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 10, 2016 MAHS Docket No.: 15-022097 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 4-way telephone conference on March 3, 2016, from Detroit, Michigan. Petitioner appeared and represented himself at the hearing. The Department was represented by Hillary Howard, Assistance Payment Worker.

<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 2014 Petitioner applied for MA (Exhibit A, pp. 5-28).
- 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 effective January 1, 2014.
- 4. In 2014, Petitioner submitted another application to the Department indicating that he had eligible immigration status.
- 5. On an unknown date, the Department issued a notice to the Petitioner indicating he may have been denied full MA coverage based on immigration status between January 2014 and May 2015.
- 6. On **Exhibit A**, p. 2).

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 Department granting him ESO MA rather than full-coverage MA. 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 (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.

In this case, the Department testified that after Petitioner filed his hearing request, it reassessed his MA eligibility. Based on the statements in the 2014 application he submitted to the Department that he had eligible immigration status, the Department activated full-coverage MA for Petitioner for January 1, 2014 through October 31, 2015. The Department sent Petitioner a Benefit Notice notifying him that it had changed his coverage for January 1, 2014 through October 31, 2015 to full-coverage MA (Exhibit A, pp. 32-33). The Department also provided a Medicaid eligibility summary showing that

Petitioner received full-coverage MA between January 1, 2014 and October 31, 2015 (Exhibit A, pp. 29-31).

At the hearing, there was some confusion on the record as to Petitioner's MA status after October 2015, with the Petitioner arguing that he had become a U.S. citizen on December 13, 2015 and had provided verification of his naturalization to the Department. The Department provided a February 1, 2016 Health Care Coverage Determination Notice showing that Petitioner was provided with full coverage MA from April 1, 2015 to May 31, 2015 and full coverage MA under the Transitional Medicaid (TMA) program from June 1, 2015 to May 31, 2016 (Exhibit C). An updated Medicaid Eligibility summary for Petitioner showing the type of MA coverage he received each month and his citizenship/alien status showed that Petitioner received full coverage MA based on his status as a U.S. citizen beginning November 1, 2015 (Exhibit D). Therefore, the Department established that Petitioner received full-coverage MA for November 2015 ongoing based on his status as a U.S. citizen.

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 properly determined 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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ACE/tlf

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

DHHS

Katharine Sedgman (SSPC) 2651 Coolidge Rd, Suite 100 East Lansing, MI 48823

Petitioner

