



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

MARLON I. BROWN, DPA
DIRECTOR

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[REDACTED] MI [REDACTED]

Date Mailed: February 25, 2025
MOAHR Docket No.: 24-013332
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Zainab A. Baydoun

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 telephone hearing was held on January 27, 2025, from Detroit, Michigan. Petitioner appeared for the hearing and represented herself. The Department of Health and Human Services (Department) was represented by Myra Vaden, Assistance Payments Worker.

ISSUE

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA) and Medicare Savings Program (MSP) benefits?

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. Petitioner is an ongoing recipient of MA and MSP benefits.
2. Petitioner was previously approved for MA benefits under the full coverage Ad-Care category.
3. In connection with a redetermination, Petitioner's eligibility for MA and MSP benefits was reviewed.
4. On October 24, 2024, the Department sent Petitioner a Health Care Coverage Determination Notice informing her that she was approved for full coverage MA benefits through November 30, 2024, and limited coverage MA benefits under the Plan First category effective November 1, 2024. The Notice also advised Petitioner that she was ineligible for MSP benefits effective December 1, 2024. (Exhibit A, pp. 12-16)

5. The Department asserted that effective December 1, 2024, Petitioner was approved for MA under the Group 2 Aged, Blind, Disabled (G2S) category subject to a monthly deductible of \$734.
6. On or around November 26, 2024, Petitioner requested a hearing disputing the Department's actions with respect to the MA and MSP benefits.
7. At the hearing, Petitioner withdrew her request for hearing concerning the MA program and indicated she was no longer disputing her eligibility for MA under the G2S category. Petitioner asserted that she is not seeking MA coverage from the Department, as she enrolled in a separate health plan.
8. Petitioner's dispute regarding the MSP continued.

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), 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 (formerly known as the Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

In this case, Petitioner disputed the Department's actions with respect to her MSP eligibility.

MSP are SSI-related MA categories. There are four MSP categories: Qualified Medicare Beneficiaries (QMB); Specified Low-Income Medicare Beneficiaries (SLMB); Additional Low-Income Beneficiaries (ALMB); and Non-Categorically Eligible Michigan Beneficiaries (NMB). BEM 165 (July 2024), p. 1. QMB is a full coverage MSP that pays Medicare premiums (Medicare Part B premiums and Part A premiums for those few people who have them), Medicare coinsurances, and Medicare deductibles. SLMB pays Medicare Part B premiums and ALMB pays Medicare Part B premiums provided funding is available. NMB pays the Medicare Part B premiums (and the part A premiums for the few who have them) for full coverage Medicaid beneficiaries not otherwise eligible for MSP. BEM 165, pp. 1-2.

At the hearing, the Department representative testified that after receiving Petitioner's hearing request, her MSP benefits were reinstated. The Department asserted that Petitioner was approved for MSP benefits under the Specified Low-Income Medicare

Beneficiaries (SLMB) category effective April 2024 with no lapse in coverage. During the hearing, the Department was instructed to submit an eligibility summary and the eligibility notice issued to Petitioner advising of the approval, as the documents were admitted into evidence as Exhibit B; however, the Department failed to submit the documents for review and thus, Exhibit B will be stricken from the record. The Department asserted that although the MSP benefits were showing as approved in Bridges, the Buy-in was not processed correctly, as according to the State On-line Query (SOLQ), there is a Buy-in stop date of November 1, 2024. The Department representative conceded that Petitioner was eligible for MSP benefits under the SLMB category and should not have a lapse in coverage.


DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reinstate Petitioner's MSP benefits under the SLMB effective November 1, 2024, ongoing;
2. Process the Medicare Buy-In based on the November 1, 2024, stop date identified on the SOLQ and supplement Petitioner and/or the Social Security Administration for Medicare premiums in accordance with Department policy; and
3. Notify Petitioner in writing of its decision.

ZB/ml


Zainab A. Baydoun
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

Caryn Jackson
Wayne-Hamtramck-DHHS
12140 Joseph Campau
Hamtramck, MI 48212
MDHHS-Wayne-55-Hearings@michigan.gov

Interested Parties

BSC4
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Via First Class Mail:

Petitioner

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