



Date Mailed: August 13, 2025

Docket No.: 25-021516

Case No.: [REDACTED]

Petitioner: [REDACTED]

[REDACTED]
MI [REDACTED]

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هذه وثيقة قانونية مهمة. يرجى أن يكون هناك شخص ما يترجم المستند.

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

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

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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 August 4, 2025. Petitioner appeared and was represented by Authorized Hearing Representative (AHR) [REDACTED]. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Princess Ogundipe, Assistance Payments Supervisor.

ISSUE

Did MDHHS properly determine Petitioner's Medical Assistance/Medicaid (MA) coverage?

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.
2. On February 10, 2025, MDHHS issued a Notice of SSI-Terminated Medicaid Coverage to Petitioner, advising that he must submit a completed Healthcare Coverage Supplemental Questionnaire in order to determine his ongoing MA eligibility (Exhibit A, p. 38).
3. On March 17, 2025, MDHHS received a completed Healthcare Coverage Supplemental Questionnaire from Petitioner in which he reported that his checking account balance is \$[REDACTED]. Petitioner reported that the checking account balance is from his Social Security back pay, as of January 2024 (Exhibit A, pp. 26-29).
4. On March 19, 2025, MDHHS issued a Health Care Coverage Determination Notice to Petitioner, notifying him that he was approved for limited MA coverage under Plan First, effective April 1, 2025 (Exhibit A, pp. 10-13).
5. On May 23, 2025, MDHHS received Petitioner's timely submitted hearing request disputing the closure of his MA case (Exhibit A, pp. 6-7).

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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's MA eligibility was evaluated following the termination of his Supplemental Security Income (SSI). Petitioner reported that his checking account balance was \$ [REDACTED] from Social Security Administration (SSA) back pay, as of January 2024. MDHHS then determined that Petitioner is only eligible for limited coverage Plan First MA due to excess assets. Petitioner disputes the change to his MA coverage.

A one-time payment of accumulated non-MDHHS benefits issued to cover a retroactive period of time or to cover a future period of time. BEM 400 (March 2025), p. 18. An accumulated benefit is a one-time payment of non-Department benefits issued to cover a retroactive period of time or to cover a future period of time. BPG (June 2024), p. 1. Generally, MDHHS will treat accumulated benefits as income in the month received; however, payments that are considered excluded assets are counted as assets starting the month received. BEM 500 (April 2022), p.7. MDHHS will exclude retroactive SSA benefits for nine calendar months beginning the month after payment is received. BEM 400, p. 24. Here, Petitioner received the accumulated funds in January 2024 (see Exhibit A, pp. 32-33). When evaluating Petitioner's ongoing eligibility in April 2025, MDHHS properly considered Petitioner's current bank balance as countable assets (see Exhibit A, p. 34).

Assets are considered in determining eligibility for SSI-Related MA programs. BEM 400 (March 2025), p. 1. SSI-Related MA categories include MA benefits for people who are age 65 or older, blind, disabled, entitled to Medicare, or formerly blind or disabled. BEM 105 (January 2024), p. 1. Since Petitioner is disabled, he may be eligible for SSI-Related MA benefits. Petitioner is not married and therefore a group size of one. The SSI-related MA asset limit for a group size of one is \$2,000.00. BEM 400, p. 9. Asset eligibility exists when countable assets are less than or equal to the asset limit at least one day during the month being tested. BEM 400, p. 7. Assets include cash, personal property, and real property. BEM 400, pp. 1-2. Personal property includes currency, savings/checking accounts, funeral plans, life insurance policies, and other items. BEM 400, p. 2. MDHHS is required to verify the value of countable assets at

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application, redetermination, and when there is a reported change. BEM 400, p. 62. Here, there was no dispute that Petitioner's bank account balance exceeded the asset limit for a group size of one. Since Petitioner's assets exceeded the limit as required by policy, MDHHS properly determined that Petitioner is only eligible for limited coverage Plan First MA.

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 MDHHS acted in accordance with Department policy when it determined Petitioner's MA coverage.

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



DANIELLE NUCCIO
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.

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Via Electronic Mail:

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Petitioner

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