		CIVI-010		
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State  Marina Pantchenko, SB  Bay Area Legal Aid		FOR COURT USE ONLY		
1735 Telegraph Ave, Oakland, CA 94612 TELEPHONE NO.: (510) 250-52	83 FAXNO: (510)663-4740 Kathem and Llal Tluang	ENDORSED		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		ALAMEDA COUNTY		
street address: 1225 Fallon Street, MAILING ADDRESS:		APR 0 1 2015		
city and zip code: Oakland, CA 94612 BRANCH NAME: Rene C. Davidson Courthouse		CLERK OF THE SUPERIOR COURT		
CASE NAME: Kathem et. al. v. Cal Cal. Dept. He	. Dept. Soc. Serv., alth Care Serv. et. al.	Louis Staley, Jr.		
CIVIL CASE COVER SHEET  X Unlimited  Limited	Complex Case Designation	CASE NUMBER:		
(Amount (Amount	Counter Joinder	RG15764567		
demanded demanded is exceeds \$25,000) \$25,000 or less)	Filed with first appearance by defendant (Cal. Rules of Court, rule 3.402)	JUDGE: DEPT: Writs Department		
Items 1-	6 below must be completed (see instructions or	n page 2).		
1. Check one box below for the case type Auto Tort Auto (22) Uninsured motorist (46)  Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort Asbestos (04) Product liability (24) Medical malpractice (45) Other PI/PD/WD (23)  Non-PI/PD/WD (Other) Tort Business tort/unfair business practice (10) Civil rights (08) Defamation (13) Fraud (16) Intellectual property (19) Professional negligence (25) Other non-PI/PD/WD tort (35)  Employment Wrongful termination (36) Other employment (15)	that best describes this case:  Contract  Breach of contract/warranty (06) Rule 3.740 collections (09) Other collections (09) Insurance coverage (18) Other contract (37)  Real Property Eminent domain/Inverse condemnation (14) Wrongful eviction (33) Other real property (26) Unlawful Detainer Commercial (31) Residential (32) Drugs (38)	Provisionally Complex Civil Litigation (Cal. Rules of Court, rules 3.400-3.403)  Antitrust/Trade regulation (03)  Construction defect (10)  Mass tort (40)  Securities litigation (28)  Environmental/Toxic tort (30) Insurance coverage claims arising from the above listed provisionally complex case types (41)  Enforcement of Judgment  Enforcement of Judgment  Enforcement of judgment (20)  Miscellaneous Civil Complaint  RICO (27)  Other complaint (not specified above) (42)  Miscellaneous Civil Petition  Partnership and corporate governance (21)  Other petition (not specified above) (43)		
This case is is is is not complex under rule 3.400 of the California Rules of Court. If the case is complex, mark the factors requiring exceptional judicial management:  a. Large number of separately represented parties  b. Extensive motion practice raising difficult or novel issues that will be time-consuming to resolve  c. Substantial amount of documentary evidence  Remedies sought (check all that apply):  Remedies sought (check all that apply):  Number of causes of action (specify):  This case is not a class action suit.  If there are any known related cases, file and serve a notice of related case. (You may use form CM-015.)				
Date: April 1, 2015				
Marina Pantchenko	\llaine			
(TYPE OR PRINT NAME)		URE OF PARTY OR ATTORNEY FOR PARTY)		
<ul> <li>NOTICE</li> <li>Plaintiff must file this cover sheet with the first paper filed in the action or proceeding (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.</li> <li>File this cover sheet in addition to any cover sheet required by local court rule.</li> <li>If this case is complex under rule 3.400 et seq. of the California Rules of Court, you must serve a copy of this cover sheet on all other parties to the action or proceeding.</li> </ul>				
<ul> <li>Unless this is a collections case under rule 3.740 or a complex case, this cover sheet will be used for statistical purposes only.</li> </ul>				

#### INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET

To Plaintiffs and Others Filing First Papers. If you are filing a first paper (for example, a complaint) in a civil case, you must complete and file, along with your first paper, the *Civil Case Cover Sheet* contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check one box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the primary cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

To Parties in Rule 3.740 Collections Cases. A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages, (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

To Parties in Complex Cases. In complex cases only, parties must also use the Civil Case Cover Sheet to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a jointer that the case is not complex as if the plaintiff has made as designation and designation that the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

#### CASE TYPES AND EXAMPLES

#### **Auto Tort**

Auto (22)-Personal Injury/Property Damage/Wrongful Death Uninsured Motorist (46) (if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto)

#### Other PI/PD/WD (Personal Injury/ Property Damage/Wrongful Death)

Asbestos (04) Asbestos Property Damage Asbestos Personal Injuryi Wrongful Death Product Liability (not asbestos or toxic/environmental) (24) Medical Malpractice (45) Medical Malpractice-Physicians & Surgeons Other Professional Health Care

Malpractice Other PI/PD/WD (23) Premises Liability (e.g., slip and fall)

Intentional Bodily Injury/PD/WD (e.g., assault, vandalism) Intentional Infliction of

Emotional Distress Negligent Infliction of **Emotional Distress** Other PI/PD/WD

#### Non-PI/PD/WD (Other) Tort

Business Tort/Unfair Business Practice (07) Civil Rights (e.g., discrimination,

false arrest) (not civil harassment) (08) Defamation (e.g., slander, libel)

Fraud (16)

Intellectual Property (19) Professional Negligence (25) Legal Malpractice

Other Professional Malpractice (not medical or legal) Other Non-PI/PD/WD Tort (35)

#### **Employment**

Wrongful Termination (36) Other Employment (15)

#### Contract

Breach of Contract/Warranty (06) Breach of Rental/Lease Contract (not unlawful detainer or wrongful eviction) Contract/Warranty Breach-Seller Plaintiff (not fraud or negligence)
Negligent Breach of Contract/ Warranty Other Breach of Contract/Warranty

Collections (e.g., money owed, open book accounts) (09) Collection Case-Seller Plaintiff Other Promissory Note/Collections Case

Insurance Coverage (not provisionally

complex) (18)
Auto Subrogation
Other Coverage Other Contract (37) Contractual Fraud Other Contract Dispute

#### Real Property

Eminent Domain/Inverse Condemnation (14) Wrongful Eviction (33)

Other Real Property (e.g., quiet title) (26)
Writ of Possession of Real Property Mortgage Foreclosure Quiet Title

Other Real Property (not eminent domain, landlord/tenant, or foreclosure)

#### Unlawful Detainer

Commercial (31) Residential (32)

Drugs (38) (if the case involves illegal drugs, check this item; otherwise, report as Commercial or Residential)

#### Judicial Review

Asset Forfeiture (05)
Petition Re: Arbitration Award (11)

Writ of Mandate (02) Writ-Administrative Mandamus

Writ-Mandamus on Limited Court Case Matter

Writ-Other Limited Court Case Review

Other Judicial Review (39) Review of Health Officer Order

Notice of Appeal-Labor Commissioner Appeals Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400-3.403)

Antitrust/Trade Regulation (03)
Construction Defect (10) Claims Involving Mass Tort (40) Securities Litigation (28) Environmental/Toxic Tort (30) Insurance Coverage Claims

(arising from provisionally complex case type listed above) (41)

#### **Enforcement of Judgment**

Enforcement of Judgment (20)
Abstract of Judgment (Out of County) Confession of Judgment (nondomestic relations)
Sister State Judgment Administrative Agency Award (not unpaid taxes) Petition/Certification of Entry of Judgment on Unpaid Taxes

Other Enforcement of Judgment

#### Case Miscellaneous Civil Complaint

RICO (27) Other Complaint (not specified above) (42)
Declaratory Relief Only

Injunctive Relief Only (non-harassment)

Mechanics Lien Other Commercial Complaint

Case (non-tort/non-complex)
Other Civil Complaint (non-tort/non-complex)

#### Miscellaneous Civil Petition

Partnership and Corporate Governance (21) Other Petition (not specified above) (43) Civil Harassment

Workplace Violence Elder/Dependent Adult Abuse

**Election Contest** Petition for Name Change Petition for Relief from Late

Other Civil Petition

1 2 3 4 5 6	BAY AREA LEGAL AID MARINA PANTCHENKO, SBN 293014 mpantchenko@baylegal.org STEPHEN RONFELDT, SBN 41044 (Of Counsel) sronfeldt@baylegal.org AMY CHEN, SBN 245771 achen@baylegal.org 1735 Telegraph Avenue Oakland, California 94612 Telephone: (510) 250 5283 Facsimile: (510) 663 4740	HANSON BRIDGETT LLP KATHRYN E. DOI, SBN 121979 kdoi@hansonbridgett.com 500 Capitol Mall, Suite 1500 Sacramento, California 95814 Telephone: (916) 442-3333 Facsimile: (916) 442-2348
7 8 9 10 11	BAY AREA LEGAL AID MICHAEL KEYS, SBN 133815 mkeys@baylegal.org 1035 Market Street, 6 <sup>th</sup> Floor San Francisco, California 94103 Telephone: (415) 982-1300 Facsimile: (415) 982-4243	NATIONAL HEALTH LAW PROGRAM KIMBERLY LEWIS, SBN 144879 lewis@healthlaw.org JANE PERKINS, SBN 104784 perkins@healthlaw.org 3701 Wilshire Blvd, Suite 750 Los Angeles, California 90010 Telephone: (310) 736-1653 Facsimile: (310) 388-07745 ED FILED ALAMEDA COUNTY
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PETITION FOR WRIT OF MANDATE

#### INTRODUCTION

- 1. Petitioners Nooraldeen Kathem and Llal Tluang (collectively, the "Unaccompanied Refugee Minors") submit this Petition for Writ of Mandate against Respondents the State Department of Health Care Services (DHCS) and its Director, Jennifer Kent, and Respondents State Department of Social Services (CDSS) and its Director, Will Lightbourne, (collectively, "Respondents") seeking orders of the Court (1) compelling the Respondents to comply with their ministerial duty to provide Unaccompanied Refugee Minor ("URM") youth with full-scope Medi-Cal benefits as are provided to other foster care and former foster care youth in the state, as required by law<sup>1</sup>; and (2) enjoining Respondents from proceeding with a rehearing of Petitioner Kathem's final hearing decision and requiring that decision to be fully and promptly enforced.
- 2. The URM program, administered through the Office of Refugee Resettlement, resettles refugee children from abroad who do not have a parent or relative who can care for them. The URM program ensures that these refugee youth receive federal foster care benefits, as well as the full range of assistance, care, and services which are available to all foster children in the State. That includes Medi-Cal coverage. There are approximately 300 URM youth residing in the State of California.
- 3. Respondent CDSS is responsible for administering California's URM program and contracts with private agencies to provide foster care, independent living, and other services to refugee youth. Consistent with federal regulations, CDSS has a legal duty to ensure that each URM child receives the full range of child welfare benefits

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Cal. Dept. Social Services, California's State Plan for Refugee Assistance and Services Federal Fiscal Year 2013/14 (2014)

<sup>&</sup>lt;a href="http://www.cdss.ca.gov/refugeeprogram/res/pdf/StatePlans/2014\_CA">http://www.cdss.ca.gov/refugeeprogram/res/pdf/StatePlans/2014\_CA</a> State Plan 2013 2014.pdf> (hereinafter CA Refugee State Plan).

Off. Refugee Resettlement, U.S. Dept. Health & Human Services, Unaccompanied Refugee Minors (Aug. 16, 2012).

<sup>&</sup>lt;a href="http://www.acf.hhs.gov/programs/orr/resource/unaccompanied-refugee-minors">http://www.acf.hhs.gov/programs/orr/resource/unaccompanied-refugee-minors</a> (as of Mar. 10, 2015) (hereinafter Unaccompanied Refugee Minors).

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and services as are provided to children in foster care in the State. These services, among others, include medical assistance through California's Medi-Cal program.<sup>3</sup>

- 4. Respondent DHCS is the single state agency responsible for administering California's Medi-Cal Program. (Welf. & Instit. Code § 14100.1). In coordination with CDSS, Respondent DHCS is responsible for administering Medi-Cal benefits to the URM youth and other refugees.4
- 5. In administering Medi-Cal benefits to URM youth, DHCS has adopted a policy of failing to place URM youth in the Medi-Cal program to which they are entitled by law. Under the law, URM youth are entitled to Medi-Cal that affords them fee for service coverage in almost all counties, through age 18, and through age 26, if they are in foster care on their 18th birthday, regardless of their income.
- 6. Instead of requiring that URM youth be placed into the correct Medi-Cal program, DHCS has instructed counties to place all URMs into Medi-Cal programs that do not confer the same benefits as those into which foster care children, or former foster care children are placed. The Medi-Cal programs in which Respondents are placing these children and youth have an income test, and also require the youth to enroll in a Medi-Cal managed care plan to obtain their benefits, thus limiting the health care providers the youth may see to obtain medically necessary services. In addition, because Medi-Cal managed care plans are geographically limited in who they serve, URMs who relocate to another county can experience delays in obtaining needed services during relocation while they are required to change health and mental health plans. When URM youth are subject to income eligibility requirements, they often experience terminations in Medi-Cal coverage for failure to submit required income verification paperwork.

CA Refugee State Plan, supra.

Ibid.

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- 7. DHCS' policy directing counties to place URM youth into the wrong Medi-Cal programs has resulted in URM youth being wrongfully delayed in obtaining and even losing access to critical mental health services, primary and specialty care, prescription medications, and dental benefits.
- 8. As a result of not being placed in the proper Medi-Cal program, Petitioner Kathem's Medi-Cal eligibility was wrongfully terminated in April of 2014. After requesting a Medi-Cal state fair hearing but before the hearing occurred, Petitioner Kathem was still not placed in the proper Medi-Cal program.
- 9. Following the loss of Medi-Cal, Petitioner Kathem experienced severe pain in his back, hamstrings and quads, and deterioration of his dental health conditions for which he was unable to obtain medical treatment. As a low-income individual without health insurance, Petitioner Kathem could not afford the costs of treating these health problems and so was forced to forego necessary health care and endure pain.
- 10. Petitioner Kathem challenged the termination of his Medi-Cal eligibility, including the failure of Respondents to place him in the correct Medi-Cal program, in a state fair hearing. That hearing resulted in a final hearing decision, dated October 20, 2014 requiring Respondent DHCS to provide Petitioner Kathem with Medi-Cal benefits under the correct Medi-Cal program. A copy of that hearing decision is attached hereto as Exhibit "A" and incorporated by reference.
- 11. On January 22, 2015, Respondent CDSS, the state agency which oversees Medi-Cal state fair hearings, granted a request by Respondent DHCS for a rehearing of Petitioner Kathem's Medi-Cal state fair hearing decision.
- 12. Such a rehearing was improperly granted for the following reasons: Respondent DHCS lacks standing under the Welf, and Inst. Code §10960, the state law governing rehearing requests; even if, arguendo, the request was proper, it was not requested within the time required by law and thus, by law, must be deemed to have been denied; and the rehearing request was granted without providing Petitioner Kathem proper notice and an opportunity to be heard, as required by State statute.

13. Petitioner Tluang, also a participant of the URM program, was terminated from Medi-Cal on several occasions after turning 18 instead of being placed into the proper Medi-Cal program where eligibility should have continued uninterrupted until age 26. As a result, Petitioner Tluang had to reapply for Medi-Cal benefits on multiple occasions. When Petitioner Tluang requested a Medi-Cal state fair hearing, her Medi-Cal eligibility was processed for the Modified Adjusted Gross Income (MAGI) Medi-Cal program and not the Medi-Cal program in which foster youth and former foster youth should be placed, including fee-for-service coverage. As a result of the terminations of her Medi-Cal coverage, Petitioner Tluang has been unable to access critically necessary mental, dental health services and prescription medications.

#### II. PARTIES

- 14. Petitioner Nooraldeen Kathem is a 20 year old refugee and is eligible for and a participant of the Catholic Charities of Santa Clara County URM program. Petitioner Kathem seeks to maintain the coverage in the Medi-Cal program that other foster care and former foster youth are entitled to and receive. These benefits have been granted by the final state hearing decision number 2014287069. See Exhibit A.
- 15. Petitioner Llal Tluang is a 21 year old refugee and is eligible for and a participant of the Catholic Charities of Santa Clara County's URM program. Petitioner Tluang seeks, and has been denied, Medi-Cal benefits to which she is legally entitled.
- 16. Respondent Will Lightbourne is the Director of Respondent CDSS. CDSS is the state agency responsible for administering the URM program and the State Hearings Division, which administers all of the Medi-Cal state fair hearings in conformity with the requirements of law. Respondent Lightbourne is sued in his official capacity.
- 17. Respondent Jennifer Kent is the Director of Respondent DHCS, the State agency responsible for administering the State Medi-Cal program. Respondent Kent is sued in her official capacity.

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18. Does 1 through 20 are individuals and entities whose true names are unknown to Petitioners at this time. Petitioners will seek leave of this court to amend their true names and capacities when they have been ascertained.

#### III. STATUTORY FRAMEWORK

#### A. The Unaccompanied Refugee Minor Program

- 19. The federal URM program is administered through the Office of Refugee Resettlement, a subsidiary agency of the U.S. Department of Health & Human Services, Office of Administration for Children & Families. The URM program helps unaccompanied minor refugees develop self-sufficiency by providing them with refugee foster care services and benefits.<sup>5</sup>
- 20. The URM program was originally developed in the 1980's to address the needs of Southeast Asian children without parents or guardians.<sup>6</sup> It establishes legal responsibility to ensure that URMs receive all of the care and services available to all foster children in the State. This includes financial support, housing, food, medical care, case management, educational support and other services.<sup>7</sup>
- 21. In California, Respondent CDSS has been designated by the Governor of California to be the agency responsible for developing the State Plan for Refugee Assistance and Services consistent with 45 C.F.R. Section 400.5.<sup>8</sup> The program provides child welfare, foster care, independent living and other supportive services to refugee youth that include refugees, asylees, Cuban/Haitian entrants, and victims of severe form of human trafficking.<sup>9</sup>

Off. Refugee Resettlement, U.S. Dept. Health & Human Services <a href="http://www.acf.hhs.gov/office-of-refugee-resettlement">http://www.acf.hhs.gov/office-of-refugee-resettlement</a> (as of Mar. 10, 2015).

<sup>&</sup>lt;sup>6</sup> Ibid.

<sup>&</sup>lt;sup>7</sup> Unaccompanied Refugee Minors, *supra*.

<sup>8</sup> See CA Refugee State Plan, supra.

³ Ibid.

	22.	As a condition of receiving federal funding, Respondent CDSS must	
develo	p an a	nnual State Plan for Refugee Assistance and Services ("CA State Refugee	
Plan").	The (	CA State Refugee Plan governs California's Refugee Resettlement Program	
("RRP") and how it plans to provide and assist unaccompanied refugee minors.			
Respondent CDSS has a ministerial duty to ensure that the requirements of the State			
Plan a	re fully	implemented for all URMs.	

- 23. Respondent CDSS operates the URM program and contracts with licensed foster family agencies to provide services to URMs.<sup>10</sup> Respondents CDSS and Lightbourne, in his official capacity, are responsible in ensuring that each URM child receives the full range of child welfare benefits and services as provided to children in mainstream foster care in the state.<sup>11</sup>
- 24. Respondents CDSS and Lightbourne, in his official capacity, are responsible for ensuring that appropriate services are being to URMs for which they are eligible.<sup>12</sup>
- 25. Respondents DHCS and Kent, in her official capacity, are charged with the operational responsibility for the medical assistance portion of the RRP.<sup>13</sup>

#### B. Medi-Cal Benefits for URM Youth

26. The Medicaid program was established by Congress in 1965 at Title XIX of the Social Security Act. The purpose of the Medicaid program is to enable states "as far as practicable under the conditions [of each] state, to furnish...(1) medical assistance on behalf of families with dependent children and of aged, blind or disabled individuals

24 10 Ibid.

11 Ibid.

*Ibid.* 

<sup>13</sup> Cal. Dept. Social Services, California State Plan for Refugee Assistance, created pursuant to 45 C.F.R. Section 400.5. The plan governs the state's supervision of the Refugee Resettlement Program (RRP). The RRP was established by the Refugee Act of 1980, 8 U.S.C. § 1521 et seq.

whose income and resources are insufficient to meet the costs of necessary medical services..." (42 U.S.C. § 1396).

- 27. Each State's Medicaid program must be administered by a single State agency which is responsible for ensuring that the program complies with all relevant laws and regulations. 42 U.S.C. § 1396a(a)(5); 42 C.F.R. § 430.10.
- 28. California has elected to participate in the federal Medicaid program. Its Medicaid program, known as "Medi-Cal", is codified at Welfare & Institutions Code ("W&IC") § 14000 *et seq*. Respondent DHCS is the agency charged with overseeing California's Medi-Cal program. (W&IC §14100.1).
- 29. The Legislature's intent in adopting the Medi-Cal program was to provide "for the health care for those aged and other persons, including family persons who lack sufficient annual incomes to meet the costs of health care, and whose other assets are so limited that their application toward the costs of such care would jeopardize the person or family's future minimum self-maintenance and security" and "to afford qualifying individuals health care and related remedial or preventative services." (W&IC § 14000). The fundamental purpose of the program is "to afford qualifying individuals health care and related remedial or preventative services, including related social services which are necessary for those receiving health care under this program." *Ibid*.
- 30. Respondents DHCS and Kent, in her official capacity, have a mandatory ministerial duty under Welfare & Institutions Code section 11000 to administer California's public social services programs, including its Medi-Cal program, fairly and equitably so as to effectuate the stated objectives of the program.
- 31. The Legislature has mandated that the Medi-Cal program be administered in such a manner "so as to secure for every person the amount of aid to which he is entitled" (W&IC § 10500) and that Medi-Cal benefits must be provided "promptly and humanely" (W&IC § 10000).

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Care-CHIP.pdf>.

14, 2000) p.2.

<sup>19</sup> Welf. & Inst. Code § 14093.09; ACWD 00-61 (Nov. 22, 2000) p. 2; ACWD 00-41 (Aug.

 d. automatic enrollment in Former Foster Care Children Medi-Cal program if the youth is in foster care at age 18, without a new application and without interruption in coverage.<sup>20</sup>

#### C. Right to a State Fair Hearing Regarding Eligibility for Benefits

- 35. Any applicant or recipient of public social services including any and all types of Medi-Cal who are "dissatisfied with any action of the county department relating to his or her application for or receipt of public social services" shall have the right seek review of that action through a state fair hearing with the California Department of Social Services. (W&IC § 10950. See also California Department of Social Services Manual of Policy & Procedures ("MPP") § 22-003.)
- 36. A state fair hearing that is requested pursuant to 22 C.C.R. section 50951 shall be governed by the procedures set forth at Welfare & Institutions Code sections 10950 10965. (22 C.C.R. § 50951(b). See also MPP § 22-001 et seq.)
- 37. State fair hearings are the forum established by law for administrative resolution of disputes relating to Medi-Cal eligibility and the provision of Medi-Cal covered services. (W&IC § 10950.)
- 38. Hearings are to be conducted in an impartial manner and the administrative law judge who presides over the state hearing must "prepare a fair, impartial, and independent proposed decision." (W&IC § 10958.) "After approval of the decision by the chief administrative law judge of the department, the chief administrative law judge shall file a copy of the proposed decision, within 75 days after the conclusion of the hearing, with the director [of DHCS in the case of Medi-Cal hearings]." *Ibid.*
- 39. Within 30 days after receiving the copy of the proposed decision, "the director may adopt the decision in its entirety; decide the matter himself or herself on the record . . . or order a further hearing to be conducted." (W&IC § 10959; MPP §22-062.1.)

Welf. & Inst. Code § 14005.28(a)(1); MEDIL I 14-05 (Jan. 17, 2014) p.2. See Cal. Dept. Social Services, 2015-2019 Child and Family Services Plan (2014) <a href="http://www.childsworld.ca.gov/res/TitleIV-B/CFSP\_2015-2019.pdf">http://www.childsworld.ca.gov/res/TitleIV-B/CFSP\_2015-2019.pdf</a>>.

Where the director takes no action on the proposed decision with in the 30 day time period, this "shall be deemed an affirmation of the proposed decision." (W&IC § 10959; MPP § 22-062.2.)

- 40. "The affected county or applicant or recipient" may request a rehearing within 30 days after receiving the hearing decision. (W&IC § 10960(a); MPP § 22-065.1.)
- 41. State law requires that the director "shall immediately serve a copy of the [rehearing] request on the other party to the hearing." (W&IC § 10960(a); MPP § 22-065.2.
- 42. The party that did not request the rehearing "may within five days of the service file with the director a written statement supporting or objecting to the request." (W&IC § 10960(a); MPP § 22-065.21.)
- 43. California's Welfare & Institutions Code § 10960(a) requires that the director "shall grant or deny" the rehearing request no later than the 35th working day after it is made." The California Department of Social Services Manual of Policy & Procedures § 22-065.3 has the more narrow requirement that the director grant or deny the request "no earlier than five nor later than 15 working days after it is received by the State Hearings Division." If the director does not act within the time specified, "the request for rehearing shall be deemed denied." (MPP § 22-065.31.)

#### IV. Statement of Facts

- A. Petitioner Kathem has been determined eligible for Medi-Cal benefits in the proper Medi-Cal program by a final hearing decision.
- 44. Petitioner Kathem is a refugee pursuant to Section 207 of the Immigration and Naturalization Act codified in 8 U.S.C. § 1157 and a participant of the URM program through Catholic Charities of Santa Clara County, a sub-contractor of CDSS.
- 45. On April 23, 2014, Petitioner Kathem received written notification that his Medi-Cal benefits would be discontinued on April 30, 2014 because he was no longer living in a foster home. In June of 2014, Petitioner Kathem was informed by a health clinic that his Medi-Cal benefits were no longer active.

- 46. On July 23, 2014, Petitioner Kathem requested a state fair hearing challenging Respondent DHCS's termination of his Medi-Cal coverage.
- 47. Subsequent to Petitioner Kathem's hearing request, Respondent DHCS issued written instructions to the county that, due to his URM status, Petitioner Kathem should be placed into the Medically Indigent (MI) Medi-Cal Program.
- 48. The MI Medi-Cal program provides full scope Medi-Cal benefits to children until the age 21 and mandates yearly income verifications and redeterminations and requires mandatory enrollment in a Medi-Cal a managed care plan. The Former Foster Care Medi-Cal Program provides former foster youth with fee-for-service Medi-Cal coverage, without any income test, and continuous Medi-Cal coverage regardless of income through age 26.
- 49. A state fair hearing was held on September 10, 2014, before Administrative Law Judge ("ALJ") Julise M. Johanson. ALJ Johanson issued a proposed decision finding Petitioner Kathem to be eligible for Medi-Cal benefits as a former foster care youth, i.e. Former Foster Care Medi-Cal program. See Exhibit A.
- 50. The Director of Respondent DHCS adopted the ALJ's proposed decision on October 20, 2014 (the "October 20, 2014 Decision"). See Exhibit A.
- 51. In a letter dated November 19, 2014, to CDSS, Respondent DHCS requested to reopen Petitioner Kathem's final hearing decision for the purpose of obtaining a new hearing. Neither Petitioner Kathem nor his legal representative at the state fair hearing, Bay Area Legal Aid, were served with a copy of the request for rehearing at the time it was submitted. A copy of DHCS's November 19, 2014 memorandum requesting a rehearing is attached hereto as Exhibit "B".
- 52. On January 22, 2015, CDSS Chief Administrative Law Judge Manuel Romero provided Bay Area Legal Aid with a copy of the request to Petitioner Kathem advising that CDSS had "carefully reviewed" the request for rehearing and had "determined that a rehearing should be held." In the letter, Chief ALJ Romero stated that "a rehearing is necessary to reverse the decision ordering the county to rescind its

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April 23, 2014 notice of action discontinuing Medi-Cal benefits for the claimant, effective April 30, 2014, and restore full scope Medi-Cal benefits, with zero share of cost, under aid code 45." A copy of Chief ALJ Romero's January 22, 2015 letter granting a rehearing is attached hereto as Exhibit "C".

- 53. Respondents' request for a rehearing of Petitioner's Kathem's hearing decision is an attempt to rehear the identical issue that was fully heard at the September 10, 2014 fair hearing and finally decided in the October 20, 2014 hearing decision that was affirmed by Respondents Kent and DHCS 30 days after the proposed decision as issued.
- 54. Respondents' request for and granting of a rehearing in this case seeks to undo a favorable final hearing decision that resulted in Petitioner Kathem being able to regain eligibility for Medi-Cal coverage and gain critical access to mental health services, primary and specialty care, prescription medications, and dental benefits under the Former Foster Care program. Without Medi-Cal coverage, Petitioner Kathem will be left uninsured because he cannot afford to pay for private insurance plans out of pocket. In addition, losing Medi-Cal coverage would further exacerbate Petitioner Kathem's untreated injuries, which include pain in his back, hamstrings, quads and wrists, dental and mental health problems. It would also prevent him from accessing needed prescription medications.
- 55. Respondents' request for and granting of a rehearing was not made by a party that is allowed to request a rehearing under the applicable law. Respondents' request for a rehearing was not "immediately served" on the other party to the hearing as required by law in order to allow the party that did not request the rehearing to file with the director a written statement supporting or objecting to the request. And the granting of the rehearing request was after both the 15th and 35th working day after it is made."
- 56. As a URM youth, it is important for Petitioner Kathem to have Medi-Cal through the Former Foster Care program that provides full scope Medi-Cal eligibility to age 26 without consideration of income, allows for him to access any Medi-Cal health

care providers on a fee-for-service basis instead of only through the managed care plan and be able to have continuity of coverage without having to report and fill out a redetermination paperwork.

- 57. Petitioner Kathem requests that the Court issue a Preliminary Injunction and Writ of Mandamus compelling the State to comply with the October 20, 2014 Decision and to provide Petitioner Kathem Medi-Cal benefits pursuant to Medi-Cal's Former Foster Care program.
- B. Petitioner Tluang Has Been Denied Medi-Cal Covered Services Through The Former Foster Care Program.
- 58. Petitioner Tluang is a refugee pursuant to Section 207 of the Immigration and Naturalization Act codified in 8 U.S.C. §1157 and is a participant of the URM program through Catholic Charities of Santa Clara County, a state sub-contractor of the program.
- 59. Petitioner Tluang was terminated from her Medi-Cal benefits on multiple occasions after turning 18. When attempting to reinstate her benefits she was required to submit a new Medi-Cal application, which resulted in a long interruption of coverage. Petitioner Tluang has been placed onto MAGI Medi-Cal without evaluation for any other Medi-Cal programs, including the Former Foster Care program that would entitle her to Medi-Cal with fee-for-service coverage, regardless of income, until age 26.
- 60. Proceeding to a state fair hearing in order to challenge Respondents' failure to place Petitioner Tluang into the appropriate Medi-Cal program would be futile given the Respondents' illegal policies and recent attempt to reverse favorable administrative decisions.

# V. CAUSES OF ACTION FIRST CAUSE OF ACTION

(Mandamus – California Code of Civil Procedure Section §1085 - Respondents have a ministerial duty to ensure that URMs are placed in the proper Medi-Cal program).

- 61. Petitioners reallege and incorporate by reference each of the previous allegations set forth in this petition and complaint as if set forth in full herein.
- 62. Pursuant to California Code of Civil Procedure section 1085, a writ of mandate may be issued by any court to any inferior tribunal, corporation, board, or person, to compel the performance of an act which the law specifically enjoins, as a duty resulting from an office, trust, or station.
- 63. Respondents CDSS and Lightbourne have a clear and present ministerial duty to administer the CA Refugee State Plan in conformity with the requirements of the law.
- 64. Respondents DHCS and Kent have a clear and present ministerial duty to administer the Medi-Cal program in such a manner "so as to secure for every person the amount of aid to which he is entitled" (W&IC § 10500) and that Medi-Cal benefits must be provided "promptly and humanely" (W&IC § 10000).
- 65. The CA Refugee State Plan requires that URM youth be provided "the full range of child welfare services as provided to children in mainstream foster care in the state." Further, it also guarantees that "these services may include foster care maintenance payments, medical assistance, support services, and any services identified as allowable in Title IV-B State Plan (Foster Care Services)."<sup>21</sup>
- 66. Respondents have a clear ministerial duty to ensure that all URM youth promptly and humanely receive the full amount of benefits to which they are entitled.
- 67. In California, former foster care children are entitled to receive full scope Medi-Cal benefits with no income or assets eligibility requirements upon reaching 18 years of age in foster care until the youths' 26<sup>th</sup> birthday, without interruption.<sup>22</sup>

<sup>&</sup>lt;sup>21</sup> See CA Refugee State Plan, supra.

Welf. & Instit. Code 14005.28(a); see also Off. Refugee Resettlement, U.S. Dept. Health & Human Services, State Letter No. 11-01, (Dec. 2010)

http://www.acf.hhs.gov/programs/orr/resource/state-letter-11-01 (where ORR mandates "effective 2014, states must extend Medicaid coverage up to age 26 for young adults who (footnote continued)

Respondents are failing to comply with their duty to provide URM youth with Medi-Cal program benefits to which they are entitled, consistent with the CA Refugee State Plan and state law.

- 68. Foster care children transitioning into the Former Foster Care Youth Program (FFCP) are also entitled to receive fee-for-service Medi-Cal coverage instead of having to join a Medi-Cal managed care plan in order to receive Medi-Cal health care benefits. (W&IC §14093.09(a)).
- 69. Respondents' policy of denying URMs the proper Medi-Cal program is a violation of their ministerial duties. As a result of Respondents' policy, URMs are illegally denied fee-for-service coverage, are forced to comply with inapplicable income tests and reporting requirements, and are not transitioned into the proper Former Foster Care Medi-Cal program on their 18<sup>th</sup> birthday without interruption in coverage.
- 70. Accordingly, Petitioners seek issuance of a preliminary injunction and writ compelling Respondents to provide URMs, including these Petitioners, with full scope, fee for service Medi-Cal benefits under the FFCP, regardless of income, until age 26.

## SECOND CAUSE OF ACTION

(California Code of Civil Procedure 1085 – Respondents have a ministerial duty to administer the state hearing system in conformity with the requirements of law).

- 71. Petitioners reallege and incorporate by reference each of the previous allegations set forth in this petition and complaint as if set forth in full herein.
- 72. Respondent CDSS has a ministerial duty to administer the state fair hearing system in conformity with the requirements of law.
- 73. As set out above, Respondents' CDSS and Lightbourne granting of the request by Respondents DHCS and Kent for a rehearing is contrary to the requirements of Welf. and Inst. Code §§10959, 10960 and MPP §22-062-65.

have aged out of the foster care system, including those aging out of the Unaccompanied Refugee Minors program.").

11038023.1

hearing decision.

THIRD CAUSE OF ACTION

(Respondent DHCS is Collaterally Estopped From Rehearing its Final Hearing

Decision).

ministerial duty to fully implement the requirements and terms of Petitioner's Kathem's

- 76. Petitioners reallege and incorporate by reference each of the previous allegations set forth in this petition and complaint as if set forth in full herein.
- 77. Respondent DHCS is the single state agency charged by law with administering the Medi-Cal program and ensuring that it complies with all requirements of law.
- 78. Respondent DHCS and Kent administer the Medi-Cal program by delegating to the Counties the duty to make eligibility determination for Medi-Cal. As such, the counties act as DHCS's agent for purposes of the program, including representing the program in state fair hearings.
- 79. Respondents DHCS' and Kent's request for a rehearing of Petitioner Kathem's final fair hearing decision seeks to reopen and re-try the identical issue that was previously addressed in a state fair hearing on September 10, 2014 and decided in hearing decision number 2014203381. Specifically, that issue is whether Petitioner Kathem, as an URM, is eligible for full scope Medi-Cal benefits with no share of cost, regardless of income, until age 26.
- 80. Subsequent to the September 10, 2014 state fair hearing, the administrative law judge who presided over that hearing issued a Proposed Decision which was adopted as a final decision by Respondents DHCS and Kent on October 20, 2014. See Exhibit A. That decision ordered the county to rescind its notice discontinuing medical

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benefits for Petitioner Kathem and to restore full scope Medi-Cal benefits with zero share of cost.

- 81. Respondents DHCS and Kent are the parties who adopted the October 20, 2014 hearing decision as a final decision pursuant to their authority under W&IC section 10959.
- 82. In addition, the statutory scheme governing the Medi-Cal program results in Respondents DHCS and Kent adopting the proposed decision as final Respondents' request for a re-hearing of Petitioner Kathem's hearing decision is an improper attempt to rehear the identical issue that was fully heard at the September 10, 2014 fair hearing and finally decided in the October 20, 2014 hearing decision. See Exhibit A. As such, Respondents DHCS and Kent should be collaterally estopped from going forward with their rehearing.
- 83. Petitioners have no administrative remedy, and lack any plain, speedy, or adequate remedy at law except by way of a Writ of Mandate requiring Respondents to provide URMs with the Medi-Cal benefits to which they are entitled and enjoining Respondents from rehearing or failing to fully enforce the final state hearing decision for Petitioner Kathem (Ex. A).
- 84. Petitioners request recovery of attorneys' fees pursuant to Code of Civil Procedure section 1021.5.

#### IV. PRAYER FOR RELIEF

For the reasons stated above, Petitioners respectfully request that the Court grant the following relief:

1. For a Preliminary Injunction and Peremptory Writ of Mandate prohibiting Respondents from refusing to provide full scope, fee-for service, Medi-Cal benefits, regardless of income, until age 26 to URM youth as required by law.

#### Verification of Nooraldeen Kathem

I, the undersigned, declare:

That I am a petitioner in the above-entitled action; I have reviewed the foregoing Petition for Writ of Mandate; and that, I certify that the factual allegations contained therein are true to the best of my knowledge.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct.

Executed on March 11, 2015 at San Jose, California.

Nooraldeen Kathem

### Verification of Llal Tluang

I, the undersigned, declare:

That I am a petitioner in the above-entitled action; I have reviewed the foregoing Petition for Writ of Mandate; and that, I certify that the factual allegations contained therein are true to the best of my knowledge.

I declare under penalty of perjury of the laws of the State of California that the foregoing is true and correct.

Executed on March 16, 2015 at Oakland, California.

Llal Tluang

# CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Hearing No. 2014203381

*In the Matter of Claimant(s):* 

Nooraldeen Kathem 2625 Zanker Road San Jose, CA 95134

# PROPOSED DECISION

Adopted by the Director
October 20, 2014
California Department of Health Care Services

I submit the attached proposed decision for review and recommend its adoption.

Julise N. Johanson Administrative Law Judge Cert Date:

October 19, 2014

State Hearing Record

Hearing Date:

September 10, 2014

Release Date:

October 20, 2014

Aid Pending:

Authorized Rep.

Organization:

Yes

Issue Codes:

[446-1]

Agency:

Agency:

Santa Clara County

Agency

,

Representative:

Ngan Nguyen

Agency

Representative:

Authorized Rep:

Celine Janelle

SSN:

SSN.

AKA:

AKA:

Case Name:

Nooraldeen Kathem

Language:

English

LA District/Case:

Companion Case:

#### Appeal Rights

You may ask for a rehearing of this decision by mailing a written request to the Rehearing Unit, 744 P Street, MS 9-17-37, Sacramento, CA 95814 within 30 days after you receive this decision. This time limit may be extended up to 180 days only upon a showing of good cause. In your rehearing request, state the date you received this decision and why a rehearing should be granted. If you want to present additional evidence, describe the additional evidence and explain why it was not introduced before and how it would change the decision. You may contact Legal Services for assistance.

You may ask for judicial review of this decision by filing a petition in Superior Court under Code of Civil Procedure §1094.5 within one year after you receive this decision. You may file this petition without asking for a rehearing. No filing fees are required. You may be entitled to reasonable attorney's fees and costs if the Court renders a final decision in your favor. You may contact Legal Services for assistance.

This decision is protected by the confidentiality provisions of Welfare and Institutions Code §10850.

#### **SUMMARY**

Santa Clara County (County) shall provide the Claimant with California Medical Assistance Program (Medi-Cal) benefits equivalent to those received by mainstream foster care youth, effective immediately, under aid code 45. [446-1]

#### **FACTS**

By Notice of Action (NOA) dated April 23, 2014, the County sent the Claimant notification that his California Medical Assistance Program (Medi-Cal) was being discontinued on April 30, 2014, because he was no longer living in the home. The NOA also informed him he may be eligible for benefits in his own case. The NOA was sent to a mailing address that was four years old, and the Claimant never received the NOA. In June 2014, the Claimant was informed by his health clinic that his Medi-Cal benefits were inactive. On July 22, 2014, the Claimant requested a hearing on this NOA.

The state hearing was held on September 10, 2012. The Claimant appeared and was represented by an attorney from Bay Area Legal Aid. The Claimant's attorney submitted a Statement of Position, including exhibits to support her contentions. A County hearing representative was present and represented the County at the hearing, along with the County's position statement with attached exhibits.

It is undisputed between the parties that the Claimant came to the United States as a minor refugee from Iraq with his mother. He was voluntarily placed within nonrelative caretaker and received AFDC foster care benefits starting from March 8, 2012. When the voluntary placement ended on June 28, 2012, five days before his 18th birthday, his AFDC- FC benefits were also terminated. The Claimant has been enrolled as a foster youth with the Refugee Foster Care program of Catholic Charities of Santa Clara County since July 2, 2012. On the same date, he also became eligible for the Unaccompanied Refugee Minors program as designated by the Office of Refugee Resettlement (ORR). The Claimant remains in Extended Foster Care under AB –12 as a non-minor dependent. He continues to be eligible for the Refugee Foster Care program through his 24th birthday. He is now 20 years of age and will turn 21 on July 3, 2015.

At the hearing, the County representative stated that, upon receipt of the hearing request, the County immediately restored the Claimant's Medi-Cal benefits effective May 1, 2014. However, for some unknown reasons, the Claimant's Medi-Cal benefits were terminated again on August 31, 2014. The County representative stated that he has done his best to restore the Claimant's Medi-Cal benefits effective September 1, 2014 under the Medically Indigent Child program (aid code 82). The County representative testified that the Claimant's Medi-Cal benefits would be restored only until March 2015, at which time he would be required to go through a redetermination process. The record was left open until September 11, 2014 for the County to provide documentation in the form of a MEDS' screen showing the Claimant's Medi-Cal was restored until March 2015. The County did not provide this evidence.

The Claimant's AR argued that the Claimant's Medi-Cal benefits are still inactive and, when the benefits are restored, they should be restored under aid code 42 or 45 for foster care youth until they turn 21 years of age. After that, the Claimant's aid code should be 4M, which is the designation for former foster care youth. The Claimant's AR argued that, under federal regulations, states must treat unaccompanied refugee minors (URMs) in the same manner as mainstream domestic foster youth. Specifically:

- "...a State must provide the same child welfare services and benefits to the same extent as are provided to other children of the same age in the State under a State's title IV-B plan." 45 Code of Federal Regulations (CFR) § 400.112(a); and
- "A State must provide unaccompanied minors with the same range of child welfare benefits and services available in foster care cases to other children in the State." 45 CFR § 400.116(a).

The Claimant's attorney provided a copy of the California Department of Social Services (CDSS) Fact Sheet entitled Unaccompanied Refugee Minors Program dated September 2013 showing that on page 2 of this Fact Sheet, CDSS agrees that URMs in California must be provided services that are equivalent to mainstream foster care. She argued that under the Claimant's current aid code 82, he is only entitled to managed care health benefits, not fee for service, and he has to keep reapplying for medical benefits, as opposed to being entitled to automatic enrollment. Further, she argued that domestic foster youth are entitled to full-scope benefits, with zero share of cost, with all income and asset tests waived until his/her 26<sup>th</sup> birthday.

The Claimant's attorney testified that aid code 42 is code used for foster care youth under the federal program, and aid code 45 is for foster care in general. She argued that the Claimant should receive medical benefits under aid code 45. She provided page 34-11 from the Foster Care Handbook revised on March 11, 2014 stating:

"A Foster Care child may be eligible to full scope, no share-of-cost Medi-Cal benefits under aid code 45 Medi-Cal when: The child is not living with a parent or relative, and a public agency is assuming financial responsibility in whole or in part and the child is not eligible to Foster care under aid codes 40, 42 or 5K."

The County representative stated that the County is aware of the problem and that the aid code 82 is a temporary aid code until this problem is resolved. He acknowledged that the Claimant is a URM and entitled to the same benefits as other foster care youth. He indicated that the aid code designation has to be changed at the state level with the Department of Health Care Services (DHCS) and so far, DHCS has not instructed the Counties on what aid code to use. He argued that the County cannot change the aid code.

The Claimant testified that he has back problems, hamstring and quad problems, and he has not been able to go to the doctor since the system shows he has no coverage. Further, he stated that he needs dental work and physical therapy for his wrist where he had surgery.

#### LAW

All the regulations cited refer to the Manual of Policies and Procedures (MPP), unless otherwise noted. For purposes of this decision, W&IC is the abbreviation for the Welfare & Institutions Code. The California Department of Health Care Services (CDHCS) issues Medi-Cal regulations and these regulations are found in Title 22, California Code of Regulations (CCR). All further references, unless otherwise noted, are from the CCR. (§50005.)

Refugee Medical Assistance/Entrant Medical Assistance (RMA/EMA) program is a special program that provides full-scope medical assistance through the Medi-Cal program but is not a Medi-Cal program.

A State must provide the same child welfare services and benefits to the same extent as are provided to other children of the same age in the State under a State's title IV-B plan." 45 Code of Federal Regulations (CFR) § 400.112(a).

A State must provide unaccompanied minors with the same range of child welfare benefits and services available in foster care cases to other children in the State." 45 CFR § 400.116(a).

#### CONCLUSION

The facts of this case are undisputed: the Claimant is a URM and is entitled, under federal regulations, to full scope fee for service medical benefits, with no new application, and waived income and asset tests until his 26<sup>th</sup> birthday. The County has denied this coverage arguing that the DHCS has provided no guidelines or new aid codes for URMs. However, the problem with the County's argument is it appears that the County has, arbitrarily, assigned aid code 82 with no direction from the DHCS, when it could just as arbitrarily assigned aid code 45, which seems to be the appropriate aid code on the basis of the Foster Care Handbook page 34-11.

It is undisputed that the Claimant is a foster youth with the Refugee Foster Care program of Catholic Charities of Santa Clara County and has been with this program since July 2, 2012. He does not live with a parent or relative and receives some financial assistance through Catholic Charities of Santa Clara County, which is collaboration between CDSS and the federal Office of Refugee Resettlement, both public agencies. Therefore, it is found that the appropriate temporary aid code, under which the Claimant should receive Medi-Cal benefits, is aid code 45, and that his Medi-Cal benefits should be restored immediately.

#### **ORDER**

The claim is granted.

Santa Clara County is ordered to rescind its April 23, 2014 NOA discontinuing California Medical Assistance Program benefits for the Claimant effective April 30, 2014 and restore full scope Medi-Cal benefits with zero share of cost under aid code 45.



## Department of Health Care Services MEMORANDUM

RECEIVED

DATE:

November 19, 2014

STATE HEARINGS

TO:

Jolly allow Manuel Romero, Chief Administrative Law Judge

Rehearing Unit

744 P Street MS9-17-37

Sacramento, CA 95814

Tara Naisbitt, Chief

Medi-Cal Eligibility Division

STATE HEARINGS

RECEIVED

SUBJECT:

FROM:

Request for Rehearing of Hearing Number 2014203381

The purpose of this memorandum is to request a rehearing of hearing number 2014203381 based on an error of law; as discussed below, we believe the applicable law was not provided to the hearing officer and, therefore, was not considered in the decision. Santa Clara County (contrary to the above referenced fair hearing decision) must not provide Medi-Cal in aid code 45 to a claimant who has been designated by the Office of Refugee Resettlement (ORR) as an Unaccompanied Refugee Minor (URM) because those children are not eligible for federal foster care benefits under Title IV-E of the Social Security Act.

All care for URM children must be funded with 100% federal funds provided through the Office of Refugee Resettlement (ORR) to CDSS and then to the two private agencies who administer the URM program at the local level. These children do not enter the county foster care system and their cases are not administered by the counties. As such, these children are not categorically Medi-Cal eligible as "foster care children".

According to federal law and the CDSS Refugee Assistance State Plan, the private agency responsible for the child (that is, who has taken legal guardianship of the child) must provide for the same range of medical services given to a state's Title IV-E foster children. (8 U.S.C. §§1522(2)(B)(i-iii); 45 C.F.R. §400.112.) This is required of the private agency by federal law and our state plan for refugee services. Therefore, it is CDSS and the private agency (which has taken legal guardianship of the child) that must ensure URM children receive the same range of medical services given to Title IV-E foster children and paid for in full by the federal URM program. Because these children are not eligible for Title IV-E federal foster care benefits funded by the Social Security Act (due to their URM status), they must not be placed in aid code 45 which requires federal foster care eligibility.

Therefore, the Department of Health Care Services requests a rehearing of this case. Please contact John Zapata at (916) 552-9451 or via-email John.Zapata@dhcs.ca.gov if you would like to discuss this request further. I appreciate your consideration of this request.



# STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss on gov



January 22, 2015

Marissa Calma Santa Clara County Social Services Agency 333 W. Julian Street, Bldg. 1 San Jose CA 95110

Re: Nooraldeen Kathem; Rehearing request; Case Name: KATHEM, NOORALDEEN Rehearing No.: 2015022324Hearing No.: 2014203381

The request for rehearing in this matter has been carefully reviewed and we have determined that a rehearing should be held. The request for rehearing was granted on January 22, 2015.

The adopted decision is inconsistent with the law.

All care for Unaccompanied Refugee Minor (URM) children must be funded with 100% federal funds provided through the Office of Refugee Resettlement (ORR) to CDSS and then to the two private agencies who administer the URM program at the local level. These children do not enter the county foster care system and their cases are not administered by the counties. As such, these children are not categorically Medi-Cal eligible as "foster care children."

Therefore, where URM children are not eligible for Title IV-E federal foster care benefits funded by the Social Security Act due to their URM status, they cannot be placed in aid code 45 which requires federal foster care eligibility.

A rehearing is deemed necessary to reverse the decision ordering the county to rescind its April 23, 2014 notice of action discontinuing Medi-Cal benefits for the claimant, effective April 30, 2014, and restore full scope Medi-Cal benefits, with zero share of cost, under aid code 45.

The scope of the rehearing shall also include determining which Medi-Cal aid code, if any, is appropriate for the claimant as an URM.

You will be notified later of the exact time and place of the rehearing.

The evidence which was presented at the first hearing and the tape recording of that hearing will be considered at the rehearing. You should be prepared to submit any additional arguments or evidence you may have concerning the issues involved. If you do not appear at the rehearing, the rehearing will nonetheless take place and a decision will be based on the available record.

RECEIVED
JAN 23 2015

BANTACLARAAPPEALS

Sincerely,

Manuel A. Romero

Chief Administrative Law Judge

cc. Nooraldeen Kathem

Celine Janelle, Authorized Representative

RECEIVED

July 23 2015

SANTACLARAAPPEALS