



Date Mailed: August 5, 2025
Docket No.: 25-021342
Case No.: [REDACTED]
Petitioner: [REDACTED]

[REDACTED] MI [REDACTED]

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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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Docket No.: 25-021342

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 July 3, 2025. Petitioner was represented by [REDACTED], Authorized Hearing Representative (AHR). The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Terrel Stevens, Lead Worker.

During the hearing proceeding, the Department's Hearing Summary packet was admitted as Exhibit A, pp. 1-28.

ISSUE

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA)?

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 March 15, 2025, Petitioner submitted a redetermination for MA case number [REDACTED]. (Exhibit A, pp. 6-11)
2. The Department verified Petitioner's income from Retirement, Survivors, and Disability Insurance (RSDI) benefits was \$ [REDACTED] per month. (Exhibit A, p. 1)
3. On March 24, 2025, a Verification Checklist was issued to Petitioner for case number [REDACTED], requesting verification of vehicle value and checking account, with a due date of April 3, 2024. (Exhibit A, pp. 12-13)
4. During the redetermination processing for case number [REDACTED], the Department discovered that Medicare Savings Program (MSP) benefits were active for Petitioner under an MA-SSI case number of [REDACTED]. (Exhibit A, p. 1; Lead Worker Testimony)

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5. The MSP case under case number of [REDACTED], was closed and eligibility for ongoing MSP benefits was included in the redetermination for MA case number [REDACTED]. (Exhibit A, pp. 1 and 19-21; Lead Worker Testimony)
 6. On March 24, 2025, a Health Care Coverage Determination Notice was issued to Petitioner for case number [REDACTED], reflecting that the MSP case number has changed and there was no change in benefits at that time. The comments indicate that the MSP benefits were added to active case number [REDACTED]. (Exhibit A, pp. 19-21).
 7. On [REDACTED], Petitioner reapplied for MA and MSP benefits. (Exhibit A, p. 1)
 8. The May 8, 2025, MA application was processed under case number [REDACTED], and was denied because Petitioner already had an active MA case. (Exhibit A, p. 1; Lead Worker Testimony)
 9. On May 16, 2025, a Health Care Coverage Determination Notice was issued to Petitioner for case number [REDACTED], reflecting the denial of MSP benefits. The comments reflect that MA was denied on this case because Petitioner has another active case and he reapplied. It was also noted that MSP was requested on active case number [REDACTED]. (Exhibit A, pp. 15-18)
 10. The Department determined that Petitioner was not eligible for ongoing MSP benefits due to income in excess of program limits. (Exhibit A, p. 1; Lead Worker Testimony)
 11. The Department determined that Petitioner would have a monthly deductible of \$2,306.00 for his ongoing MA coverage. (Exhibit A, p. 14)
 12. On May 21, 2025, a Health Care Coverage Determination Notice was issued to Petitioner for case number [REDACTED] approving MA with a monthly deductible of \$2,306.00 effective June 1, 2025. The comments reflect that MSP benefits were denied because the gross income of \$ [REDACTED] exceeds the income limit for this program. (Exhibit A, pp. 22-28)
 13. On May 15, 2025, Petitioner filed a hearing request contesting the Department's actions. (Exhibit A, pp. 3-4)

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.

Persons entitled to Medicare Part A and receiving MA as a Supplemental Security Income (SSI) recipient are automatically eligible for the MSP under the Qualified Medicare Beneficiary (QMB) category. BEM 165, July 1, 2024, p. 3

For all programs, when a potential overpayment is suspected, the Department worked is to immediately correct the current benefits if necessary following the change processing requirements in BAM 220. BAM 700, June 1, 2024, pp. 5-6. No exception was found in policy for MA or MSP benefits.

An ex parte review (see glossary) is required before Medicaid closures when there is an actual or anticipated change, unless the change would result in closure due to ineligibility for all Medicaid. When possible, an ex parte review should begin at least 90 days before the anticipated change is expected to result in case closure. The review includes consideration of all MA categories; see BAM 115 and 220. BEM 165, p. 9.

The Department must periodically redetermine or renew an individual's eligibility for active programs. The redetermination/renewal process includes thorough review of all eligibility factors, BAM 210, April 1, 2025, p. 1. For MA, benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. BAM 210, p. 4. However, no MA renewal is needed for Supplemental Security Income (SSI) recipients. BAM 210, p. 4.

Petitioner also asserted that he never received a notice of the closure of benefits under case number [REDACTED]. (Petitioner Testimony). However, on March 24, 2025, a Health Care Coverage Determination Notice was issued to Petitioner for case number [REDACTED] reflecting that the MSP case number has changed and there was no change in benefits at that time. The comments indicate that the MSP benefits were added to active case number [REDACTED]. (Exhibit A, pp. 19-21).

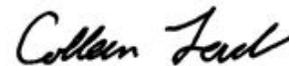
Petitioner asserted that no changes should have been made to his MSP benefits because they were under the separate MA-SSI case number of [REDACTED]. Petitioner correctly indicated that the automatic MA and MSP benefits for an SSI recipient are separate and have their own case number. Petitioner asserts that the Department improperly manually closed his MSP case under the MA-SSI case number of [REDACTED] and reconsidered his eligibility for MSP benefits under case number [REDACTED]. (Petitioner Testimony).

Regarding the closure of Petitioner's MSP benefits, the Department's actions were in accordance with Department policy. Petitioner's argument that the Department should never have touched the MA-SSI case number of [REDACTED] is not supported by policy. Pursuant to the BAM 210 policy, no MA renewal is needed for SSI recipients. BAM 210, p. 4. However, it was not contested that Petitioner was no longer an SSI recipient when the actions at issue occurred. Accordingly, Petitioner was no longer eligible for MSP benefits under the QMB category based on being a recipient for SSI. While a redetermination of Petitioner's eligibility for MSP benefits should have occurred at the time his SSI benefits ended, it appears that a system error occurred and the Department did not redetermine Petitioner's MSP eligibility at that time. Petitioner was continuing to receive MSP benefits based on being an SSI recipient when he was no longer receiving SSI was an error and potentially an overpayment of benefits. Pursuant to the BAM 700 policy, when a potential overpayment is suspected, the Department worker is to immediately correct the current benefits if necessary following the change processing requirements in BAM 220. That is what occurred in this case. While processing the redetermination for case number [REDACTED], the Department discovered that MSP benefits were active for Petitioner under an MA-SSI case number of [REDACTED]. (Exhibit A, p. 1; Lead Worker Testimony). To correct his error, it was necessary to close the MSP case under case number [REDACTED], and redetermine eligibility. Because there was already an active MA case, the eligibility for ongoing MSP benefits was properly included in the redetermination for MA case number [REDACTED]. (Exhibit A, pp. 1 and 19-21; Lead Worker Testimony). There was no evidence presented to dispute that Petitioner's income at the time of the May 21, 2025 determination exceeded program limits for ongoing MSP benefits. Therefore, the closure of Petitioner's MSP benefits once the redetermination was completed was in accordance with Department policy.

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 Petitioner's eligibility for MA.

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



COLLEEN LACK
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

MACOMB COUNTY DHHS MT CLEMENS DIST 12
44777 N GRATIOT AVE STE A
CLINTON TOWNSHIP, MI 48036
MDHHS-MACOMB-12-HEARINGS@MICHIGAN.GOV

Via First Class Mail:

Authorized Hearing Rep

[REDACTED]
[REDACTED] MI [REDACTED]

Petitioner

[REDACTED]
[REDACTED] MI [REDACTED]