



**Date Mailed:** December 16, 2025  
**Docket No.:** 25-037048  
**Case No.:** [REDACTED]  
**Petitioner:** [REDACTED]

[REDACTED]  
[REDACTED]  
[REDACTED]

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

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**Case No.:** [REDACTED]

**Petitioner:** [REDACTED] [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 December 3, 2025. Petitioner was represented by his Powers of Attorney [REDACTED] [REDACTED] and [REDACTED] [REDACTED]. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Tanya Turkelson, Hearings Facilitator.

### **ISSUE**

Did the Department properly close Petitioner's Medical Assistance (MA) Program benefits?

### **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 a former Supplemental Security Income (SSI) recipient.
2. Petitioner was previously an MA for SSI recipient beneficiary, but because his SSI benefits ended, his MA for SSI recipients benefit ended as well with a notice having been issued on September [REDACTED] 2025.
3. Petitioner owns a home in [REDACTED] Township with a State Equalized Value (SEV) of \$[REDACTED] but he does not live in the home.
4. On September [REDACTED] 2025, a Health Care Coverage Determination Notice (HCCDN) was issued by the Department notifying Petitioner that his Medicare Savings Program (MSP) benefits would be ending.
5. On September 26, 2025, the Department received the request for hearing on behalf of Petitioner disputing the Department's denial of MA benefits.
6. On October [REDACTED] 2025, the Department issued another HCCDN to Petitioner under a new case number informing Petitioner that he was not eligible for MA benefits because he was over the asset limit.

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## CONCLUSIONS OF LAW

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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 AHRs disputes the Department's determination of MA eligibility. 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, (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage, and (iv) to individuals who meet the eligibility criteria for Plan First Medicaid (PF-MA) coverage. 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. Under federal law, an individual eligible under more than one MA category must have eligibility determined for the category selected and 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.

Petitioner previously received MA for SSI recipients. Individuals who are Michigan residents receiving an SSI benefit are automatically eligible for MA for SSI recipients category. BEM 150 (January 2024), p. 1. However, once an SSI benefit ends, the individual is then transitioned to the MA for Terminated SSI recipients, and their eligibility is reviewed to determine placement in another category of MA if appropriate otherwise their MA benefit ends. BEM 150, p. 6. Because Petitioner's SSI benefit ended, the Department properly transferred Petitioner to the MA for SSI-terminated recipients and reviewed his eligibility under the application and information provided.

Based on the new application and information provided, the Department determined that Petitioner was over the asset limit for MSP and other disability related MA categories. Because Petitioner is age ■ and disabled, he may be eligible for a disability related MA category but all disability related MA categories have an asset test to determine eligibility. BEM 400 (March 2025), p. 7. MSP, AD-Care (the full coverage MA category for disabled individuals not in assisted living), and Group 2-Aged, Blind, Disabled (G2S) (the deductible MA category for disability related MA recipients over the

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income limit for AD-Care) have an asset limit of \$9,660.00 for a group size of one effective February 1, 2025. BEM 400 (March 2025), p. 8. In disability related MA cases, the value of real property is the fair market value as shown by a deed, mortgage, purchase agreement, SEV on current property taxes multiplied by two, a statement of a real estate agent or financial institution, attorney or court records, and county records. BEM 400, p. 34. In SSI-related MA cases, only one homestead can be excluded in consideration of total assets. BEM 400, p. 36. If more than one home is owned, only the principal place of residence is excluded. *Id.* A homestead is defined as the place where a person lives that they own, are buying, or hold through a life estate. *Id.* It includes the land on which the home is located and any other related buildings on the adjoining land. *Id.*

Petitioner owns a home but does not live there. Therefore, it cannot be considered a homestead and must be counted to determine Petitioner's asset eligibility. The home has an SEV of \$[REDACTED]. Although Petitioner's AHRs testified that the home is in severe disrepair and unlivable, there is no other evidence available at this time to estimate the home's value. Therefore, the SEV multiplied by 2 is considered the fair market value of the home, \$[REDACTED]. Petitioner is over the asset limit and ineligible for MA benefits.

### **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 denied Petitioner's application for MA benefits based on excess assets.

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



**AMANDA MARLER**  
**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](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://irs.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.

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**Via Electronic Mail:**

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**Petitioner**  
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**Authorized Hearing Rep**  
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