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 October 6, 2016, from Detroit, Michigan. The Michigan Department of Health and Human Services (MDHHS) was represented by [REDACTED], regulation agent with the Office of Inspector General. Respondent did not appear.

**ISSUES**

The first issue is whether MDHHS established Respondent received an overissuance (OI) of benefits.

The second issue is whether MDHHS established that Respondent committed an intentional program violation (IPV).

**FINDINGS OF FACT**

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

1. Respondent was an ongoing recipient of Food Assistance Program (FAP) benefits from the State of Michigan.
2. Respondent began employment with an employer (Employer #1) during the third quarter of 2014.

3. Respondent failed to timely report, to MDHHS, employment income from Employer #1.
4. Respondent received [REDACTED] from Employer #1 in [REDACTED].
5. In October 2014, MDHHS issued [REDACTED] in FAP benefits to Respondent, in part, based on no employment income from Employer #1.
6. Respondent's unreported income caused Respondent to receive an OI of [REDACTED] in FAP benefits for October 2014.
7. Respondent began employment with an employer (Employer #2) during [REDACTED].
8. Respondent failed to timely report to MDHHS employment income from Employer #2.
9. In July 2015, MDHHS issued [REDACTED] in FAP benefits to Respondent, in part, based on no employment income from Employer #2.
10. Factoring Respondent's unreported income caused Respondent to receive an OI of [REDACTED] in FAP benefits for [REDACTED].
11. Respondent unintentionally failed to report employment income to MDHHS.
12. On [REDACTED], MDHHS requested a hearing to establish Respondent committed an IPV and received an OI of [REDACTED] in FAP benefits for the months of [REDACTED].

### **CONCLUSIONS OF LAW**

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. MDHHS (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-.3011. MDHHS policies are contained in the Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), and Reference Tables Manual (RFT).

MDHHS requested a hearing, in part, to establish Respondent received an overissuance of benefits. MDHHS presented an Intentional Program Violation Repayment Agreement (Exhibit 1, pp. 6-7) alleging Respondent received a total of [REDACTED] in over-issued FAP benefits over the period from October 2014 through July 2015. The

repayment agreement, along with MDHHS testimony, alleged the OI was based on Respondent's failure to timely report employment income from two different employers.

Clients must report changes in circumstance that potentially affect eligibility or benefit amount. BAM 105 (April 2016), p. 11. Changes must be reported within 10 days of receiving the first payment reflecting the change. *Id.*

MDHHS presented Respondent's application (Exhibit 1, pp. 12-48) signed and dated by Respondent (presumably under a maiden name) on [REDACTED]. The presented application verified Respondent was advised of reporting responsibilities.

MDHHS presented various weekly check stubs (Exhibit 1, pp. 51-52) for Respondent from Employer #1. The stubs were from [REDACTED]. Year-to-date income was stated.

MDHHS credibly testified the stubs were directly obtained from Employer #1. MDHHS also presented a document (Exhibit 1, p. 53) listing Respondent's quarterly earnings with Employer #1; the document was obtained based on the employer's reporting to the State of Michigan Treasury. The document verified Respondent received earnings from Employer #1 in the last half of [REDACTED]. Respondent's 4<sup>th</sup> quarter earnings with Employer #1 totaled [REDACTED].

MDHHS deduced Respondent's actual [REDACTED] earnings were [REDACTED]. The deduction was based on Respondent's year-to-date income on her pay stub dated [REDACTED], which matched Respondent's income with Employer #1 listed on the presented quarterly income document. The MDHHS deductions were sound.

MDHHS presented documents from "TheWorkNumber" (Exhibit 1, pp. 55-56) dated [REDACTED]. TheWorkNumber is a known internet site that MDHHS can utilize to obtain a client's employment information. Various weekly pays to Respondent from Employer #2 were listed. The first listed pay was [REDACTED]. A total income of [REDACTED] was listed for [REDACTED].

MDHHS presented Respondent's FAP benefit issuance history from the State of Michigan (Exhibit 1, p. 57 and p. 61). The history listed Respondent received [REDACTED] in FAP benefits for October 2014 and [REDACTED] in FAP benefits for July 2015.

MDHHS presented an OI budget (Exhibit 1, pp. 59-60) for October 2014. The budget factored unreported income of [REDACTED] for [REDACTED]. An OI of [REDACTED] was calculated.

MDHHS presented an OI budget (Exhibit 1, pp. 62-64) for July 2015. The budget factored unreported income of [REDACTED] from Employer #2 for [REDACTED]. An OI of [REDACTED] was calculated.

MDHHS policy categorizes overissuances into 3 different types: client error, agency error, and intentional fraud (see BAM 700). Client and Agency errors are not pursued if the estimated amount is less than \$250 per program. BAM 700, p. 9.

MDHHS alleged Respondent failed to timely report the employment to MDHHS. The allegation was based, in part, on the absence of income budgeted from Employer #1 as part of the original FAP benefit issuances for October 2014 and July 2015. The allegation was also based, in part, on an absence of reporting in Respondent's case file. A regulation agent testified a search of Respondent's case file revealed no indication of Respondent timely reporting employment income with Employer #1 or Employer #2. The testimony is not definitive evidence that Respondent failed to timely report employment income, however, Respondent did not appear to rebut the testimony, nor was superior evidence available.

It is found Respondent failed to timely report employment income concerning Employer #1 and Employer #2. It is further found MDHHS established an OI totaling ██████ in FAP benefits not due to agency error. The analysis will proceed to determine if the OI was caused by an IPV by Respondent or client error.

The Code of Federal Regulations defines an IPV. Intentional program violations shall consist of having intentionally: (1) made a false or misleading statement, or misrepresented, concealed or withheld facts; or (2) committed any act that constitutes a violation of the Food Stamp Act, the Food Stamp Program Regulations, or any State statute for the purpose of using, presenting, transferring, acquiring, receiving, possessing or trafficking of coupons, authorization cards or reusable documents used as part of an automated benefit delivery system. 7 CFR 273.16 (c).

DHS regulations list the requirements for an IPV. A 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. BAM 720 (1/2011), p. 1. see also 7 CFR 273(e)(6).

IPV is suspected when there is **clear and convincing** [emphasis added] evidence that the client or CDC provider has intentionally withheld or misrepresented information for the purpose of establishing, maintaining, increasing or preventing reduction of program benefits or eligibility. *Id.* 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. It is a standard which requires reasonable certainty of the truth; something that is highly probable. Black's Law Dictionary 888 (6th ed. 1990).

MDHHS alleged Respondent failed to report employment information to MDHHS for the purpose of receiving FAP benefits for which Respondent was not entitled; this was established. MDHHS also contended the failure was purposeful and intentional.

It is notable that Respondent's failure to report employment information could reasonably be explained by forgetting to report information. Though MDHHS demonstrated Respondent was advised of reporting requirements at application (see Exhibit 1, p. 29) it does not insure that a client would not accidentally forget.

It is mildly persuasive that two different OIs from two different employers occurred. The separate OIs arguably establish a pattern by Respondent to report employment information. On the other hand, unbudgeted income could also support a finding that MDHHS failed twice to budget income. Though it has already been found that Respondent was at fault for the error, the finding was not based on the higher standard required for IPVs.

It is notable that the established OI periods were each one month in length. Generally, it is more likely that a failure to report was unintentional when the resulting OI is for a shorter period of time. This consideration supports finding that an IPV did not occur.

Generally, MDHHS will have difficulty to establish a purposeful failure to report information because there is typically no documentation to verify an IPV occurred. For example, MDHHS conceded Respondent did not report information to MDHHS that was contradictory to known facts. Presented evidence was not persuasive in overcoming the general rule.

It is found MDHHS failed to clearly and convincingly establish that Respondent committed an IPV. Accordingly, it is found MDHHS may not proceed with disqualifying Respondent from benefit eligibility.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that MDHHS established that Respondent received █████ in over-issued FAP benefits for the months of October 2014 and July 2015. The MDHHS request to establish an overissuance is **APPROVED**.

The administrative law judge, based upon the above findings of fact and conclusions of law, finds that MDHHS failed to establish that Respondent committed an IPV related to an OI of FAP benefits from the months of October 2014 and July 2015. The MDHHS request to establish Respondent committed an IPV is **DENIED**.



CG/hw

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**Christian Gardocki**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

**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**

[REDACTED]

[REDACTED]

**Petitioner**

[REDACTED]

**Respondent**

[REDACTED]