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

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IN THE MAT	ITER OF:		
	,	Docket No. Case No.	2013-22342 HHS
Appel	llant.		
DECISION AND ORDER			
This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 42 CFR 431.200 <i>et seq.</i> , and upon the Appellant's request for a hearing.			
on his own had Appellant's in Appellant. Community	mother; , Appellant's s gram Director at , Appeals_Review C	pellant's Case Mar step-father; ; also appea officer, represente ervices Worker (A	; and ared as witnesses for d the Department of SW) at the
ISSUE			
Did the Department properly determine that Appellant's Home Help Services (HHS) should be reduced?			
FINDINGS (OF FACT		
	strative Law Judge, based upon the whole record, finds as material t	•	terial and substantial
1.	Appellant is a year-old Medical as a C4 quadriplegic. (Responden	id beneficiary who t's Exhibit A, page	has been diagnosed 25).
2.	Appellant has been receiving Expa and 1 minute per month, with a t (Respondent's Exhibit A, page 20;	otal care cost of	per month.
3.	Appellant also receives services the (Testimony of Appellant).	nrough	County Mental Health.

With respect to HHS, Appellant is ranked as a "5" and as totally dependent

4.

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in all areas where he receives assistance. (Respondent's Exhibit A, page 17). Specifically, HHS was authorized for assistance with bathing, grooming, dressing, transferring, eating, housework, laundry, shopping, meal preparation, catheters or leg bags, range of motion exercises, bowel program, and specialized skin care. (Respondent's Exhibit A, page 20).

- 5. Appellant's HHS have remained the same since Appellant; Testimony of ASW (Testimony of ASW).
- 6. On conducted a home visit and reassessment of Appellant's services. Both Appellant and one of his care providers were present during that visit. (Respondent's Exhibit A, pages 9-16).
- 7. Between and and ASW telephoned Appellant's other care providers and spoke with some of them. (Respondent's Exhibit A, pages 11-16; Testimony of ASW).
- 8. Based on the reports of Appellant and the care providers; his own observations; and the applicable policy; ASW f decided to change Appellant's services and reduce them overall. (Respondent's Exhibit A, pages 9-10; Testimony of ASW).
- 9. Specifically, ASW decided to reduce the assistance authorized for bathing, grooming, dressing, transferring, eating, and catheters/leg bags. ASW also decided to increase the assistance authorized for range of motion exercises and add assistance with taking medications. The assistance for all other tasks would remain the same. (Respondent's Exhibit A, pages 20-21).
- 10. Overall, Appellant's HHS were to be reduced to 237 hours and 50 minutes per month, with a care cost of \$ per month. (Respondent's Exhibit A, page 21).
- 11. On Appellant that his HHS would be reduced on (Respondent's Exhibit A, pages 5-8).
- 12. On ______, the Michigan Administrative Hearing System (MAHS) received a request for hearing filed by Appellant. (Respondent's Exhibit A, page 4).
- 13. Appellant's services have remained in place while his appeal is pending. (Testimony of Appellant; Testimony of ASW
- 14. On MAHS sent out notice of a telephone hearing scheduled for

- 15. On Appellant requested an in-person hearing.
- 16. On MAHS sent out notice of an in-person hearing scheduled for
- 17. The in-person hearing was held on

CONCLUSIONS OF LAW

As a preliminary matter, this Administrative Law Judge would note that a number of new issues have arisen in this case after the notice of reduction was sent and the appeal filed. For example, the Department has discovered that Appellant's care providers are not enrolled providers and are not being paid at the proper rate. The Department has also learned that, while Appellant has been receiving Expanded HHS at the same amount since it has no record of any authorization for that amount of services and the services have not been reassessed or re-approved as frequently as required by policy. Moreover, while Appellant was only requesting that his services remain the same at the time of the reassessment and in his request for hearing, he has learned more about HHS during the course of his preparation for the hearing and now believes additional services should be approved.

However, this ALJ only has jurisdiction to hear matters related to a denial, reduction, termination, or suspension of a Medicaid covered service¹ and must review that negative action in light of the information the Department had at the time it made its decision. Accordingly, the issues that have arisen since the notice of denial and appeal will not be considered in this decision and order. While the Department now has other grounds that could possibly justify further changes to HHS, including a suspension of all services, it has not acted on those other grounds. Likewise, while Appellant now seeks additional services, he did not request them from the Department. To the extent Appellant plans to request more services or the Department plans to take another negative action in the future, they are free to do so. This Administrative Law Judge will only review the actual reduction that has been proposed by the Department and appealed by Appellant.

With respect to that decision, Adult Services Manual 101 (11-1-2011) (hereinafter "ASM 101") and Adult Services Manual 120 (5-1-2012) (hereinafter "ASM 120") address the issues of what services are included in Home Help Services and how such services are assessed. In part, ASM 101 provides:

Home Help Payment Services

Home Help Services are non-specialized personal care service activities provided under the independent living

¹ See the Code of Federal Regulations: 42 CFR 431.200 et seq. and 42 CFR 438.400 et seq.

services program to persons who meet eligibility requirements.

Home Help Services are provided to enable individuals with functional limitation(s), resulting from a medical or physical disability or cognitive impairment to live independently and receive care in the least restrictive, preferred settings.

Home Help Services are defined as those tasks which the department is paying for through Title XIX (Medicaid) funds. These services are furnished to individuals who are **not** currently residing in a hospital, nursing facility, licensed foster care home/home for the aged, Intermediate Care Facility (ICF) for persons with developmental disabilities or institution for mental illness.

These activities must be certified by a Medicaid enrolled medical professional and may be provided by individuals or by private or public agencies. The medical professional does not prescribe or authorize personal care services. Needed services are determined by the comprehensive assessment conducted by the adult services specialist.

Personal care services which are eligible for Title XIX funding are limited to:

Activities of Daily Living (ADL)

- Eating.
- Toileting.
- Bathing.
- Grooming.
- Dressing.
- Transferring.
- Mobility.

Instrumental Activities of Daily Living (IADL)

- Taking medication.
- Meal preparation/cleanup.
- Shopping for food and other necessities of daily living.
- Laundry.
- Housework.

An individual must be assessed with at least one Activity of Daily Living (ADL) in order to be eligible to receive home help services.

Note: If the assessment determines a need for an ADL at a level 3 or greater but these services are not paid for by the department, the individual would be eligible to receive IADL services.

Example: Ms. Smith is assessed at a level 4 for bathing however she refuses to receive assistance. Ms. Smith would be eligible to receive assistance with IADL's if the assessment determines a need at a level 3 or greater. [ASM 101, pages 1-2 of 4.]

Moreover, ASM 120 states:

Functional Assessment

The **Functional Assessment** module of the **ASCAP** comprehensive assessment is the basis for service planning and for the home help services payment.

Conduct a functional assessment to determine the client's ability to perform the following activities:

Activities of Daily Living (ADL)

- Eating
- Toileting
- Bathing
- Grooming
- Dressing
- Transferring
- Mobility

Instrumental Activities of Daily Living (IADL)

- Taking Medication
- Meal Preparation and Cleanup
- Shopping
- Laundry
- Light Housework

Functional Scale

ADLs and IADLs are assessed according to the following five-point scale:

- 1. Independent: Performs the activity safely with no human assistance.
- 2. Verbal Assistance: Performs the activity with verbal assistance such as reminding, guiding or encouraging.
- 3. Some Human Assistance: Performs the activity with some direct physical assistance and/or assistive technology.
- 4. Much Human Assistance: Performs the activity with a great deal of human assistance and/or assistive technology.
- 5. Dependent: Does not perform the activity even with human assistance and/or assistive technology.

Home Help payments may only be authorized for needs assessed at the 3 level or greater.

An individual must be assessed with at least one Activity of Daily Living in order to be eligible to receive Home Help Services.

Note: If the assessment determines a need for an ADL at a level 3 or greater but these services are not paid for by the department, the individual would be eligible to receive IADL Services.

Example: Ms. Smith is assessed at a level 4 for bathing however she refuses to receive assistance. Ms. Smith would be eligible to receive assistance with IADL's if the assessment determines a need at a level 3 or greater. See ASM 121, Functional Assessment Definitions and Ranks for a description of the rankings for Activities of Daily Living and Instrumental Activities of Daily Living. [ASM 120, pages 2-3 of 5.]

Here, as discussed above, while Appellant's HHS went through a number of changes and may go through further changes in the future, this Administrative Law Judge is limited to reviewing the actual reductions that have been proposed by the Department and appealed by Appellant. Those proposed reductions includes reductions to the assistance authorized for bathing, grooming, dressing, transferring, eating, and catheters/leg bags.

Each disputed task will be addressed in turn. Appellant bears the burden of proving by a preponderance of the evidence that the Department erred in deciding to reduce those services.

For the reasons discussed below, this Administrative Law Judge finds that, while some of the proposed reductions appear proper, the Department erred in deciding to reduce Appellant's HHS and its decision as a whole must be reversed.

Bathing

HHS for bathing are to be reduced from 45 minutes a day, 7 days a week, to 30 minutes a day, 7 days a week. (Respondent's Exhibit A, pages 20-21).

ASW testimony and notes on his decision provide that he made that reduction after speaking with Appellant and the care providers. (Respondent's Exhibit A, page 9; Testimony of conversations document Appellant as reporting that sponge baths take 30-45 minutes a day and the only provider who discussed bathing as reporting that the task takes 1.5 to 2 hours a day. (Respondent's Exhibit A, pages 11-13).

In response, Appellant testified that bathing takes at least an hour and that 1 hour is the amount of time he reported to ASW . (Testimony of Appellant). Appellant also testified that, while no further time was awarded, they also discussed Appellant's need for assistance getting in-and-out of the tub and the other preparation the care providers must make, such as getting a basin of water and towels. (Testimony of Appellant).

Bathing is specifically discussed in Adult Services Manual 121 (11-1-2011) (hereinafter "ASM 121"), pages 1-2 of 4. As provided in that manual:

Bathing - helping with cleaning the body or parts of the body using a tub, shower or sponge bath; including getting a basin of water, managing faucets, soaping, rinsing and drying. helping shampoo hair.

- 1 No assistance required.
- 2 Bathes self with direction or intermittent monitoring. May need reminding to maintain personal hygiene.
- Minimal hands-on assistance or assistive technology required to carry out task. Generally bathes self but needs some assistance with cleaning hard to reach areas; getting in/out of tub/shower. Client is able to sponge bath but another person must bring water, soap, towel. Client relies on a bath or transfer bench when bathing. The constant presence of another is not required.

- 4 Requires direct hand- on assistance with most aspects of bathing. Would be at risk if left alone.
- 5 Totally dependent on others in all areas of bathing.

Given the above policy and evidence, this Administrative Law Judge finds that the Department improperly decided to reduce Appellant's HHS with respect to bathing assistance. It is undisputed that Appellant is totally dependent on others in all areas of bathing and the ASW erred by focusing solely on the sponge bathing itself. Appellant credibly testified as to what he needs and reported during the home visit with respect to bathing and, even if the ASW's notes and testimony are correct as to what he was told, ASW could not explain why he disregarded what provider said and gave the low end of what Appellant purportedly reported.

Grooming

The HHS authorized for assistance with grooming was to be reduced from 43 minutes a day, 7 days a week (21 hours and 34 minutes per month), to 4 hours and 26 minutes a month. (Respondent's Exhibit A, pages 20-21).

According to ASW , he authorized grooming in the amount Appellant indicated he needed and as reflected by the worker's notes. (Testimony of ASW). In his notes discussing the reduction, ASW states that Appellant needs assistance with shaving 4 times a week and that such assistance takes 5 minutes each time. His notes also state that Appellant needs help brushing his teeth everyday and that such assistance also takes 5 minutes a day. ASW also documented Appellant as needing 31 minutes a month for assistance with brushing his hair and, while he did not authorize any time for such assistance, needing assistance with clipping his fingernails and toenails. (Respondent's Exhibit A, page 9).

However, ASW own notes regarding the home visit provide that Appellant needs at least 16 minutes a day for grooming: 5 minutes for shaving; 10 minutes for brushing teeth; and 1 minute for brushing hair. (Respondent's Exhibit A, page 15).

Appellant testified that it takes 10 minutes to shave him everyday, and 5 minutes and 30 seconds to brush his teeth, which happens twice a day. (Testimony of Appellant). Appellant agreed with the ASW's findings regarding brushing his hair and also testified as to a need for assistance with his fingernails and toenails approximately twice a month. (Testimony of Appellant).

Given the above evidence, it is clear that an error was made. While it appears ASW intended to approve 10 minutes a day for assistance with brushing teeth as well as assistance with shaving everyday, he ultimately did not do so. Similarly, while the ASW noted a need for assistance with cutting fingernails and toe nails, he did not authorize any time for such assistance. ASW could not explain the inconsistency between his notes and what was authorized. (Testimony of ASW

). He also agreed that he intended to approve 10 minutes a day for assistance with brushing teeth, 5 minutes a day for assistance with shaving, 1 minute a day for assistance with brushing hair, and at least some monthly assistance for help with fingernails and toenails. (Testimony of ASW

While an error was made, it appears that some reduction may be appropriate. If ASW had approved services as he intended, then he would have only authorized 16 minutes of assistance everyday and the occasional assistance with fingernails and toenails. Moreover, even if Appellant's testimony regarding what he needs and reported during the assessment is completely accepted, he would only require 23 minutes of grooming assistance everyday and occasional assistance with fingernails and toenails rather than the 43 minutes a day, 7 days a week, he was previously receiving.

Nevertheless, given the error made by the Department and the questions remaining regarding how much of a reduction, if any is proper, the Department clearly erred in its decision with respect to grooming.

Dressing

Appellant's HHS with respect to dressing are to be reduced from 52 minutes a day, 7 days a week, to 20 minutes a day, 7 days a week. (Respondent's Exhibit A, pages 20-21).

ASW notes and testimony provide that the reduction is based on Appellant's reports that he gets dressed in the morning and undressed at night, and that it takes 10 minutes each time. (Respondent's Exhibit A, pages 9, 15; Testimony of a supply 10.)

In response, Appellant testified that he reported during the home visit that it takes 15 to 20 minutes to get dressed in the morning and around 10 minutes to get undressed at night. (Testimony of Appellant). Appellant also testified that he requires additional dressing assistance during the day, including putting more clothes on when he is cold and taking clothes off when he is hot. (Testimony of Appellant).

With respect to dressing, ASM 121, page 2 of 4, provides:

Dressing - Putting on and taking off garments; fastening and unfastening garments/undergarments, assisting with special devices such as back or leg braces, elastic stockings/garments and artificial limbs or splints.

- 1 No assistance required.
- 2 Client is able to dress self but requires reminding or direction in clothing selection.
- 3 Minimal hands-on assistance or assistive technology required. Client unable to dress self completely (i.e.

tying shoes, zipping, buttoning) without the help of another person or assistive device.

- 4 Requires direct hands on assistance with most aspects of dressing. Without assistance would be inappropriately or inadequately dressed.
- 5 Totally dependent on others in all areas of dressing.

Appellant correctly notes he is totally dependent in dressing and that dressing assistance should encompass all his needs with that task. However, given Appellant's own testimony, it appears he was getting too much HHS with respect to dressing and does not require 52 minutes per day. Accordingly, a reduction is appropriate. Moreover, with respect to the amount of that reduction, this Administrative Law Judge finds ASW notes and testimony to be credible regarding what he was told during the home visit and the Department is justified in relying on Appellant's reports.

Transferring

The HHS authorized for assistance with transferring are to be reduced from 1 hour a day, 7 days a week, to 47 minutes a day, 7 days a week. (Respondent's Exhibit A, pages 20-21).

ASW found that Appellant gets transferred twice a day (from his bed to a chair in the morning and from the chair to his bed at night) every other day and four times a day (from his bed to a chair in morning, from the chair at start of bowel program, to the chair at end of bowel program, and from the chair to his bed at the end of night) on the other days. ASW also documented that one provider reported that it takes 10 minutes a transfer while Appellant and another provider state that it takes 15-20 minutes a transfer. In averaging those times, ASW authorized 47 minutes a day for assistance with transferring. That approval is based on 15 minutes for each transfer, which is an average of the times reported, and takes into account a need for 1 hour of transferring assistance on days with the bowel program (4 times a week) and 30 minutes for days without bowel program (3 times a week). (Respondent's Exhibit A, pages 9-15).

Appellant testified that transfers usually take more than 15 minutes for each transfer and that he has other transferring needs that were not taken into account. Specifically, Appellant notes that he needs to be turned over during the night and reposition throughout the day because of his spasms. Appellant also testified he needs assistance with being transferred to-and-from a recliner on weekends. (Testimony of Appellant).

With respect to transferring, ASM 121, page 2 of 4, provides:

Transferring - Moving from one sitting or lying position to another. Assistance from the bed or wheelchair to the sofa,

coming to a standing position and/or repositioning to prevent skin breakdown.

- 1 No assistance required.
- 2 Client is able to transfer but requires encouragement or direction.
- 3 Minimal hands-on assistance needed from another person for routine boosts or positioning. Client unable to routinely transfer without the help of another or assistive technology such as a lift chair.
- 4 Requires direct hands-on assistance with most aspects of transferring. Would be at risk if unassisted.
- Totally dependent on others for all transfers. Must be lifted or mechanically transferred.

Here, regarding the time necessary for each transfer, this Administrative Law Judge finds that ASW credibly and appropriately merged conflicting reports regarding the time required for each transfer. Both the ASW and Appellant testified that Appellant reported that it took more than 15 minutes for each transfer, but ASW also properly took into account a provider's reports that it took less time and only authorized 15 minutes for each transfer. With respect to the number of transfers, this Administrative Law Judge also finds the Department's determination to be appropriate. ASW and Appellant's reports.

Eating

Appellant's HHS with respect to eating are to be reduced from 1 hour and 30 minutes a day, 7 days a week, to 1 hour and 10 minutes a day, 7 days a week. (Respondent's Exhibit A, pages 20-21).

According to ASW notes, Appellant estimated a need for 30 minutes of assistance per meal while one provider reported 20 minutes of assistance per meal. Accordingly, the ASW averaged those two times and found a need for 25 minutes of assistance per meal. (Respondent's Exhibit A, pages 9, 11, 15).

ASW testimony confirms how and why he arrived at 25 minutes of eating assistance per meal, but the testimony is less clear on how he ultimately authorized 1 hour and 30 minutes of eating assistance per day. At first, ASW testified that he based the approval on Appellant having three meals a day and snacks. However, he

² Another provider reported helping with eating, but no specific time for assistance was identified in the notes. (Respondent's Exhibit A, page 12).

later testified that he did not take snacks into account and just based the authorization on 3 meals a day. He further testified that he assumed that Appellant and his providers knew that he was asking about all eating assistance, including water and snacks, when they reported the specific times of assistance. (Testimony of

According to Appellant, he needs and reported a need for at least 30-45 minutes of assistance per meal and that he has at least 3 meals a day. Appellant also testified that he needs assistance with drinking throughout the day, but that the assistance with drinking was not asked about or discussed during the home. Appellant further testified that he did report a need for at least 5-10 minutes of assistance per snack. (Testimony of Appellant).

With respect to eating, ASM 121, page 1 of 4, provides:

Eating - helping with the use of utensils, cup/glass, getting food/drink to mouth, cutting up/manipulating food on plate, swallowing foods and liquids, cleaning face and hands after a meal.

- 1 No assistance required.
- 2 Verbal assistance or prompting required. Client must be prompted or reminded to eat.
- Minimal hands-on assistance or assistive technology needed. Help with cutting up food or pushing food within reach; help with applying assistive devices. The constant presence of another person is not required.
- 4 Moderate hands-on assistance required. Client has some ability to feed self but is unable to hold utensils, cup, glass and requires the constant presence of another person while eating.
- 5 Totally dependent on others in all areas of eating.

Given the above policy and evidence, this Administrative Law Judge finds that the Department's decision with respect to eating assistance should be reversed. It is undisputed that an error was made. While ASW testified and noted that he ultimately wanted to authorize 25 minutes of eating assistance per meal and that Appellant has 3 meals a day, he did not even approve that amount, which would be 1 hour and 15 minutes per day. Moreover, Appellant is totally dependent on others in all areas of eating and, as acknowledged by ASW during the hearing, HHS should not be limited to 3 meals and Appellant reported more assistance than just with 3 meals. Appellant requires assistance with snacks during the day and drinking water throughout the day. Accordingly, given Appellant's total dependence; his need for

assistance beyond 3 meals a day; and ASW undisputed math error; the Department's decision must be reversed.

Catheters or Leg Bags

The HHS authorized for assistance with Appellant's catheters and leg bags are to be reduced from 2 hours a day, 7 days a week (60 hours and 12 minutes a month) to 24 hours a month. (Respondent's Exhibit A, pages 20-21).

According to ASW , he based that authorization on the reports regarding Appellant's daily and monthly needs with assistance with his catheters and leg bags. Specifically, ASW found that Appellant needs his catheter tube cleaned and inserted twice a day and that doing so takes 5 minutes each time, for a total of 10 minutes per day. Appellant also needs his leg bags cleaned and changed twice a day. As one provider reported it takes 15 minutes to change and clean a bag while Appellant reported it takes 20 minutes, ASW took into account both of those times and found it takes 15 minutes to change the morning bag and 20 minutes to change the night bag, for a total of 35 minutes each day. Additionally, ASW on what he documented Appellant as reporting, that Appellant also needs his catheter changed every three weeks and that it takes 20-30 minutes to do so. ASW therefore authorized another 30 minutes per month. In total, the 10 minutes a day for assistance with the tube, the 35 minutes a day for assistance with the bags and the 30 minutes a month for assistance with the catheter came to 24 hours of assistance per month. (Respondent's Exhibit A, pages 10-15; Testimony of ASW

In response, Appellant testified that, in addition to the need for assistance identified by ASW ASW, Appellant also needs his leg bags emptied throughout the day and that it takes over 5 minutes to do so each time. Appellant also testified that it takes at least 15 minutes to clean and change the tube. (Testimony of Appellant).

This Administrative Law Judge finds that the reduction in assistance with catheters and leg begs could be affirmed. Even accepting everything Appellant claimed during his testimony, it is clear that he requires less than 2 hours a day of such assistance and a reduction was appropriate. Moreover, Appellant's testimony ignores the conflicting reports made by his provider and ASW notes regarding the calculation of the HHS for this task are credible and comprehensive.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that, while some of the proposed reductions appear proper, the Department erred in deciding to reduce Appellant's HHS and its decision as a whole must be reversed.

IT IS THEREFORE ORDERED THAT:

The Department's decision is **REVERSED** and it cannot implement the reductions proposed in its December 21, 2012 Advance Negative Action Notice.

Steven J. Kibit
Administrative Law Judge
for James K. Haveman, Director
Michigan Department of Community Health

Date Signed: May 16, 2013

Date Mailed: <u>5/17/2013</u>

*** 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 March 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 rehearing decision.

