



Minnesota Department of **Human Services**

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**DECISION OF  
STATE AGENCY  
ON APPEAL**

In the Appeal of: [REDACTED]  
For: MinnesotaCare  
Agency: Minnesota Department of Human Services  
Docket: 155505

On November 3, 2014 Human Services Judge Kulani R. Moti held an evidentiary hearing under Minn. Stat. § 256.045, subd. 3.

The following people appeared at the hearing:

[REDACTED], Appellant  
[REDACTED], Appellant's Representative  
Vietnamese Interpreter, ID # 1847, Language Line

The Human Services Judge, based on the evidence in the record and considering the arguments of the parties, recommends the following findings of fact, conclusions of law, and order.

## STATEMENT OF ISSUES

Whether Appellant was unable to secure MinnesotaCare coverage because of the Agency's failure to make a timely determination.

## FINDINGS OF FACT

1. On July 24, 2014, the Minnesota Department of Human Services (herein Agency) received information requesting [REDACTED] (herein Appellant) be added to coverage with his wife and daughter. *Exhibit 1*. The Agency reviewed this information and had not acted on the information or started Appellant's MinnesotaCare coverage. *Exhibit 1*. The Appellant filed a request challenging the Agency's inaction, which MNsure received on August 19, 2014. *Exhibit 1*. Appeals hearing were scheduled for September 22, 2014 and October 8, 2014 and were both continued. On November 3, 2014, Appeals Examiner Kulani R. Moti held an evidentiary hearing via telephone conference. The judge accepted into evidence two exhibits<sup>1</sup>. The record was closed on November 3, 2014.

2. On March 7, 2014, [REDACTED] and her daughter, [REDACTED], applied for MinnesotaCare with the help of navigator with Portico Healthnet. *Exhibit A; Exhibit 1*. In Ms. [REDACTED] application she reported her husband, the appellant, was not in the United States and would not be applying for coverage at that time. *Exhibit A*.

3. The Agency determined Ms. [REDACTED] was eligible for MinnesotaCare coverage and her daughter was eligible for Medical Assistance. *Exhibit 1*.

4. On May 30, 2014, Appellant contacted the Agency with the help of his navigator, [REDACTED] at Portico Healthnet, to request that he be added to his wife's case. Appellant had just arrived from Vietnam and was living with his wife and daughter. *Exhibit A; Testimony of [REDACTED]*

5. On July 7, 2014, Ms. [REDACTED] submitted copies of Appellant's lawful permanent residence (LPR) or green card to [REDACTED] County. *Exhibit A*. On July 24, 2014, the Agency received copy of Appellant's LPR card. *Exhibit 1*. The Agency determined based on the submitted LPR card and no income Appellant should have an eligibility determination for MinnesotaCare. *Exhibit 1*.

6. At the time of the hearing, the Agency had not processed or updated Appellant's case and the issue had not been resolved and no timeframe has been given as to when it can be resolved. The Agency thinks that barring any unforeseen eligibility issues, and once the Agency can make the necessary corrections, Appellant would be eligible for MinnesotaCare. *Exhibit 1*.

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<sup>1</sup> Exhibit 1 – Agency Appeal Summary; Exhibit A – Appeal Request.

7. Appellant is frustrated that he still does not have an eligibility determination or health insurance coverage four months after he submitted the necessary information to the Agency. Appellant wants health insurance coverage. *Testimony of Appellant.*

### CONCLUSIONS OF LAW

1. For Medical Assistance and MinnesotaCare appeals, a person may request a state fair hearing by filing an appeal either: 1) within 30 days of receiving written notice of the action; or 2) within 90 days of such notice if the Appellant can show good cause why the request for an appeal was not submitted within the 30 day time limit. *Minn. Stat. § 256.045, subd. 3(h).*

2. The Commissioner of the Minnesota Department of Human Services has the legal authority to review and decide issues of Medical Assistance and MinnesotaCare for applications for assistance that are denied, not acted upon with reasonable promptness, or whose assistance is suspended, reduced, terminated, or claimed to have been incorrectly paid. *Minn. Stat. § 256.045, subd. 3.*

3. This appeal is timely because the Agency has not submitted evidence to show when Appellant's household was provided with proper notice of the Agency's eligibility determination. As such, the time period for Appellant to submit a timely appeal request did not begin to toll.

4. Applicants may submit applications online, in person, by mail, or by phone in accordance with the Affordable Care Act, and by any other means by which medical assistance applications may be submitted. Applicants may submit applications through MNsure or through the MinnesotaCare program. *Minn. Stat. § 256L.05, subd. 1.* The commissioner of human services shall determine an applicant's eligibility for MinnesotaCare no more than 30 days from the date that the application is received by the Department of Human Services. *Minn. Stat. § 256L.05, subd. 4.*

5. By statute, MinnesotaCare eligibility determinations must be made within 30 days of application. In this case, thirty days after the date of application would have been August 24, 2014. The agency missed this deadline. And as of November 2014, the Agency still had not acted on the application, more than three months after application. I conclude that the main cause for the delay was the Agency inability to update Appellant's application to determine Appellant's eligibility within any reasonable time. The Agency staff has made a preliminary determination that Appellant is likely eligible for MinnesotaCare but because of some unidentified issue the Agency has not made an official determination. I conclude that under these circumstances, that not acting on the application and supporting documents constitutes a failure to make a timely determination. Furthermore, I conclude that the appropriate remedy in this case is

requiring the Agency to update Appellant's application and make an eligibility determination by January 9, 2015.

RECOMMENDED ORDER

THE HUMAN SERVICE JUDGE RECOMMENDS THAT:

- The Commissioner of the Minnesota Department of Human Services ORDER the Agency to update Appellant's application and make an eligibility determination by January 9, 2015.

\_\_\_\_\_  
Kulani R. Moti  
Human Services Judge

\_\_\_\_\_  
Date

ORDER

FOR THE COMMISSIONER OF HUMAN SERVICES as to any effect the decision has on Appellant's eligibility for Medical Assistance and/or MinnesotaCare benefits.

\_\_\_\_\_  
Date

cc: [REDACTED], Appellant  
[REDACTED], Portico Healthnet  
Kim Carolan, Minnesota Department of Human Services - 0989

## **FURTHER APPEAL RIGHTS**

**This decision is final, unless you take further action.**

If you disagree with this decision, you may:

- Request the decision be reconsidered; or
- Appeal to District Court.

### **Right to Reconsideration**

You may make a written request to the Appeals Office to reconsider this decision. The request must state the reasons why you believe your appeal should be reconsidered. The request may include legal arguments and may include proposed additional evidence supporting the request; however, if you submit additional evidence, you must explain why it was not provided at the time of the hearing. The request must be *in writing*, be made *within 30 days of the date of this decision*, and a *copy of the request must be sent to the other parties*. Send your written request, with your docket number listed, to:

Appeals Office  
Minnesota Department of Human Services  
P.O. Box 64941  
St. Paul, MN 55164-0941  
Fax: (651) 431-7523

### **Appeal to District Court**

You may start an appeal in the district court. This is a separate legal proceeding, and you must start this *within 30 days of the date of this decision* by serving a notice of appeal upon the other parties and the Commissioner. The law that describes this process is Minn. Stat. § 256.045, subd. 7.