RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM Christopher Seppanen Executive Director

MIKE ZIMMER DIRECTOR



Date Mailed: March 17, 2016 MAHS Docket No.: 15-021395 Agency No.: Petitioner:

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 March 16, 2016, from Lansing, Michigan. The Petitioner was represented by (Petitioner's husband and Authorized Hearing Representative (AHR)). Petitioner testified during the hearing. 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 August 1, 2012, Petitioner entered the United States from Iraq. [Exhibit 1, p. 4].
- 2. On or about September 19, 2014, Petitioner applied for MA benefits. On the application, Petitioner failed to properly complete all the sections.

- 3. On September 29, 2014, the Department mailed Petitioner a Health Care Coverage Determination Notice (DHS-1606) which indicated Petitioner was eligible for ESO MA benefits effective November 1, 2014 ongoing. [Exh. 1, pp. 22-24].
- 4. On October 24, 2014, Petitioner applied for MA. On the application, Petitioner indicated she was a naturalized or derived citizen and that she had eligible immigration status. [Exh. 1, pp. 7-16].
- 5. Petitioner was apparently provided with MA benefits under the Healthy Michigan Plan (HMP) from August 1, 2014 through October 31, 2014. [Exh. 1, pp. 17-19].
- 6. On the date of MA application, the Petitioner was a permanent resident. [Exh. 1, p. 4].
- 7. 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.
- 8. 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].
- 9. On November 6, 2015, the Department mailed Petitioner a Health Care Coverage Determination Notice (DHS-1606) which indicated Petitioner was eligible for full coverage MA benefits effective November 1, 2014 through November 30, 2015. [Exh. 1, pp. 25-27].

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. During the hearing, Petitioner indicated that her children required medical attention. Petitioner has the option to contact her departmental caseworker or she may request a hearing as the sole issue in this matter concerned Petitioner's MA coverage between January 2014 and May 2015. The undersigned lacks jurisdiction to cover any other matters. With regard to the issue relevant to this hearing, the Department

contends that Petitioner's case was updated and that she was later provided with full MA benefits from November 2014 through November 2015.

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). <u>For MA, an individual is limited to</u> <u>emergency services for the first five years in the U.S. BEM 225, p. 8.</u>

In this case, Petitioner credibly testified that she entered the U.S. on August 1, 2012. The record shows that this is correct. [Exh 1, p. 4]. At time of application, Petitioner was a permanent resident but had not been in the U.S. for at least 5 years. According to BEM 225, page 8, Petitioner may be eligible for full MA benefits in August, 2017. Therefore, Petitioner was eligible for ESO MA benefits.

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

Authorized Hearing Rep.

Petitioner



