

## State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General

# Board of Review 4190 Washington Street West Charleston, WV 25313

Joe Manchin III Governor Martha Yeager Walker Secretary

August 31, 2006

| August 31, 2000  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |
| Dear Mrs:  |
| Attached is a copy of the findings of fact and conclusions of law on your hearing held July 18, 2006. Your |

Attached is a copy of the findings of fact and conclusions of law on your hearing held July 18, 2006. Your hearing was based on the Department of Health and Human Resources' proposal that you committed an Intentional Program Violation.

In arriving at a decision, the State Hearings Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility for the Food Stamps is based on current policy and regulations. Some of these regulations state as follows: According to Common Chapters Manual, Chapter 700, Appendix A, Section B, an intentional program violation consists of having intentionally made a false statement, or misrepresented, concealed or withheld facts, or committed any act that constitutes a violation of the Food Stamp Act, the Food Stamp Program Regulations, or any statute relating to the use, presentation, transfer, acquisition, receipt or possession of food stamp coupons.

The information submitted at your hearing revealed: You intentionally withheld reporting your household unearned income on several occasions and in a timely manner. This resulted in an over issuance of Food Stamp Benefits in the amount of \$4,618.00 for the period covering July 22, 2003 through November 30, 2005.

It is the decision of the State Hearings Officer to UPHOLD the PROPOSAL of the Department that you committed an Intentional Program Violation. You will be sanctioned from the Food Stamp Program for a period of twelve (12) months. The sanction will be effective October 2006.

Sincerely,

Ray B. Woods, Jr., M.L.S. State Hearing Officer Member, State Board of Review

cc: State Board of Review

Mrs. Jennifer Butcher, Repayment Investigator

### WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

|                 | Defendant,  |
|-----------------|---|
| v.              | Action Number: 06-BOR-1684  |
|                 | nia Department of<br>Human Resources,   |
|                 | Respondent.   |
|                 | DECISION OF THE STATE HEARING OFFICER   |
| I.              | INTRODUCTION:   |
|                 | This is a report of the State Hearing Officer resulting from an Administrative Disqualification Hearing concluded on August 31, 2006 for Mrs  |
| intenti<br>in a | The issue in this particular matter involves the defendant, Mrs   |
|                 | It should be noted here that, the Defendant was not receiving Food Stamp Benefits at the time of the hearing. The Scheduling Notice was not returned, and Mrs did not attend the scheduled hearing. |
| II.             | PROGRAM PURPOSE:  |

The Program entitled Food Stamps is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human

Resources.

The purpose of the Food Stamp Program is to provide an effective means of utilizing the nation's abundance of food "to safeguard the health and well-being of the nation's population and raise levels of nutrition among low-income households." This is accomplished through the issuance of EBT benefits to households who meet the eligibility criteria established by the Food and Nutrition Service of the U.S. Department of Agriculture.

#### III. PARTICIPANTS:

Jennifer Butcher, Repayment Investigator

Presiding at the Hearing was, Ray B. Woods, Jr., M.L.S., State Hearing Officer and a member of the State Board of Review.

#### IV. QUESTIONS TO BE DECIDED:

The question to be decided is whether it was shown by clear and convincing evidence that the defendant, \_\_\_\_\_\_, committed an intentional program violation.

#### V. APPLICABLE POLICY:

WV Income Maintenance Manual Section 9.1 (A) (2) (f) and, Common Chapters Manual, Chapter 700, Appendix A, Section B

#### VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

#### **Department's Exhibits:**

| Exhibit -1  | Application dated 07/22/03  |
|-------------|---|
| Exhibit -2  | Verification of's Social Security Benefits                          |
| Exhibit -3  | Application dated 07/16/04  |
| Exhibit -4  | Application dated 06/17/05  |
| Exhibit -5  | School Clothing Allowance Application dated 07/06/05                |
| Exhibit -6  | Benefit Recovery Referral dated 10/26/05                            |
| Exhibit -7  | Request for verification of Social Security Benefits dated 02/14/06 |
| Exhibit -8  | Food Stamp Claim Determination                                      |
| Exhibit -9  | Rights and Responsibilities dated 08/29/02                          |
| Exhibit -10 | Case Comments 08/03 – 06/05   |
| Exhibit -11 | IG-BR-30; 31; 44 dated 04/21/06                                     |

#### **Claimants' Exhibits:**

None

#### VII. FINDINGS OF FACT:

| Benefit                     | Mainte ts for            | The Investigation and Fraud Management Unit received a referral from the Income nance Unit that failed to report the onset of Social Security her and two children. Because of this unreported income, an over issuance of Food in the amount of \$4,618.00 occurred between July 22, 2003 through November 30,  |
|-----------------------------|--------------------------|--|
| Violation false of any act  | for the on               | The West Virginia Department of Health and Human Resources requested this hearing purpose of determining if committed an Intentional Program (IPV). The Code of Federal Regulations Article 273.16c defines an IPV as (1) made a misleading statement or misrepresented, concealed or withheld facts, or (2) committed that constitutes a violation of the Food Stamp Program Regulations, or any state statute to the use, presentation, acquisition, receipt, or possession of the Food Stamp EBT card are seen to the use, presentation, acquisition, receipt, or possession of the Food Stamp EBT card are seen to the use, presentation acquisition of the Food Stamp EBT card are seen to the use, presentation acquisition of the Food Stamp EBT card are seen to the use, presentation acquisition of the Food Stamp EBT card are seen to the use, presentation acquisition of the Food Stamp EBT card are seen to the use, presentation acquisition of the Food Stamp EBT card are seen to the use of the use |
|                             | Clothin<br>Securit       | An Application was taken on July 22, 2003 for Food Stamps, Medicaid and School ag Allowance provided verification of her husband's () Social benefits, and reported his Medicare premium would begin August 2003. This was all tome reported at the application (Exhibits -1 & 2).   |
| she wa<br>income<br>(Exhibi | Respons                  | A Food Stamp and Medicaid review was completed on July 16, 2004. The Rights and asibilities and Application were again signed by   |
|                             | Applica                  | A Food Stamp and Medicaid review was completed on June 17, 2005. Again the ation and R&R were read and signed, to accept all responsibilities, and attesting that all e and correct to the best of their knowledge. The only income reported was Social Security Benefits and Child Support Arrearages (Exhibit -4)  |
|                             | DHHR                     | A School Clothing Allowance application dated July 6, 2005, was received in the office on July 13, 2005. The application did not list any household earned or unearned (Exhibit -5).   |
| her                         | Mainte and two           | A Benefit Recovery Referral dated October 26, 2005 was received from the Income nance Unit. It stated, "   |
| Benefit                     | on Februa<br>Februa<br>s | Mrs. Butcher requested income verification from the Social Security Administration ruary 14, 2006. The verification was received by the Kanawha DHHR office on ry 23, 2006. According to the document, the onset of  |

|                         | each beg                              | 1 1 7  |
|-------------------------|---------------------------------------|--|
| It<br>correct<br>(Exhib | took in<br>ted                        | A Food Stamp Claim Determination worksheet was completed to determine the amount d Stamps the household received from July 22, 2003 to November 30 2005. to account the reporting of only 's Social Security income and the amount of Food Stamps if all of the household's Social Security income was reported 8).  |
|                         |                                       | Mrs has been receiving benefits through the Department for more than six She has completed many applications and reviews. On each occasion, she either read or ad to her the Rights and Responsibilities. The last paragraph of the application states:  |
|                         | or had<br>and I u<br>law to           | restand my responsibility to provide complete and truthful information. I have reviewed read to me the information contained in this automated portion of the application form nderstand the information. I understand that it is a criminal violation of federal and state provide false or misleading information for the purpose of receiving benefits to which I by law entitled. Under penalty of perjury, I certify that the statements are true and   |
|                         | Also st                               | ated in part on page 7 item # 42 of the R&R:   |
|                         | require<br>that an<br>DHHR<br>from th | estand if I give incorrect or false information or if I fail to report changes, then I may be ed to repay any benefits I receive. I may also be prosecuted for fraud and I understand y information given is subject to verification by an authorized representative of the Also, it is understood that any person who obtains or attempts to obtain welfare benefits the DHHR by means of a willfully false statement or misrepresentation or by onation or any other fraudulent device can be charged with fraud (Exhibit -9). |
| telepho<br>househ       | June 1'                               | The Case Comments for August 7 & 11, 2003; June 3 & 30, 2004; July 2, 9, 14, 16, 20 2004; November 11, 2004; December 20, 2004; January 25, 2005; May 25, 2005 and 7, 2005, indicates Mrs had contact with the Department either by unscheduled visit or scheduled appointment. She had an opportunity to report all income on any of the aforementioned occasions, but failed to do so (Exhibit -10).   |
|                         | misrep<br>the Foo                     | According to Common Chapters Manual, Chapter 700, Appendix A, Section B, an onal program violation consists of having intentionally made a false statement, or resented, concealed or withheld facts, or committed any act that constitutes a violation of od Stamp Act, the Food Stamp Program Regulations, or any statute relating to the use, tation, transfer, acquisition, receipt or possession of food stamp coupons.   |
|                         | 13)                                   | According to policy at WV Income Maintenance Manual Section 9.1 (A) (2) (f) the  |

14) The Code of Federal Regulations defines an Intentional Program Violation (IPV) in 7 CFR 273.16 as "... having intentionally: 1) made a false or misleading statement, or misrepresented, concealed or withheld facts; or 2) committed any act that constitutes a violation

disqualification penalty for having committed an Intentional Program Violation is twelve months for the first violation, twenty-four months for the second violation, and permanent

disqualification for the third violation.

of the Food Stamp Act, the Food Stamp Program Regulations, or any State statue 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(access device).

| VIII.  | CON | CT | TICT | ONS | OFI  | A XX7.  |
|--------|-----|----|------|-----|------|---------|
| V III. |     |    |      |     | VI L | // VV . |

| <b>V 111.</b> | CONCLUSIONS OF LAW.  |
|---------------|--|
|               | 1) According to Common Chapters Manual, Chapter 700, Appendix A, Section B, an intentional program violation consists of having intentionally made a false statement, or misrepresented, concealed or withheld facts, or committed any act that constitutes a violation of the Food Stamp Act, the Food Stamp Program Regulations, or any statute relating to the use, presentation, transfer, acquisition, receipt or possession of food stamp coupons. |
| and tw        | 2) Mrs intentionally withheld reporting unearned income for her children on several occasions, and in a timely manner. This resulted in an over issuance Food Stamp Benefits in the amount of \$4,618.00 for the period covering July 22, 2003 through November 30, 2005.  |
| IX.           | DECISION:  |
|               | It is the decision of this State Hearing Officer that Mrs committed an Intentional Program Violation. She will be sanctioned from the Food Stamp Program for a period of 12 months effective October 2006.   |
| <b>X.</b>     | RIGHT OF APPEAL:   |
|               | See Attachment   |
| XI.           | ATTACHMENTS:   |
|               | The Claimant's Recourse to Hearing Decision  |
|               | Form IG-BR-29  |
|               | ENTERED this 31st Day of August 2006.  |
|               |  |

Ray B. Woods, Jr., M.L.S. State Hearing Officer