



RICK SNYDER
GOVERNOR

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

MIKE ZIMMER
DIRECTOR

[REDACTED]

Date Mailed: March 29, 2016
MAHS Docket No.: 15-023610
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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 March 3, 2016, from Detroit, Michigan. The Petitioner was represented by himself. The Department was represented by [REDACTED], Eligibility Specialist.

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. On April 9, 2014, Petitioner applied for MA.
2. On the date of MA application, Petitioner was a United States (U.S.) citizen although he did not indicate same on the application. Exhibit 1.

3. Originally the Petitioner was approved for Emergency Services Only (ESO) beginning April 1, 2014, which was incorrect. Exhibit 2.
4. On May 1, 2014, the Department issued a second Health Care Coverage Determination Notice, which found the Petitioner ineligible for full medical coverage effective June 1, 2014, finding he was not under 21, pregnant, or a caretaker of a minor child in the home and not over age 65, blind or disabled. The income used to determine MA was noted as \$ [REDACTED] Exhibit 3.
5. On December 23, 2015, the Department issued a Benefit Notice approving the Petitioner for full medical coverage for the months of April and May 2014. Exhibit 4.
6. On a date unknown, the Department issued a notice to the Petitioner indicating he might have been denied full MA coverage based on immigration status between January 2014 and May 2015.
7. On September 8, 2015, Petitioner requested a 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 disputing the granting of ESO coverage by the Department rather than full MA based upon his status as a U.S. citizen. Ultimately, the Department corrected its initial error when it issued the most recent Benefit Notice on December 23, 2015, correcting its initial error and giving the Petitioner full MA for the months in question, April 2014 and May 2014.

In the interim, a Health Care Coverage Determination Notice was issued May 1, 2014, effective June 1, 2014, finding the Petitioner ineligible for full coverage MA, which found the Petitioner ineligible for full medical coverage finding he was not under age 21, pregnant, or a caretaker of a minor child in the home and not over age 65, blind or disabled. The income used to determine MA was noted as \$ [REDACTED] While this

notice may have been incorrect, the Petitioner never requested a hearing regarding its finding; and thus, it stands.

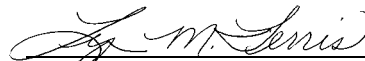
To be eligible for full MA coverage a person must be a U.S. citizen or an alien admitted to the U.S. under a specific immigration status. BEM 225 (January 2014), p. 2. Petitioner testified that he is a U.S. citizen and thus the Department corrected its initial error when it activated full coverage to correct the original finding that Petitioner was eligible for ESO services only. The full Medical Assistance was activated for the two months in question, April and May 2014, as ultimately the Petitioner's case was closed on June 1, 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.**

LMF/jaf



Lynn M. Ferris
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

[REDACTED]

Petitioner

[REDACTED]