



Date Mailed: October 29, 2025
Docket No.: 25-033483
Case No.: [REDACTED]
Petitioner: [REDACTED]

[REDACTED]
MI [REDACTED]

This is an important legal document. Please have someone translate the document.

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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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; 42 CFR 438.400 to 438.424; 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 by telephone on October 9, 2025. Petitioner appeared and represented herself. The Department of Health and Human Services (Department) was represented by Avery Smith, Assistance Payments Supervisor.

The Department's 7-page hearing packet was admitted into evidence as Exhibit A.

ISSUE

Did the Department properly determine Petitioner's Medicaid (MA) 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 is [REDACTED] years old; single; receives Supplemental Security Income (SSI) of at least \$ [REDACTED] per month; receives widow's Retirement, Survivors, and Disability Insurance (RSDI) income of \$ [REDACTED] per month; has Medicare Part B; and lives in [REDACTED].
2. On [REDACTED] 2025, the Department received an application for Food Assistance Program (FAP) benefits and MA from Petitioner.
3. On August 7, 2025, the Department approved Petitioner for Plan First Family Planning (PFFP) MA effective July 1, 2025.
4. On [REDACTED] 2025, the Department received another application for MA from Petitioner.
5. On September 12, 2025, the Department received a request for hearing from Petitioner, disputing the Department's denial of her request for MA coverage. (Exhibit A, p. 3).

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 the Department's determination of her eligibility for MA. The Department approved Petitioner for PFFP MA effective July 1, 2025. At the beginning of the hearing, Petitioner clarified that her dispute was that she was not approved for another type of MA coverage.

Under federal law, an individual is entitled to the most beneficial category, which is the one that results in a) eligibility, b) the least amount of excess income, or c) the lowest cost share. BEM 105 (January 2024), p. 2. All MA category options must be considered in order for the Petitioner's right of choice to be meaningful. BEM 105, p. 2. 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. 42 CFR 435.911; 42 CFR 435.100 to 435.172; BEM 105, p. 1; BEM 137 (January 2024), p. 1; BEM 124 (July 2023), p. 1.

In this case, Petitioner testified that she receives \$ [REDACTED] per month in SSI due to her own disability, plus RSDI income of \$ [REDACTED] per month in widow's benefits. Because Petitioner receives SSI, has Medicare coverage, and is not the caretaker of a minor child, she is eligible for MA under only SSI-related categories. Based on Petitioner's circumstances, she was potentially eligible for MA for SSI Recipients (SSI-MA), AD-Care MA, or Group 2 Aged, Blind, and Disabled (G2S) MA. BEM 150 (January 2024), p. 1; BEM 163 (July 2017), p. 1; BEM 166 (April 2017), p. 1.

The Department testified that it:

- a. Received an application for MA from Petitioner on [REDACTED] 2025, and approved her for PFFP MA,

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- b. Sent Petitioner a Verification Checklist (VCL) on September 16, 2025, requesting verification of Petitioner's bank account, and
 - c. As of the date of the hearing, had approved but not certified Petitioner for G2S MA.

However, there was no evidence that the Department considered Petitioner's eligibility for SSI-MA or AD-Care MA, notified Petitioner of any determination it made regarding her eligibility for SSI-MA or AD-Care MA, or that it considered or certified her for G2S MA within the standard of promptness. BEM 115 (July 2025), pp. 15 – 16; BAM 105 (June 2025), pp. 17 – 18. Therefore, the Department failed to establish that it acted in accordance with Department policy when it determined Petitioner's MA eligibility.

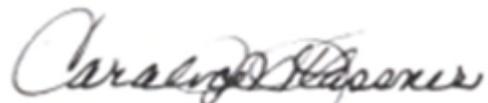
DECISION AND ORDER

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it determined Petitioner's MA eligibility effective July 1, 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. Redetermine Petitioner's MA eligibility effective July 1, 2025;
1. If eligible, provide Petitioner with the most beneficial MA coverage she was eligible to receive effective July 1, 2025; and
2. Notify Petitioner of its decision in writing.



**CARALYCE M. LASSNER
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

OAKLAND COUNTY DHHS - SOUTHFIELD DIST
25620 W 8 MILE RD
SOUTHFIELD, MI 48033

MDHHS-OAKLAND-6303-HEARINGS@MICHIGAN.GOV

Via First Class Mail:

Petitioner

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