



**Date Mailed:** August 22, 2025

**Docket No.:** 25-022729

**Case No.:** [REDACTED]

**Petitioner:** [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 July 24, 2025. Petitioner appeared and was represented by [REDACTED] [REDACTED]. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Jodi Oneal, Hearing Facilitator and Ryan Deering AP Worker. Department Exhibit 1, pp. 1- 26 was received and admitted.

### **ISSUE**

Did the Department properly determine Petitioner's patient pay amount?

### **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 May [REDACTED] 2025, a Health Care Coverage Determination Notice was sent to Petitioner informing him that he was approved for MA-LTC with a \$[REDACTED] patient pay amount.
2. On June [REDACTED] 2025, Petitioner requested hearing disputing the patient pay amount and requesting special consideration.
3. Petitioner had a balloon payment due on July [REDACTED] 2025, for his mobile home in the amount of \$[REDACTED].
4. Petitioner's bank allowed him to make payments of approximately \$[REDACTED] in May, June and July 2025 towards his mobile home loan.

### **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

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Tables Manual (RFT), and Department of Health and Human Services Emergency Relief Manual (ERM).

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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.

### **PATIENT-PAY AMOUNT**

The post-eligibility patient-pay amount is total income minus total need. Total income is the client's countable unearned income plus his remaining earned income; see Countable Income in this item. Total need is the sum of the following when allowed by later sections of this item: • Patient allowance. • Home maintenance disregard. • Community spouse income allowance. • Family allowance. • Children's allowance. • Health insurance premiums. • Guardianship/conservator expenses. BEM 546

### **Community Spouse Income Allowance**

#### **MA Only**

The ALJ may raise the total allowance used to calculate the community spouse income allowance to an amount greater than provided for in BEM 546 to provide such additional income as is necessary due to exceptional circumstances resulting in significant financial duress. The fact that a community spouse's expenses for goods and services purchased for day-to-day living exceed the total allowance provided by policy does not constitute exceptional circumstance. Goods and services purchased for day-to-day living include: • Clothing. • Drugs. • Food. • Shelter (for example, mortgage, taxes, insurance, rent, maintenance). • Telephone. • Trash pickup. • Doctor's services. • Entertainment. • Heat. • Utilities. • Taxes. • Transportation (for example, car payments, insurance, maintenance, fuel, bus fare). Employment expenses do not constitute exceptional circumstances. An example of exceptional circumstances is the need for the community spouse to pay for supportive and medical services at home to avoid being institutionalized. Significant financial duress does not exist if the community spouse could meet expenses using their assets. This includes assets protected for the community spouse's needs as the protected spousal amount. The ALJ may also grant a greater protected spousal amount (BEM 402, Special MA Asset Rules) when necessary to raise the community spouse's income to the total allowance for the community spouse. The community spouse's income for this purpose includes the maximum amount the long-term care facility and/or hospital (L/H) client could make available to their community spouse per BEM 546. When the ALJ grants a greater amount in the above circumstances, the final decision specifies: • The amount of the protected spousal amount; see BEM 402, Special MA Asset Rules. • The total allowance in BEM 546, Post-Eligibility Patient-Pay Amounts, used for the community spouse when determining the community spouse income allowance. • The assets to be

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transferred for use by the community spouse. • When another hearing will be held to review the exceptional circumstances. If exceptional circumstances no longer exist before the case is due for the follow-up hearing, send the information to MOAHR. Be sure to include the register number of the last D&O. MOAHR will then decide whether to reschedule that hearing. BAM 600

In this case, Petitioner's community spouse allowance and patient pay amounts were calculated in accordance with Department policy. (Ex. 1, pp. 7-8) Petitioner did not dispute the calculation of the community spouse allowance of patient pay amount in his request for hearing or at hearing. Petitioner requested "special consideration" due to the balloon payment on Petitioner's mobile home loan. BAM 600 allows an ALJ to raise the total allowance used to calculate the community spouse income allowance to an amount greater than provided for in BEM 546 to provide such additional income as is necessary due to exceptional circumstances resulting in significant financial duress. Petitioner was facing significant financial duress because of the substantial balloon loan payments. However, Petitioner did not meet the criteria for "exceptional circumstances" under this policy. The policy specifically states that "The fact that a community spouse's expenses for goods and services purchased for day-to-day living exceed the total allowance provided by policy does not constitute exceptional circumstance." The example given for exceptional circumstances is that the community spouse needs medical care that would assist them in allowing them to stay in the home and additional income is needed. Petitioner does not meet the criteria under BAM 600 for raising the community spouse allowance. Therefore, the Department determination of Petitioner patient pay amount was proper and correct and consistent 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 patient pay amount.

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



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**AARON MCCLINTIC**  
**ADMINISTRATIVE LAW JUDGE**

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**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](https://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](mailto: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**  
ANTRIM COUNTY DHHS  
203 E CAYUGA ST  
PO BOX 316  
BELLAIRE, MI 49615  
**MDHHS-ANTRIM-  
HEARINGS@MICHIGAN.GOV**

**Via First Class Mail:**

**Authorized Hearing Rep**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED]