



Date Mailed: June 12, 2025

Docket No.: 25-015041

Case No.: [REDACTED]

Petitioner: [REDACTED]

«RECIP_FULL_NAME»
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«RECIP_CITY», «RECIP_SPCODE»
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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

Este es un documento legal importante. Por favor, que alguien traduzca el documento.

这是一份重要的法律文件。请让别人翻译文件。

Ky është një dokument ligjor i rëndësishëm. Ju lutem, kini dikë ta përktheni dokumentin.

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Case No.: [REDACTED]

Petitioner: [REDACTED]

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; 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 telephone conference on May 22, 2025. Petitioner appeared for the hearing with her mother [REDACTED] and represented herself. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Jacob Frankmann, Assistance Payments Supervisor.

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. On or around January 6, 2025, Petitioner submitted an application requesting Food Assistance Program (FAP) benefits. On the application, Petitioner reported that she had liquid assets in checking or savings accounts in the amount of \$16,868. (Exhibit A, pp. 11-17)
2. In an application interview conducted on January 13, 2025, Petitioner confirmed that her [REDACTED] Bank checking account had a \$16,868 balance. (Exhibit A, p. 20)
3. On January 17, 2025, Petitioner submitted an application requesting MA benefits. (Exhibit A, pp. 25-30)
4. On or around January 17, 2024, the Department sent Petitioner a Health Care Coverage Determination Notice advising her that she was approved for MA under the Plan First (PFFP) category that does not have an asset test. The Health Care Coverage Determination Notice advised Petitioner that she was ineligible for MSP benefits because she did not meet basic criteria. (Exhibit A, pp. 31-38)

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- a. Although not reflected on the notice, the Department determined that Petitioner was not eligible for MSP or any other MA program because her assets exceeded the limit. (Exhibit A, pp. 31-38)
 5. On or around March 31, 2025, Petitioner submitted an application requesting MA benefits. (Exhibit A, pp. 39-44)
 6. On or around March 31, 2025, the Department sent Petitioner a Health Care Coverage Determination Notice advising her that she was approved for MA under the Plan First (PFFP) category that does not have an asset test. The Health Care Coverage Determination Notice advised Petitioner that she was ineligible for MSP benefits because the value of her countable assets is higher than allowed. (Exhibit A, pp. 45-52)
 7. On or around April 17, 2025, Petitioner requested a hearing disputing the Department's actions with respect to her MA and MSP benefits.

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 determination that she was ineligible for MA and MSP benefits due to excess assets.

The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise would not have the financial resources to purchase them and who meet the financial and nonfinancial eligibility factors. Medicaid, also known as the Medical Assistance (MA) program, is comprised of several sub-programs or categories. BEM 100 (April 2023), pp. 1-2; BEM 105 (January 2024), p.1. The United States Department of Health and Human Services (HHS) develops and issues federal regulations that set the requirements and guidelines for states to follow in the determination of MA eligibility. BEM 100, pp. 1-2.

MA is available under SSI-related categories to individuals who are aged (65 or older), entitled to Medicare, blind or disabled. 42 CFR 435.911; 42 CFR 435.100 to 435.172; BEM 105, p. 1. MSP are SSI-related MA categories. Asset eligibility is required for MA coverage under SSI-related MA categories. BEM 400 (April 2024), p. 1-8; BEM 105, p. 1. The Department will consider the value of cash assets in determining a client's asset eligibility for MA and MSP benefits. Cash assets include money/currency, uncashed checks, drafts, and warrants, as well as, money in checking, savings, money market, and/or certificate of deposit (CD or time deposit) accounts. BEM 400, pp. 14-18. An asset must be available to be countable. Available means that someone in the asset group has the legal right to use or dispose of the asset. The Department is to assume that an asset is available unless evidence shows it is not available. BEM 400, p. 10.

Asset eligibility will exist when the asset group's countable assets are less than, or equal to, the applicable asset limit at least one day during the month being tested. BEM 400, p. 6. In January 2025, the asset limit for the SSI related MA program and an asset group size of one was \$2,000 and for the MSP, the asset limit is \$9,660. However, effective February 1, 2025, the asset limit for both the MA and MSP was increased to \$9,660. BEM 400, pp. 7-8; BEM 211, pp. 1-9.

The Department properly concluded that because Petitioner was enrolled in Medicare, she was potentially eligible for MA under an SSI-related category which requires that the value of her assets be below the limit identified above. BEM 105. The Department contended that Petitioner was ineligible for MA and MSP benefits in connection with the January 17, 2025, application because the value of her countable assets from her bank accounts exceeded the limit for eligibility. The Department representative testified that based on Petitioner's reported assets on her FAP application and again as confirmed during her application interview, the cash assets exceeded both the MA and MSP asset limits. Petitioner did not dispute that the value of her countable assets exceeded the asset limits for the month of January 2025 and February 2025 and that the first month in which her assets were below the limit was March 2025. Thus, the Department properly denied Petitioner's January 17, 2025, MA/MSP application.

With respect to the March 31, 2025, application, the Department representative testified that after receiving Petitioner's request for hearing, the Department determined that it should have requested verification of Petitioner's assets to determine her asset eligibility. Petitioner submitted verification of her bank account assets and the Department reprocessed Petitioner's application and determined that she was eligible for MA under the Group 2 Aged Blind Disabled (G2S) category and MSP benefits effective April 1, 2025. The Department issued a Health Care Coverage Determination Notice on May 15, 2025, advising that Petitioner was approved for MA and MSP benefits effective April 1, 2025. However, the Department conceded that for the month of March 2025, Petitioner was also asset eligible, because as of March 25, 2025, the cash value in the bank account was below the \$9,660 asset limit. Therefore, the Department is to activate Petitioner's MA and MSP coverage under the most beneficial category for March 1, 2025.

DECISION AND ORDER

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 Department did not act in accordance with Department policy when it determined that Petitioner was ineligible for MA and MSP benefits for March 2025.

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. Provide Petitioner with MA and MSP coverage under the most beneficial category, that she was entitled to receive but did not from March 1, 2025, ongoing; and
2. Notify Petitioner in writing of its decision.



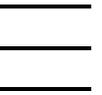
ZAINAB A BAYDOUN
ADMINISTRATIVE LAW JUDGE

APPEAL RIGHTS: Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at courts.michigan.gov. The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://lrs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to MOAHR-BSD-Support@michigan.gov, **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to
Michigan Office of Administrative Hearings and Rules
Rehearing/Reconsideration Request
P.O. Box 30639
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed.



Via Electronic Mail:

Respondent

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Interested Parties

POLICY RECOUPMENT

N STEBBINS

MOAHR

Via First Class Mail:

Petitioner

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