

**STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
FOR THE DEPARTMENT OF COMMUNITY HEALTH**

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IN THE MATTER OF:

██████████,

Appellant

_____ /

Docket No. 2011-23891 HHS
Case No. ██████████

DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 42 CFR 431.200 *et seq.*, upon the Appellant's request for a hearing.

After due notice, a hearing was held on ██████████. ██████████, appeared on the Appellant's behalf. ██████████ appeared. ██████████ represented the Department. ██████████, was present as a Department witness.

ISSUE

Did the Department properly deny the Appellant's Home Help Services application?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

1. On ██████████, the Appellant was referred for the Home Help Services Program by a translator at her local Department of Human Services (DHS) office in Oakland County. (Exhibit 1, page 10)
2. At the time of the referral, the Home Help Services program workers were located in the same DHS office as the translator. (ASW Testimony)
3. The Appellant moved twice within a few months of the referral to the Home Help Services program. First to a new address in Oakland County, then to another address in Macomb County. (Uncontested)
4. The Appellant's moves were reported to a translator at an Oakland County Department of Human Services (DHS) office. (Son Testimony)

5. The local DHS office in Oakland County where the Appellant's Home Help Services case was underway moved and the Home Help Services Program workers are no longer in the same office with all of the other Oakland county DHS staff from that local DHS office, including the translator. (ASW Testimony)
6. The ASW saw the updated addresses in the DHS computer system, but was able to confirm the Appellant's third address to schedule the required home visit to assess the Appellant for Home Help Services. (ASW Testimony)
7. Once she moved to Macomb County, a local DHS office in Macomb County would handle the Appellant's request for Home Help Services. (ASW Testimony)
8. On ██████████, the ASW issued an Advance Negative Action Notice to the Appellant indicating her Home Help Services application was denied because she was unable to confirm the Appellant's current address. (Exhibit 1, pages 5-8)
9. On ██████████, the Appellant's Request for Hearing was received. (Exhibit 1, page 4)

CONCLUSIONS OF LAW

The Medical Assistance Program is established pursuant to Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). It is administered in accordance with state statute, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program.

Home Help Services (HHS) are provided to enable functionally limited individuals to live independently and receive care in the least restrictive, preferred settings. These activities must be certified by a health professional and may be provided by individuals or by private or public agencies.

Adult Services Manual (ASM 363) 9-1-2008, addresses when Home Help Services can be authorized:

APPLICATION FOR SERVICES

The client must sign the DHS-390, Adult Services Application (RFF 390) to receive independent living services. An authorized representative or other person acting for the client may sign the DHS-390, **if** the client:

- Is incapacitated.
- Has been determined incompetent.
- Has an emergency.

A client unable to write may sign with an "X" witnessed by one other person (e.g. relative or department staff). Adult services workers must not sign the DHS-390 on behalf of the client.

The ILS specialist must determine eligibility within the 45 day standard of promptness which begins from the time the referral is registered on the computer system. The computer system calculates the 45 days beginning the day after the referral date and counting 45 calendar days. If the due date falls on a weekend or holiday, the due date is the next business day. A referral may be received by phone, mail or in person and must be registered on the computer timely.

Note: When a signed DHS-390, Adult Services Application serves as the initial request for services, the registration date must be the date the DHS-390 was received in the local office.

The DHS-390 remains valid **unless** the case record is closed for more than 90 days.

COMPREHENSIVE ASSESSMENT

The Adult Services Comprehensive Assessment (FIA-324) is the primary tool for determining need for services. The comprehensive assessment will be completed on all open cases, whether a home help payment will be made or not. ASCAP, the automated workload management system provides the format for the comprehensive assessment and all information will be entered on the computer program.

Requirements for the comprehensive assessment include, but are not limited to:

- A comprehensive assessment will be completed on all new cases.
- A face-to-face contact is required with the client in his/her place of residence.
- An interview must be conducted with the caregiver, if applicable.
- Observe a copy of the client's social security card.
- Observe a picture I.D. of the caregiver, if applicable.
- The assessment must be updated as often as necessary, but minimally at the six-month review and annual redetermination.
- A release of information must be obtained when

Docket No. 2011-23891 HHS
Hearing Decision & Order

- requesting documentation from confidential sources and/or sharing information from the department record.
- Follow specialized rules of confidentiality when ILS cases have companion APS cases.

Adult Services Manual (ASM 363), 9-1-2008 Pages 1 – 2

In the present case, the Appellant was referred to the Home Help Services on [REDACTED] by a translator at her local DHS office in Oakland County. (Exhibit 1, page 10) It is uncontested that the Appellant was living in Oakland County at the time of the referral and that she moved twice within a few months of the referral. The Appellant's first move was to a new address in Oakland County. The Appellant then moved to an address in Macomb County. The Appellant's son's credibly testified that the address changes were reported to the translator at the Oakland County DHS office. This is supported by the ASW's testimony that she discovered the address changes in the DHS computer system. However, during this same time frame the local DHS office also moved. Further, the Home Help Services program staff relocated to a different office than other DHS staff from that office, including the translator. The ASW was unable to confirm the Appellant's third and current address in Macomb County because the phone number on record for the Appellant was disconnected and she was no longer in the same DHS office as the translator. Without being able to confirm the address, and because it was in a different county, the ASW was unable to schedule the required home visit to complete the eligibility determination process. (ASW Testimony)

Department policy imposes a 45 day standard of promptness for determining eligibility, which begins from the time the referral is registered on the computer system. The above cited policy clearly requires a home visit as part of completing a comprehensive assessment on all new cases to determine the need for services. The ASW was unable to schedule the required home visit because she could not confirm the Appellant's address and because the Macomb County DHS office would handle the Appellant's Home Help Services program needs once she moved to that county.

Upon review of the evidence in this case, it is clear that both the DHS office move and the Appellant's moves, particularly her move to Macomb County, prevented the ASW from completing the eligibility determination process for the Appellant's Home Help Services application. The ASW was unable to schedule the required home visit to complete a comprehensive assessment and determine eligibility for the Home Help Services Program. Accordingly the denial of her Home Help Services application must be upheld.

If she has not already done so, the Appellant may wish to re-apply for Home Help Services at the local DHS office in Macomb County.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly denied the Appellant's Home Help Services application.

IT IS THEREFORE ORDERED that:

The Department's decision is AFFIRMED.

Colleen Lack
Administrative Law Judge
for Olga Dazzo, Director
Michigan Department of Community Health

cc:



Date Mailed: 6/1/2011

***** NOTICE *****

The Michigan Administrative Hearing System may order a rehearing on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. The Michigan Administrative Hearing System will not order a rehearing on the Department's motion where the final decision or rehearing cannot be implemented within 90 days of the filing of the original request. The Appellant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt of the rehearing decision.