

**DEPARTMENT  
POLICY**

This is a Group 2 Medicaid (MA) category.

Medicaid is available to a person who is under age 21 and meets the eligibility factors in this item. All eligibility factors must be met in the calendar month being tested.

If the month being tested is an L/H month and eligibility exists, go to BEM 546 to determine the post-eligibility patient-pay amount.

**NONFINANCIAL  
ELIGIBILITY  
FACTORS**

The person must be under age 21 (BEM 240, Age). The Medicaid eligibility factors in the following items must be met.

- BEM 220, Residence.
- BEM 221, Identity.
- BEM 223, Social Security Numbers.
- BEM 225, Citizenship/Alien Status.
- BEM 255, Child Support.
- BEM 256, Spousal/Parental Support.
- BEM 257, Third Party Resource Liability.
- BEM 265, Institutional Status.
- BEM 270, Pursuit of Benefits.

**AGE**

Consider eligibility for all other Medicaid categories when a person reaches age 21 or otherwise becomes ineligible for this category.

**Note:** 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.

**FINANCIAL  
ELIGIBILITY  
FACTORS****Groups**

Use the fiscal group policies for Group 2 Medicaid in BEM 211.

**Assets**

Countable assets cannot exceed the asset limit in BEM 400. Countable assets are determined using BEM 400 and BEM 401.

**Divestment**

Policy in BEM 405 applies because income may be divested.

**Income Eligibility**

Income eligibility exists when net income does not exceed the Group 2 needs in BEM 544. Apply the Medicaid policies in BEM 500, 530 and 536 to determine net income.

If the net income exceeds Group 2 needs, Medicaid eligibility is still possible. See BEM 545.

**VERIFICATION  
REQUIREMENTS**

Verification requirements for all eligibility factors are in the appropriate manual items.

**LEGAL BASE****MA**

42 CFR 435.308.

MCL 400.106.

Deficit Reduction Act of 2005.

**JOINT POLICY  
DEVELOPMENT**

*Medicaid, Transitional Medical Assistance (TMA), and Maternity Outpatient Medical Services (MOMS) policy has been developed jointly by the Department of Community Health (DCH) and the Department of Human Services (DHS).*