# STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### IN THE MATTER OF:



MAHS Reg. No.: 15-021877

Issue No.: ESO

Agency Case No.:

Hearing Date: February 1, 2016
County: DHHS SPECIAL

PROCESSING OFFICE

ADMINISTRATIVE LAW JUDGE: Eric Feldman

# **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 hearing was held on February 1, 2016, from Detroit, Michigan. The Petitioner was represented by The Department was represented by Eligibility Specialist.

## <u>ISSUE</u>

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. On Petitioner applied for MA benefits. See Exhibit A, pp. 6-12.
- 2. On the date of MA application, Petitioner was a United States citizen/naturalized citizen. See Exhibit A, p. 2-3 (Petitioner's Certificate of Live Birth).

- 3. On \_\_\_\_\_, the Department sent Petitioner a Health Care Coverage Determination Notice (determination notice) notifying her that she was eligible for only Emergency Services Only (ESO) MA coverage effective ongoing. See Exhibit A, pp. 15-16.
- 4. However, Petitioner's ESO MA coverage was converted to full MA coverage effective September 2014 to August 2015. See Exhibit A, pp. 13-14 (Medicaid Eligibility).
- 5. On See Exhibit A, p. 2.
- 6. On the control of the Department sent Petitioner a Benefit Notice notifying her that she was eligible for full MA coverage from September 2014 to August 2015. See Exhibit A, pp. 17-18.
- 7. On Petitioner a Notice of Hearing informing Petitioner of a hearing scheduled on .
- 8. On MAHS sent Petitioner an Amended Notice of Hearing informing Petitioner of a hearing rescheduled on .

## **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), Department of Health and Human Services Modified Adjusted Gross Income (MAGI) Related Eligibility Manual (MREM), 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.

As a preliminary matter, Petitioner indicated that she received the Notice of Hearing, but did not receive the Amended Notice of Hearing informing her that the hearing was rescheduled for February 1, 2016. Nonetheless, Petitioner acknowledged that the hearing could still proceed even though she did not receive the Amended Notice of Hearing. See BAM 600 (October 2015), pp. 32-34.

In this case, Petitioner requested a hearing disputing her MA coverage. See Exhibit A, p. 2. It should also be noted that the undersigned's jurisdiction is only to review whether

the Department denied Petitioner's full MA coverage between January 2014 to May 2015, in accordance with federal and state laws and policies.

To be eligible for full coverage MA, a person must be a U.S. citizen or an alien admitted to the U.S. under a specific immigration status. BEM 225 (January 2014; July 2014; October 2014; and October 2015), p. 2. An individual who is a permanent resident alien with a class code on the permanent residency card other than RE, AM or AS is eligible only for ESO MA coverage for the first five years in the U.S. unless the alien is a qualified military alien or the spouse or dependent child of a qualified military alien. BEM 225, pp. 7-8, 30; MREM, § 3.6. A qualified military alien is a qualified alien on active duty in, or veteran honorably discharged from, the U.S. Armed Forces. BEM 225, p. 5; MREM, § 3.6. A person who does not meet an acceptable alien status, including undocumented aliens and non-immigrants who have stayed beyond the period authorized by the U.S. Citizenship and Immigration Services, are eligible only for ESO MA coverage. BEM 225, p. 9. The alien status of each non-citizen must be verified to be eligible for full MA coverage. BEM 225, p. 2.

On the date of MA application, Petitioner was a United States citizen/naturalized citizen. See Exhibit A, p. 2-3 (Petitioner's Certificate of Live Birth).

On the control of the Department sent Petitioner a determination notice notifying her that she was eligible for only ESO MA coverage effective ongoing. See Exhibit A, pp. 15-16.

However, Petitioner's ESO MA coverage was converted to full MA coverage effective September 2014 to August 2015. See Exhibit A, pp. 13-14 (Medicaid Eligibility). On the Department sent Petitioner a Benefit Notice notifying her that she was eligible for full MA coverage from September 2014 to August 2015. See Exhibit A, pp. 17-18. It should be noted that Petitioner argued that she never received notice of her full MA coverage. However, it appears that she possibly did not receive any notice as it might have been sent to her previous address.

Nevertheless, the issue before the undersigned is whether the Department properly determined Petitioner's immigration status or citizenship when determining MA eligibility.

Based on the foregoing information and evidence, along with both parties testimony, the Department properly determined Petitioner's immigration status when determining MA eligibility. Yes, the Department initially approved Petitioner for only ESO coverage. However, the Department updated all benefit periods that previously had ESO coverage and provided Petitioner with full MA coverage from September 2014 to August 2015. See Exhibit A, pp. 1 and 13-14. As such, the Department properly determined that Petitioner was eligible for full-coverage MA.

It should be noted that it was discovered that Petitioner did not receive MA coverage from September 2015 to December 2015 because she allegedly failed to submit a redetermination (determination notice dated August 20, 2015). Petitioner did reapply and has ongoing MA coverage from January 2016. Nonetheless, the undersigned will not address Petitioner's lapse of coverage from September 2015 to December 2015. As stated above, the undersigned's jurisdiction is to review whether the Department denied Petitioner's full MA coverage between January 2014 and May 2015. However, Petitioner's lapse in coverage falls outside this time period in which the undersigned is able to review. Therefore, the undersigned will not address Petitioner's lapse in MA coverage from September 2015 to December 2015

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**.

**Eric Feldman** 

Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

Date Signed: 2/2/2016

Date Mailed: 2/2/2016

EF / hw

**NOTICE OF APPEAL**: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

