



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

[REDACTED]  
[REDACTED]  
[REDACTED], MI [REDACTED]

Date Mailed: October 28, 2024  
MOAHR Docket No.: 24-010930  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: Christian Gardocki**

### **HEARING DECISION**

Following Petitioner's request for a hearing, this matter is before the undersigned administrative law judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 42 CFR 438.400 to 438.424; 45 CFR 99.1 to 99.33; and 45 CFR 205.10; and Mich Admin Code, R 792.11002. After due notice, a hearing was held via Microsoft Teams (audio only) on October 23, 2024. Petitioner participated and was unrepresented.<sup>1</sup> [REDACTED] [REDACTED] Petitioner's daughter, testified on behalf of Petitioner. The Michigan Department of Health and Human Services (MDHHS) was represented by Danielle Moton, specialist. Amany Abdelhalim of Bloomberg & Associates participated as an English-Arabic translator.

### **ISSUES**

The first issue is whether MDHHS properly denied Petitioner's Medical Assistance (MA) eligibility.

The second issue is whether MDHHS properly denied Petitioner's Food Assistance Program (FAP) 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 21, 2024, Petitioner entered the United States from Iraq; Petitioner's U.S. entry was based on being a parent of a United States citizen.

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<sup>1</sup> During the hearing, Petitioner's participation inexplicably ended. Upon the realization of Petitioner's end of participation, five minutes were waited before the hearing was concluded without Petitioner.

2. On [REDACTED] 2024, Petitioner applied for FAP and MA benefits and reported being over 65 years of age, not being a caretaker to minor children, and non-pregnancy.
3. On September 4, 2024, MDHHS mailed Petitioner a Health Care Coverage Supplemental Questionnaire (HCCSQ) with a due date of September 16, 2024.
4. On September 6, 2024, MDHHS received an unsigned HCCSQ from Petitioner.
5. On September 16, 2024, MDHHS denied Petitioner application for MA benefits due to Petitioner failing to return a signed HCCSQ.
6. On September 16, 2024, MDHHS denied Petitioner's FAP benefit application due to Petitioner failing to meet citizenship/resident alien requirements.
7. On September 19, 2024, Petitioner requested a hearing to dispute the denials of MA and FAP benefits.

### **CONCLUSIONS OF LAW**

The 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. MDHHS administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k. MA policies are contained in the Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), and Reference Tables Manual (RFT).

Petitioner requested a hearing in part, to dispute a denial of MA benefits. Exhibit A, pp. 3-5. Petitioner applied for MA benefits on [REDACTED] 2024. Exhibit A, pp. 9-16. Internal MDHHS documents stated that Petitioner was denied MA benefits due to failing to return a HCCSQ.<sup>2</sup> Exhibit A, p. 16. A requirement to return a HCCSQ depends on the MA categories for which Petitioner is eligible to receive.

Medicaid is also known as MA. BEM 105 (October 2023) p. 1. The MA program includes several sub-programs or categories. *Id.* To receive MA under a Supplemental Security Income (SSI)-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. *Id.* Medicaid eligibility for children under 19, parents or caretakers of children, pregnant or recently pregnant women, former foster children, MOMS, MICHild and Healthy Michigan Plan is based on Modified Adjusted Gross Income (MAGI) methodology.<sup>3</sup> *Id.*

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<sup>2</sup> A Health Care Coverage Determination Notice dated September 16, 2024, presumably informed Petitioner of the same; per Petitioner's preference, the notice was written in Arabic. Exhibit A, pp. 25-28.

<sup>3</sup> Eligibility factors for all MA categories are found in the Bridges Eligibility Manual from BEM 105 through BEM 174.

The HCCSQ is used to gather additional information when an applicant is not found eligible for any MAGI-related eligibility group or indicates a disability on the MA benefit application. BEM 105 (January 2024) p. 4. Petitioner's application for MA indicated the following circumstances: being over 65 years of age, non-pregnancy, and status as a non-caretaker to a minor child. Under the circumstances, Petitioner is ineligible for all MAGI-related categories. Thus, a HCCSQ was required to be returned.

For all programs, MDHHS is to inform the client what verification is required, how to obtain it, and the due date. BAM 130 (October 2023) p. 2. For MA, MDHHS is to allow the client 10 calendar days to provide the verification that is requested. *Id.*, p. 7. MDHHS may send a negative action notice when:

- The client indicates refusal to provide a verification, or
- The time period given has elapsed. *Id.*

MDHHS mailed Petitioner a HCCSQ on September 4, 2024, with a due date of September 16, 2024. Exhibit A, pp. 29-32. Petitioner timely returned to MDHHS the HCCSQ on September 6, 2024 but failed to sign it. *Id.* By failing to sign and date the HCCSQ, Petitioner failed to certify that all provided answers were accurate, subject to penalties of perjury. MDHHS properly deemed Petitioner's signature to be essential to accepting the HCCSQ.

Given the evidence, MDHHS properly rejected Petitioner's timely returned and unsigned HCCSQ. Because Petitioner did not submit a signed HCCSQ by the due date of September 16, 2024, MDHHS properly rejected Petitioner's MA application for benefits dated September 4, 2024.<sup>4</sup>

The FAP (formerly known as the Food Stamp program) is established by the Food and Nutrition Act of 2008, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 273. MDHHS administers the FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001-.3011. FAP policies are contained in the BAM, BEM, and RFT.

Petitioner also requested a hearing to dispute a [REDACTED] of FAP benefits. Exhibit A, pp. 3-5. Petitioner applied for FAP benefits on [REDACTED] 4, 2024. Exhibit A, pp. 9-16. Internal MDHHS documents stated that Petitioner was denied FAP benefits due to failing to meet citizenship/residential alien status.<sup>5</sup> Exhibit A, p. 17.

For FAP benefits, a person must be a U.S. citizen or have an acceptable alien status. BEM 225 (January 2024) p. 1. Any of the following persons are considered to have an acceptable alien status:

- United States citizens (includes those born in Puerto Rico)

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<sup>4</sup> MDHHS testified that even if Petitioner had timely returned a HCCSQ and was eligible to receive MA benefits, Petitioner's coverage would be limited to emergency services only due to his citizenship alien status.

<sup>5</sup> A Health Care Coverage Determination Notice dated September 16, 2024, presumably informed Petitioner of the same; per Petitioner's preference, the notice was written in Arabic. Exhibit A, pp. 19-24.

- born in Canada and at least 50% American Indian
  - member of American Indian tribe
  - qualified military alien, spouse, or child of qualified military alien,
  - refugee under Section 207
  - asylee under Section 208
  - Cuban/Haitian entrant
  - Amerasian
  - victim of trafficking
  - permanent resident alien with class code of RE, AM, AS, SI or SQ
  - permanent resident alien and has I-151
  - deportation withheld (under certain conditions)
  - granted conditional entry under 203(a)(7)
  - paroled under 212(d)(5) for at least one year (under certain conditions)
  - battered aliens, if more than five years in the United States
  - permanent resident alien with a class code other than RE, AM or AS, if in the United States for longer than 5 years
- Id.* pp. 33-35.

Persons with a class code other than RE, AM or AS who entered the United States after August 22, 1996, may be eligible for FAP benefits for their first five (5) years in the United States if any of the following circumstance are applicable:

- U.S. entry before August 22, 1996
  - has 40 countable Social Security credits
  - age 65 or older as of August 22, 1996, and was residing in United States on August 22, 1996
  - Hmong or Laotian (with other requirements)
  - Currently blind or disabled <sup>6</sup>
  - under 18 years of age
- Id.*, pp. 33-35.

MDHHS presented a copy of Petitioner's visa Exhibit A, p. 33. Petitioner's stated country of birth was Iraq; Iraq is not among the countries that would qualify Petitioner for unrestricted Medicaid. Petitioner's entry code in the U.S. was for being a parent of an United States citizen; being a parent of a U.S. citizen does not render Petitioner to be eligible to receive FAP benefits. <sup>7</sup> Petitioner's date of U.S. entry was August 21, 2024; because Petitioner's entry date is within the last five years of the denial notice, Petitioner's time in the United States would not qualify him to receive FAP benefits. Given the evidence, MDHHS properly denied FAP benefits to Petitioner for failing to meet citizenship/resident alien requirements.

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<sup>6</sup> Disability requires receiving disability benefits or being a disabled veteran or a specified relative of a disabled veteran.

<sup>7</sup> <https://www.justice.gov/sites/default/files/eoir/legacy/2008/03/26/fr20mr08.pdf>

**DECISION AND ORDER**

The administrative law judge, based upon the above findings of fact and conclusions of law, finds that MDHHS properly denied Petitioner's application for FAP and MA benefits dated [REDACTED] 2024. The actions taken by MDHHS are **AFFIRMED**.

CG/nr

  
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**Christian Gardocki**  
Administrative Law Judge

**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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules  
Reconsideration/Rehearing Request  
P.O. Box 30639  
Lansing, Michigan 48909-8139

**Via-Electronic Mail :**

**DHHS**

Tara Roland 82-17  
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8655 Greenfield  
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**MDHHS-Wayne-17-hearings@michigan.gov**

**Interested Parties**

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M. Schaefer  
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MOAHR

**Via-First Class Mail :**

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED], MI [REDACTED]