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: April 7, 2016 MAHS Docket No.: 15-018796 Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 telephone hearing was held via four-way telephone conference on March 31, 2016, from Detroit, Michigan. Petitioner represented herself. The Department was represented by **Example 1**, Eligibility Specialist. **Example 2** served as translator (Arabic) during the hearing.

<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 June 13, 2014, Petitioner applied for MA benefits (Exhibit A).
- 2. On the date of MA application, Petitioner was not a United States citizen.
- 3. The Department approved Petitioner for Emergency Services Only (ESO) MA coverage.

- 4. In September 2014, the Department changed Petitioner's MA coverage to full coverage based on refugee status.
- 5. On an unknown date, the Department issued a notice to the Petitioner indicating she may have been denied full MA coverage based on immigration status between January 2014 and May 2015.
- 6. On September 4, 2015, the Department received Petitioner's request for hearing.

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.

In this case, Petitioner requested a hearing to challenge the Department providing her with Emergency Services Only (ESO) Medicaid (MA) rather than full-coverage MA. At the hearing, the Department testified that initially Petitioner was approved for ESO MA coverage effective June 1, 2014 but the Department corrected Petitioner's case in September 2014 to provide her with full coverage MA based on her refugee status. An individual who is a permanent resident alien with a class code on the permanent residency card of RE, AM or AS is eligible for full-coverage MA. BEM 225 (October 2014 and 2015), p. 7-8; MREM, § 3.6. The Department explained that, when Petitioner's case was reviewed in connection with her September 4, 2015 hearing request, it realized that Petitioner had received, and continued to receive, full coverage MA based on refugee status expect for the months of October 2014 and November 2014. The Department testified that it converted Petitioner's coverage for those months to full-coverage MA due to her refugee status.

In support of its testimony, the Department presented a Medicaid eligibility summary showing that Petitioner had full-coverage MA under the Healthy Michigan Plan effective June 1, 2014, with coverage showing as continuing as of June 2015 (Exhibit B) and a Benefit Notice dated September 28, 2015 notifying Petitioner that she was approved for full-coverage MA for October 2014 and November 2014 (Exhibit C). At the hearing, the

Department testified that Petitioner's full-coverage MA continued to be active as of the hearing date.

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, as of the hearing date, the Department resolved the issues resulting in Petitioner's hearing request and properly determined Petitioner's immigration status when determining MA eligibility.

DECISION AND ORDER

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

ACE/tlf

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Alice C. Elkin 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

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