



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: May 25, 2016  
MAHS Docket No.: 15-026503  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: C. Adam Purnell**

**HEARING DECISION**

Pursuant to a September 8, 2014 federal lawsuit, the Department of Health and Human Services (Department) issued notices to Medicaid applicants who were potentially denied full Medicaid coverage based on immigration status between January 2014 and May 2015. The notice included information about how to request a hearing. Petitioner filed a request for a hearing and accordingly this matter is before the undersigned Administrative Law Judge pursuant to Michigan Administrative Hearing Rules (R 792.10101 – R 792.11903) and the Administrative Procedures Act, 1969 PA 306, as amended, MCL 24.201 *et seq.*

After due notice, a three-way telephone conference hearing was held on May 24, 2016, from Lansing, Michigan. Petitioner participated in the hearing via telephone and provided testimony. The Department was represented by [REDACTED] (Eligibility Specialist).

**PROCEDURAL HISTORY**

On September 8, 2015, Petitioner requested a hearing to dispute the decision to approve the application for MA ESO rather than full MA coverage. The Department offered the following as Exhibit 1, which was admitted into evidence: Hearing Summary (page 1), Hearing Request (DHS-3050) (page 2), Hearing Summary Notice (page 3), Application (pages 4-12), Bridges screen print (page 13), Attestment of lawful presence (page 14) and Benefit Notice (DHS-176) (pages 15-16). Petitioner did not offer any exhibits into evidence.

## **ISSUE**

Did the Department properly determine Petitioner's immigration status or citizenship when determining Medicaid (MA) eligibility?

## **FINDINGS OF FACT**

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

1. Petitioner entered the United States from India. [Exhibit 1, p. 14].
2. On March 25, 2014, Petitioner applied for MA benefits. [Exh. 1, pp. 4-12].
3. On the date of MA application, the Petitioner was a permanent U.S. resident. [Exh. 1, p. 14].
4. Beginning April, 2014, the Department approved Petitioner's MA application for Emergency Services Only (ESO) MA coverage.
5. In August, 2015, the Department issued a notice to the Petitioner indicating that she may have been denied full MA coverage based on immigration status between January 2014 and May 2015.
6. On September 8, 2015, Petitioner requested a hearing to dispute the decision to approve the application for MA ESO rather than full MA coverage. [Exh. 1, p. 2].
7. On January 15, 2016, the Department mailed Petitioner a Benefit Notice (DHS-176) that indicated Petitioner's MA benefits were reviewed and that she has been provided with full MA benefits from April, 2014 to February, 2015. [Exh. 1, pp. 14-15].

## **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), Department of Health and Human Services Reference Tables Manual (RFT), and Department of Health and Human Services Emergency Relief Manual (ERM).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

In this case, Petitioner requested a hearing disputing the activation of ESO MA coverage. The Department contends that Petitioner was initially provided with ESO, but was eligible for full MA at the time of application. The Department further indicates that Petitioner was later provided with full retroactive MA benefits.

Policy requires the Department determine the alien status of each non-citizen requesting benefits at application, member addition, redetermination and when a change is reported. BEM 225 (1-1-2014), p. 1. To be eligible for full MA coverage, a person must be a U.S. citizen or an alien admitted to the U.S. under a specific immigration status. BEM 225, p. 2. The alien status of each non-citizen must be verified to be eligible for full MA coverage. BEM 225, p. 2.

A person claiming U.S. citizenship is not eligible for ESO coverage. BEM 225, p. 2. U.S. citizenship must be verified with an acceptable document to continue to receive Medicaid. BEM 225, p. 2. Citizenship/alien status is not an eligibility factor for emergency services only (ESO) MA. However, the person must meet all other eligibility factors, including residency. BEM 225, p. 2.

MA coverage is limited to emergency services for any: (1) persons with certain alien statuses or U.S. entry dates as specified in policy; (2) persons refusing to provide citizenship/alien status information on the application; and/or (3) persons unable or refusing to provide satisfactory verification of alien information. BEM 225, p. 3. All other eligibility requirements including residency **must** be met even when MA coverage is limited to emergency services. BEM 225, p. 3.

Persons listed under the program designations in Acceptable Status meet the requirement of citizenship/alien status. Eligibility may depend on whether or not the person meets the definition of Qualified Alien. BEM 225, p. 3. "Qualified alien" means an alien who is lawfully admitted for **permanent residence** under the INA. BEM 225, p. 4 (Emphasis added). For MA, an individual is limited to emergency services for the first five years in the U.S. BEM 225, p. 8.

In this case, the narrow issue before the Administrative Law Judge concerns the Department's processing of Petitioner's MA coverage based on immigration status between January 2014 and May 2015. Petitioner provided credible testimony that she, at the time of application, was a permanent U.S. resident. [Exh 1, p. 14]. According to BEM 225, page 8, Petitioner was eligible for full MA benefits because she had been in the U.S. for at least five years. The Department acknowledged the error and later provided Petitioner with full MA benefits going back to April, 2014.

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department **did** properly determine Petitioner's immigration status or citizenship when determining MA eligibility.

**DECISION AND ORDER**

Accordingly, the Department's determination about MA eligibility based on immigration status is **AFFIRMED**.



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**C. Adam Purnell**  
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**

