RICK SNYDER GOVERNOR

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

SHELLY EDGERTON



Date Mailed: October 4, 2016 MAHS Docket No.: 16-011718

Agency No.: Petitioner: OIG

Respondent:

ADMINISTRATIVE LAW JUDGE: Eric J. Feldman

HEARING DECISION FOR CONCURRENT BENEFITS 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 Regulations, particularly 7 CFR 273.16 and 45 CFR 235.110, and with Mich Admin Code, R 400.3130 and R 400.3178. After due notice, a telephone hearing was held on from Detroit, Michigan. The Department was represented by Regulation Agent from 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) 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 FAP?

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 to establish an OI of benefits received by Respondent as a result of Respondent having received concurrent program benefits and, as such, allegedly committed an IPV.
- 2. The OIG has requested that Respondent be disqualified from receiving program benefits.
- 3. Respondent was a recipient of FAP benefits issued by the Department.
- 4. Respondent was aware of the responsibility to report changes in her residence to the Department.
- 5. Respondent had no apparent physical or mental impairment that would limit the understanding or ability to fulfill this requirement.
- 6. Respondent began using FAP benefits outside of the State of Michigan beginning in t
- 7. The OIG indicates that the time period they are considering the fraud period is , (fraud period).
- 8. During the alleged fraud period, Respondent was issued \$ in FAP benefits from the State of Michigan.
- 9. During the alleged fraud period, Respondent was issued FAP benefits from the State of
- 10. This was Respondent's first alleged IPV.
- 11. A notice of hearing was mailed to Respondent at the last known address and was not returned by the U.S. Post Office as undeliverable.

CONCLUSIONS OF LAW

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

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:

- 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 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 (January 2016), pp. 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 (January 2016), p. 7; 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.

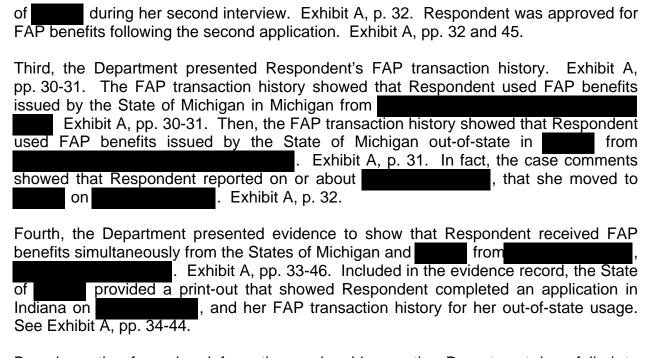
In this case, the Department alleges that Respondent committed an IPV of her benefits because she failed to update residency information for the purpose of receiving FAP benefits from more than one state.

A person cannot receive FAP in more than one state for any month. BEM 222 (July 2013), p. 3. Out-of-state benefit receipt or termination may be verified by one of the following: DHS-3782, Out-of-State Inquiry; Letter or document from other state; or Collateral contact with the state. BEM 222, p. 4.

A person is disqualified for a period of 10 years if found guilty through the Administrative Hearing Process, convicted in court or by signing a repayment and disqualification agreement (such as a DHS-826 or DHS-830) of having made a fraudulent statement or representation regarding her identity or residence in order to receive multiple FAP benefits simultaneously. BEM 203 (July 2014), p. 1.

First, the Department presented Respondent's online application dated (completed by an authorized representative), to show that she acknowledged her responsibility to report changes as required. Exhibit A, pp. 12-19. At the time of application, Respondent was receiving FAP benefits from the State of Exhibit A, pp. 33-34. Thus, the undersigned reviewed the application to see if Respondent reported her out-of-state benefits. However, after a thorough review of the application, the undersigned did not discover any question in the application asking whether she received any assistance from another state. But, following the submission of her application, her caseworker conducted an interview with Respondent to review . Exhibit A, p. 32. As part of the evidence her application on record, the Department included a "Case Comments-Summary" document (case comments), which summarized the case notes the caseworker took during the interview. Exhibit A, p. 32. In the case comments, the caseworker indicated that Respondent reported the receipt of FAP benefits from the State of Exhibit A, p. 32. Respondent was not approved for FAP benefits following this application.

(completed by an authorized representative), to show that she acknowledged her responsibility to report changes as required. Exhibit A, pp. 20-29. At the time of application, Respondent was receiving FAP benefits from the State of Exhibit A, pp. 33-34. Thus, the undersigned again reviewed the application to see if Respondent reported her out-of-state benefits. However, after a thorough review of the application, the undersigned did not discover any question in the application asking whether she received any assistance from another state. But, following the submission of her second application, her caseworker conducted another interview with Respondent on Exhibit A, p. 32. In the case comments, there was no mention of whether Respondent reported the receipt of FAP benefits from the State



Based on the foregoing information and evidence, the Department has failed to establish by clear and convincing evidence that Respondent committed an IPV of FAP benefits. As part of the evidence record, the Department included a case comments document, which summarized the case notes the caseworker took during an interview conducted to discuss her first submitted application. Exhibit A, p. 32. In the case comments, the caseworker indicated that Respondent reported the receipt of FAP benefits from the State of Exhibit A, p. 32. This shows to the undersigned that Respondent is not purposely withholding information from the Department because she properly reported the receipt of out-of-state benefits during her interview. As such, the undersigned finds that the Department failed to establish by clear and convincing evidence that Respondent made a fraudulent statement or representation regarding her identity or residence in order to receive multiple FAP benefits simultaneously. BEM 203, p. 1. Accordingly, the Department has failed to establish by clear and convincing evidence that Respondent committed an IPV of FAP benefits.

Disqualification

A client who is found to have committed an IPV by a court or hearing decision is disqualified from receiving program benefits. BAM 720, pp. 15-16; BEM 708 (April 2014), 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 lives with them, and other eligible group members may continue to receive benefits. BAM 720, p. 16.

In this case, the Department has not satisfied 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

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 715 (January 2016), p. 6.

Even though no IPV was committed, the Department can still proceed with recoupment of the OI when there is client error.

A client/provider error overissuance is when the client received more benefits than he/she was entitled to because the client/CDC provider gave incorrect or incomplete information to the department. BAM 715, p. 1.

As stated above, the undersigned finds that there was no IPV that was committed because she previously reported the receipt of dual benefits when she submitted her first application dated Exhibit A, p. 32. However, Respondent was not approved for FAP benefits following the first application. As such, Respondent applied a second time for FAP benefits on , in which she was subsequently approved. Every time an individual completes an application, the Department will conduct an interview to review her eligibility factors. See BAM 115 (July 2014), pp. 16-23. During her interview for the second application, the case comments indicated there was no mention of whether Respondent reported the receipt of FAP benefits from the State of Exhibit A, p. 32. The undersigned finds that this evidence is persuasive to conclude that Respondent failed to report the receipt of dual benefits during her second interview. Therefore, a client error is present in this case based on Respondent's failure to report the receipt of dual benefits when she submitted her second application. Accordingly, Respondent was not eligible for FAP benefits during the period in which she received dual assistance. BEM 222, p. 3.

In establishing the OI, the Department presented evidence to show that Respondent received FAP benefits simultaneously from the States of Michigan and from Exhibit A, pp. 33-46. Respondent's benefit summary inquiry showed that she was issued FAP benefits by the State of Michigan from in the amount of Exhibit A, p. 45. Thus, the Department is entitled to recoup \$ of FAP benefits it issued to Respondent for

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, concludes that:

- 1. The Department **has not** established by clear and convincing evidence that Respondent committed an IPV.
- 2. Respondent **did** receive an OI of FAP benefits in the amount of \$

The Department is **ORDERED** to initiate recoupment/collection procedures for the amount of \$ in accordance with Department policy, less any amount already recouped and/or collected.

EJF/jaf

Eric J. Feldman

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
Respondent
Via email