RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON DIRECTOR



Date Mailed: August 14, 2017 MAHS Docket No.: 17-004377 Agency No.: Petitioner: OIG Respondent:

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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, 42 CFR 431.230(b), 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 August 2. 2017, from Detroit, Michigan. The Department was represented by ________, 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 (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 benefits for Food Assistance (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 March 16, 2017, 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 benefits issued by the Department.
- 4. Respondent **was** aware of the responsibility to report changes affecting benefits within 10 days and to report change of address and residence.
- 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, 2016 through June 24, 2016 (fraud period).
- 7. The Respondent began to use his Michigan-based FAP benefits exclusively out of state in Louisiana beginning November 28, 2016. Exhibit A, p. 28
- 8. During the fraud period, Respondent was issued **Sector** in FAP benefits by the State of Michigan, and the Department alleges that Respondent was entitled to **Sector** in such benefits during this time period.
- 9. The Department alleges that Respondent received an OI in FAP benefits in the amount 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 United States Postal Services 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 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 October 1, 2014, 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 \$500.00 or more, or
 - the total amount is less than \$500.00, 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), p. 12-13; ASM 165 (October 2016), p. 1.

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 (October 2016), p. 7; BAM 720, p. 11.

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 seeks an intentional program violation due to the Respondent's use of his FAP benefits outside of the state of Michigan for an extended period of time without reporting a change of address for more than 30 days.

To be eligible for FAP benefits issued by the Department, an individual must be a Michigan resident. BEM 220 (7/1/14), p. 1. A person is considered a resident while living in Michigan for any purpose other than a vacation, even if he has no intent to remain in the state permanently or indefinitely. BEM 220, p. 1. A client who resides outside the State of Michigan for more than thirty days is not eligible for FAP benefits issued by the State of Michigan. BEM 212 (7/1/14), pp. 2-3.

The evidence demonstrated that Respondent applied for FAP benefits on September 3, 2015 in Michigan and was advised that he was required to report changes affecting his benefits within 10 days, and to report changes of address. Exhibit A, p. 20. The Respondent reported he was homeless at the time of the application. Thereafter a Notice fo Case Action was sent to Respondent on September 8, 2015, advising Respondent that he was eligible for FAP based upon income of \$ and notified Respondent of his obligation to report changes to the Department within 10 days that might affect his benefits, including change of address and changes in employment. Exhibit A, p. 24. The Respondent was also sent a Change Report for his use to report changes. Exhibit A, p. 22 and 24. Thereafter, beginning November 28, 2015, the Respondent began using his Michigan FAP benefits exclusively in and continued to use them in Lousiana until his case closed on June 30, 2016. Exhibit A, p. The Respondent became employed in **December** 29, 2015. 27-28. Exhibit A, p. 36. The Respondent became employed in Louisiana again on February 29, 2016 through June 14, 2016. Exhibit A, p. 38-39. At this point the Respondent had used his FAP benefits mor than 30 days outside of Michigan and was no longer eligible to receive Michigan FAP benefits. At no time did the Respondent advise the Department of his change of address.

Based upon the evidence presented, it is determined that it was sufficient to establish by clear and convincing evidence that Respondent intentionally witheld or misrepresented information concerning his residency, and intentionally did not advise the Department of his change of address for the purpose of establishing and continuing his Michigan FAP eligibility having begun out of state use on November 28, 2015. Thus, the Department has established an Intentional Program Violation was commited by the Respondent. The client intentionally failed to report information regarding his new address and that he was no longer resided in Michigan, although he was clearly instructed regarding his reporting responsibilities when he applied for benefits and by the Notice of Case Action he received which again advised him of his reporting obligations.

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, p. 15; BEM 708 (October 2016), 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 satisfied its burden of showing that Respondent committed an IPV concerning FAP benefits. Therefore, Respondent is subject to a disqualification under the FAP program. BAM 720, p. 16.

Overissuance

When a client group receives more benefits than 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.

Clients are not eligible for FAP benefits if they do not reside in Michigan. BEM 220, p. 1. At the hearing, the Department presented a FAP transaction history that established that Respondent used Michigan-issued FAP benefits out of state from November 28, 2015 through June 24, 2016. In the absence of any contrary evidence, this evidence established that Respondent did not reside in Michigan and was was not eligible for FAP benefits issued by the Department. The Department provided, as evidence, a new address for Respondent in **Exercise** based upon Respondent's employment information.

In this case, the Department alleges that Respondent was overissued FAP benefits for the period between January 1, 2016 through June 30, 2016. The Department presented a benefit summary inquiry to support issuances received by Respondent during this period totaling **Sector** Exhibit A, p. 41

The Department, based upon the evidence, presented of out of state use and receipt of Respondent of FAP benefits during the period has established an overissuance of that the Department is entitled to recoup.

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 **did** receive an OI of program benefits in the amount of **\$** from the following program(s) Food Assistance.

The Department is ORDERED to initiate recoupment/collection procedures for the amount of **\$ amount** in accordance with Department policy.

It is FURTHER ORDERED that Respondent be disqualified from receiving Food Assistance for a period of **12 months**.

LF/hw

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Lyńn M. Ferris 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

Petitioner

Respondent





