RICK SNYDER

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON



Date Mailed: February 7, 2018 MAHS Docket No.: 17-011884

Agency No.: Petitioner:

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 January 29, 2018, 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:

- The Department's OIG filed a hearing request on July 28, 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 income and employment.
- 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 April 1, 2014 through June 30, 2014 (fraud period).
- 7. During the fraud period, Respondent was issued in FAP benefits by the State of Michigan, and the Department alleges that Respondent was entitled to \$0 in such benefits during this time period.
- 8. The Department alleges that Respondent received an OI in FAP benefits in the amount of _____.
- 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 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.

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. 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 seeks an intentional program violation for failure to report income from employment which Respondent began on February 4, 2014 with the The Employer provided a verification of (Employer). employment which indicated that Respondent started employment February 4, 2014 and completed employment June 15, 2014. Exhibit A pp. 27-29. The Respondent applied for FAP benefits on February 14, 2014 and reported her income received from child support but did not report her employment. The Department also presented a prior application filed in October 2013 to demonstrate that the Respondent was aware of her responsibility to report employment and income. In this case because she did not report her employment which had started already as established by the verification by the employer, the Department has established that Respondent failed to disclose information which if she had disclosed would have prevented her from receiving FAP benefits. The Department also presented benefit issuance summaries establishing that Respondent received FAP benefits throughout the fraud period. Exhibit A, pps 53-54.

Clients must report changes in circumstances that potentially affect eligibility or benefit amount. BEM 105 (December 1, 2011), p. 7. Changes must be reported within 10 days of receiving the first payment reflecting the change. BAM 105, p. 11.

In this case the Respondent did not report her employment income at any time, even though she was given the opportunity to do so when applying for FAP benefits on February 4, 2014. Thus, based upon the failure of the Respondent to report employment and income, the Department has established that Respondent intentionally did so in order to continue to receive FAP benefits and thus has established that Respondent committed an IPV by clear and convincing evidence.

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. 16. 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. 17. 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, the Department has established by clear and convincing evidence that Respondent has committed an IPV and thus is entitled to a finding of disqualification of Respondent from receipt of FAP benefits. Because this was the Respondent's first IPV a 12-month disqualification is imposed.

Overissuance

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 (January 2016), p. 1.

A client error is present in this situation because Respondent failed to notify the Department of her employment and her earned income when applying for FAP benefits. In regards to policy, the evidence established that Respondent did not report the income changes within 10 days of receiving the first payment reflecting the change. BAM 105, p. 9. Thus, an OI is present in this case.

Applying the overissuance period standard, it is found that the Department determined OI began on April 1, 2014. [BAM 715, pp. 4-5 and Exhibit A, pp. 4 and 35.]

When a client group receives more benefits than entitled to receive, the Department must attempt to recoup the OI. BAM 700, p. 1. An **overissuance (OI)** is the amount of benefits issued to the client group or CDC provider in excess of what it was eligible to receive. For FAP benefits, an OI is also the amount of benefits trafficked (traded or sold). BAM 700, (May 1, 2014), p. 7.

For the period April 1, 2014 through June 30, 2014 the Department alleged that Respondent received an OI of specific based upon 3 months of benefits received in the amount of monthly. Exhibit A, pps. 46, 53 and 54.

The overissuance budgets were reviewed at the hearing and the Department could not provide an explanation based upon the W-2 received from the employer issued to the Respondent how it determined the monthly income amount for the period in question. The W-2 indicated that Respondent received in wages and tips for the tax year 2014. The Department was given time to go off the record and review the OI budgets to determine how the unreported monthly income of was calculated but was unable to explain how the monthly amount was determined. Exhibit A, pps. 46-52.

A review of the OI budgets at the hearing and further review by the undersigned found them be incorrect. The Department also presented a Benefit Issuance Summary Inquiry to establish that Respondent received FAP benefits throughout the OI period. Exhibit A, pps. 53-54. Based upon the evidence presented the Department has not established that it is entitled to recoup an overissuance due to failure to report employment, because the Department did not demonstrate that the correct OI amount was alleged. Under this circumstance the Department has established that the Respondent received more FAP benefits than she was entitled to receive and must redetermine and establish the correct overissuance amount as client error was demonstrated. BAM 715 (client error, computing earned income), (July 1, 2017), p. 8.

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. The Department did not satisfy its burden of showing that it correctly calculated the overissuance amount presented and must recalculate the OI for the fraud period February 4, 2014 through June 15, 2014.

The Department is ORDERED to recalculate the correct OI amount in accordance with Department policy and send the Respondent a Notice of Overissuance. Respondent shall have the right to request a hearing regarding the OI 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/tm

<u> M. Sanis</u> Lynn 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

