



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR



Date Mailed: July 6, 2016
MAHS Docket No.: 15-026084; 15-026085
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

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 on June 29, 2016, from Lansing, Michigan. The Petitioner was represented by herself. The Department was represented by [REDACTED]. [REDACTED] served as translator.

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 November 25, 2013, Petitioners applied for MA or had a redetermination of current MA benefits.
2. On the date of MA application or redetermination, Petitioners were not United States citizens.

3. Beginning November 2013, Petitioner's **full-coverage MA case and/or application** was **converted/approved** for Emergency Services Only (ESO) MA coverage or denied MA coverage.
4. The Department issued a notice to the Petitioners indicating they might have been denied full MA coverage based on immigration status between January 2014 and May 2015.
5. On September 17, 2015, Petitioners requested a hearing.
6. On March 17, 2016, the Department issued a Benefit Notice to [REDACTED] that states the following: "Upon review of your Medicaid case it has been determined that you are eligible for full coverage effective 1/2014-Ongoing. Case has been updated."
7. On March 17, 2016, the Department issued a Benefit Notice to [REDACTED] that states the following: "Upon review of your Medicaid case it has been determined that you are eligible for full coverage effective 1/2014-Ongoing. Case has been updated."
8. Petitioners have been a permanent residents in the United States since 2003.

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, Petitioners requested a hearing disputing the **conversion to ESO MA and/or activation/denial** of full MA coverage.

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 (October 2014), p. 32. Petitioners testified that they are from Ukraine. At time of application or redetermination, Petitioners' statuses were permanent resident for more than 5 years. Petitioner has been a permanent resident in the United States since 2003. On March 17, 2016, the Department issued a Benefit Notice to [REDACTED] that

states the following: "Upon review of your Medicaid case it has been determined that you are eligible for full coverage effective 1/2014-Ongoing. Case has been updated." This was satisfactory to the Petitioner and she agreed that no further action was required.

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 Petitioners' immigration statuses or citizenship when determining MA eligibility.

DECISION AND ORDER

Accordingly, the Department's determinations about MA eligibility based on immigration status for [REDACTED] are **AFFIRMED.**

AM/las



Aaron McClintic
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]

[REDACTED]

Petitioner

[REDACTED]