



Date Mailed: June 30, 2025

Docket No.: 25-018061

Case No.: [REDACTED]

Petitioner: [REDACTED]

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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

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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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Docket No.: 25-018061

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 June 23, 2025. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Rebecca Scott, Eligibility Specialist.

ISSUE

Did MDHHS properly determine Petitioner's Medicaid (MA) and Medicare Savings Program (MSP) 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. Petitioner was an ongoing recipient of MA and MSP.
2. Petitioner is [REDACTED] years old, married, a parent caretaker of a minor child (Exhibit A, p. 10), and a resident of [REDACTED] County.
3. Beginning January 2025, Petitioner started receiving [REDACTED] in monthly Retirement, Survivors and Disability Income (RSDI). He receives RSDI due to a disability.
4. On April 23, 2025, MDHHS notified Petitioner that effective June 1, 2025, he was eligible for MA under the limited coverage Plan First Family Program (PFFP) and no longer eligible for MSP benefits due to failing to provide verification of his vehicle value and bank checking account. (Exhibit A, pp. 18-21)
5. On April 28, 2025, MDHHS received Petitioner's hearing request disputing MDHHS's actions concerning his MA cases.

25-018061

2

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.

Petitioner requested a hearing to dispute MDHHS's closure of his MSP case and determination that he was eligible for limited MA coverage under PFFP. At the hearing, the MDHHS worker explained that, after it received Petitioner's hearing request, Petitioner's cases were reevaluated, and it was determined that Petitioner had timely verified his vehicle value and bank account. The worker explained that Petitioner had been approved for MSP under the SLMB (Specified Low-Income Medicare Beneficiaries) category, and information from MDHHS's database showed that, as of May 14, 2025, Petitioner was approved for SLMB coverage retroactive to at least August 2024. (Exhibit B) The worker also explained that Petitioner was approved for MA coverage with a \$1,455 monthly deductible for June 1, 2025 ongoing and presented a Health Care Coverage Determination Notice dated May 14, 2025, notifying Petitioner of his MA health insurance coverage.

MA Health Insurance Coverage

MA is available (i) under SSI-related categories to individuals who are aged (65 or older), blind or disabled, (ii) to individuals who are under age 19, parents or caretakers of children, or pregnant or recently pregnant women, and (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage. Individuals may also qualify for limited MA coverage under the Plan First Family Planning (PFFP) program. 42 CFR 435.911; 42 CFR 435.100 to 435.172; BEM 105 (January 2024), p. 1; BEM 137 (January 2024), p. 1; BEM 124 (July 2023), p. 1.

Because Petitioner is a Medicare recipient, Petitioner is not eligible for MA under HMP. See BEM 137, p. 1. Because Petitioner is receiving RSDI based on a disability and documentation provided by MDHHS shows that he is the caretaker of a minor child, Petitioner is potentially eligible for MA for parent caretakers and under SSI-related categories.

Low Income Family (LIF) is Modified Adjusted Gross Income (MAGI)-related MA category for adults with a dependent child and with income below 54% of the federal poverty level

25-018061

for the group size. For MAGI-related MA purposes, the group size for tax-filers includes the individual, the individual's spouse, and claimed tax dependents. BEM 211 (October 2023), p. 1. For non-tax-filers, the group size includes the individual, the individual's spouse and the individual's children under age 19 (under age 21 if a full-time student. BEM 211, p. 1.

Here, Petitioner's household consists of himself, his wife, his minor child, and his 22-year-old daughter. (Exhibit A, p. 10) There was no evidence presented concerning whether Petitioner was a tax filer or whether his 22-year-old child was a tax dependent. Assuming he was a tax filer and she is a dependent, Petitioner's MAGI-related MA group size would be four. 54% of the federal poverty level for a four-person group is [REDACTED] annually or [REDACTED] monthly. Even with the 5% income disregard that increases the income limit 5% to [REDACTED], Petitioner, who receives monthly RSDI income of [REDACTED], is ineligible for MA coverage under the LIF program.

Because Petitioner receives RSDI based on a disability, he is also potentially eligible for MA under an SSI-related MA group. In determining Petitioner's eligibility for SSI-related MA category Petitioner is eligible for, MDHHS must determine Petitioner's MA fiscal group size and the group's income. As a married individual, Petitioner has fiscal group size for SSI-related MA purposes of two. BEM 211 (October 2023), p. 8.

AD-Care is a full-coverage SSI-related MA program. BEM 163 (July 2017), p. 1. The AD-Care program, as of April 2025 had an income limit of [REDACTED] for a two-person MA group. BEM 163 (July 2017), p. 2; RFT 242 (April 2025), p. 1; <https://aspe.hhs.gov/poverty-guidelines>. Petitioner verified that he received monthly RSDI totaling [REDACTED] Based on his RSDI income, MDHHS properly determined that Petitioner was ineligible for full-coverage MA under the AD-Care program.

Disabled individuals who are not eligible for full-coverage MA coverage under AD-Care because of excess income and who are not employed may still be eligible for SSI-related MA under a Group 2 SSI-related (G2S) program, which provides for MA coverage with a monthly deductible. BEM 105, p. 1. The deductible is in the amount that a client's net income (less any allowable needs deductions) exceeds the applicable Group 2 MA protected income levels (PIL).

Here, MDHHS determined that, although Petitioner was not eligible for full-coverage MA, because he was disabled, beginning June 1, 2025, he was eligible for MA coverage under a G2S program with a \$1,455 monthly deductible. However, under federal law, an individual is entitled to the most beneficial coverage available, which is the one that results in eligibility and the least amount of excess income or the lowest cost share. BEM 105, p. 2; 42 CFR 435.404. The evidence showed that Petitioner was a parent caretaker of a minor child. Because Petitioner is the parent of a minor child, the Group 2 Caretaker/Relative (G2C) MA program would provide the lowest deductible and, as such, is the most beneficial Group 2 deductible program Petitioner is eligible for. BEM 105, p. 2; BEM 135 (October 2015), p. 1. Because MDHHS did not consider Petitioner's MA eligibility for G2C coverage, MDHHS did not act in accordance with Department policy.

25-018061

MSP Coverage

The Department testified that Petitioner was eligible for MSP coverage under the SLMB category. MSP is a State-administered, SSI-related Medicaid program in which the State may pay an income-eligible client's Medicare premiums, coinsurances, and deductibles. BEM 165 (July 2024), pp. 1-2; BAM 810 (June 2024), p. 1. There are three income-based MSP categories: (1) Qualified Medicare Beneficiaries (QMB), which pays for a client's Medicare premiums (both Part A, if any, and Part B), Medicare coinsurances and Medicare deductibles; (2) Specified Low-Income Medicare Beneficiaries (SLMB), which pays for a client's Medicare Part B premiums; and (3) Additional Low Income Medicare Beneficiaries (ALMB), which pays for a client's Medicare Part B premiums when funding is available. BEM 165, pp. 1-2. As a married individual, Petitioner has a two-person fiscal group for MSP purposes. For a two-person MA fiscal group, the income limits for each category are as follows:

	<u>Effective April 1, 2024</u>	<u>Effective April 1, 2025</u>
QMB	\$1,723.50	\$1,783.00
SLMB	\$2,064.00	\$2,135.00
ALMB	\$2,319.50	\$2,400.00

A fourth MSP category, Non-Categorically Eligible Michigan Beneficiaries (NMB), is available for individuals with income and assets above allowed ALMB limits but with full coverage MA and Medicare Part A and B. BEM 165, p. 1.

Based on Petitioner's RSDI monthly income of [REDACTED] MDHHS properly determined that Petitioner was eligible for MSP benefits under the SLMB category. The evidence presented by MDHHS showed that, in May 2025, it determined Petitioner was eligible for SLMB coverage retroactive to at least August 2024. Petitioner confirmed that he had recently received notice from the Social Security Administration (SSA) that he was being repaid for Part B Medicare premiums that had been withheld from his monthly RSDI because the State had paid SSA for those expenses. Based on the evidence presented, MDHHS established that it had resolved Petitioner's concerns regarding his MSP coverage.

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 acted in accordance with Department policy when it determined that Petitioner was eligible for MSP under the SLMB program and repaid Petitioner for Part B payments that had been withheld from his RSDI monthly benefits and did not act in accordance with Department policy when it failed to consider Petitioner's MA eligibility under G2C.

Accordingly, the Department's decision is **AFFIRMED IN PART** with respect to Petitioner's MSP eligibility and **REVERSED IN PART** with respect to Petitioner's MA eligibility.

25-018061

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. Redetermine Petitioner's MA eligibility for June 1, 2025 ongoing, taking into consideration his parent caretaker role;
2. Provide Petitioner with the most beneficial MA coverage he is eligible to receive for June 1, 2025 ongoing; and
3. Notify Petitioner in writing of its decision.

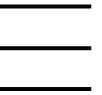

ALICE C. ELKIN
ADMINISTRATIVE LAW JUDGE

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:

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Interested Parties

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Via First Class Mail:

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[REDACTED]
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