

STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
FOR THE DEPARTMENT OF COMMUNITY HEALTH
P.O. Box 30763, Lansing, MI 48909
(877) 833-0870; Fax: (517) 334-9505

IN THE MATTER OF:

██████████,

Appellant

Docket No. 2012-15932 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 ██████████. The Appellant appeared without representation. Her witnesses were from ██████████, on-site Supervisor and ██████████ Chief of Operations. ██████████ Appeals Review Officer, represented the Department. Her witness was ██████████ ASW.

ISSUE

Did the Department properly reduce the Appellant's Home Help Services (HHS)?

FINDINGS OF FACT

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

1. The Appellant is a disabled ██████-year old Medicaid beneficiary. (Appellant's Exhibit #1)
2. The Appellant alleges disability and the need for HHS owing to the afflictions of hypothyroidism, CAD, HTN, and a "blood condition" – the Appellant receives some form of assistance from CMH. (See Testimony and Department's Exhibit A, page 10)
3. The Appellant said that the reduction in HHS did not leave enough time to find transportation to her medical appointments. (See Testimony)

4. The Department's representative testified that she observed the Appellant as able to prepare light meals or eat out or utilize Meals on Wheels. (See Testimony and Department's Exhibit A, page 8)
5. The Department witness testified that she made contact with the Appellant on ██████████, for an in-home assessment. While there, the ASW explained to the Appellant that the HHS program did not cover transportation to medical appointments. (See Testimony Department's Exhibit A, page 8)
6. The Appellant's witnesses said that as providers they did some extra services for the Appellant while she was in a hardship status. (See Testimony of ██████████)
7. Department witness, ASW ██████████, sent the Appellant a "Negative Action" letter on ██████████, reducing services effective ██████████. (Department's Exhibit A, pages 2, 5)
8. The Appellant's further appeal rights were contained in the "Negative Action" letter.
9. The request for hearing on the instant appeal was received by the Michigan Administrative Hearing System for the Department of Community Health on ██████████. (Appellant's Exhibit #1)

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 medical professional.

COMPREHENSIVE ASSESSMENT

The DHS-324, Adult Services Comprehensive Assessment is the primary tool for determining need for services. The comprehensive assessment must be completed on all open independent living services cases. ASCAP, the automated workload management system, provides the format for the comprehensive assessment and all information must 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.
- The assessment may also include an interview with the individual who will be providing home help services.
- A new face-to-face assessment is required if there is a request for an increase in services before payment is authorized.
- A face-to-face assessment is required on all transfer-in cases before a payment is authorized.
- 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 requesting documentation from confidential sources and/or sharing information from the department record.

....

(Emphasis supplied)

Adult Service Manual (ASM), §120, page 1 of 6,
11-1-2011.

The Department witness testified that on in-home assessment she discovered the Appellant had been using her meal preparation allowance as a transportation subsidy to go attend to her many medical appointments. The ASW explained to the Appellant and the provider that the HHS program did not cover transportation.

The Appellant explained that while she was grateful for the continued assistance with meals – that due to dizziness she is unable to prepare much in the way of food.

On review since the only reduction in HHS was for the chore of meal preparation because the Appellant utilized that allotment of time for attention to non-covered medical details the reduction was both reasonable and appropriate at the time it was rendered.

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It is the province of the ASW to determine the extent of need for services; the ASM requires a periodic in-home, comprehensive assessment of HHS recipients. Based on her review the Appellant remained eligible for the HHS program – but with a reduced time and task allotment.

Since the Appellant freely acknowledged her use of HHS for non-covered transportation she has failed to preponderate her burden of proof that the Department erred in reducing her HHS, because at the time of assessment she demonstrated no greater need for assistance. However, if the Appellant's dizziness is a new or aggravated medical condition she should alert her ASW of this change in condition and seek reassessment.

Transportation is not a covered service under HHS policy.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly reduced the Appellant's HHS.

IT IS THEREFORE ORDERED that:

The Department's decision is **AFFIRMED**.

Dale Malewska
Administrative Law Judge
for Olga Dazzo, Director
Michigan Department of Community Health

cc:



Date Mailed: 3/16/2012

***** 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.