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

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IN THE MATTER OF:	
,	Docket No. 2013-25429 HHS Case No.
Appellant /	
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> , upon the Appellant's request for a hearing.	
After due notice, a hearing was held on appeared without representation. Her witner, Appeals Review Officer, representation, ASW.	. The Appellant ess was her choreprovider, sented the Department. Her witness was
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<u>ISSUE</u>

Did the Department properly reduce Home Help Services (HHS) payments to the Appellant?

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 year-old Medicaid beneficiary. (Appellant's Exhibit #1)
- 2. The Appellant is afflicted with "osteoarthritis, chronic pain and arthropaties" [sic]. (Department's Exhibit A, pp. 11 and 17)
- 3. The Appellant receives payment assistance for some Activities of Daily Living and Instrumental Activities of Daily Living, through the Department's Home Help Services Program.
- 4. The Appellant receives HHS program assistance for the tasks of bathing, dressing, transferring, mobility and the IADLs of housework, laundry, shopping and meal preparation. (Department's Exhibit A, p. 16)
- 5. The ASW conducted an in-home assessment of the Appellant on . (Department's Exhibit A, pp. 9 and 14)

Docket No. 2013-25429 HHS Hearing Decision & Order

- 6. The ASW proposed a reduction in HHS eliminating transferring and mobility and adding the ADL of toileting. (See Testimony and Department's Exhibit A, pp. 2, 9, 14-16)
- 7. The ASW sent the Appellant a DHS 1212 Advance Negative Action Notice on , reducing the HHS tasks (above) effective . (See Testimony and Department's Exhibit A, pp. 2 and 8)
- 8. The Appellant's further appeal rights were contained therein.
- 9. The instant request for hearing was received by the Michigan Administrative Hearing System (MAHS) on Exhibit #1). (Appellant's

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 physician and may be provided by individuals or by private or public agencies.

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.

Docket No. 2013-25429 HHS Hearing Decision & Order

- 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 transferin 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.

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Adult Service Manual, §120, page 1 of 5, 5-1-2012.

The Department witness testified that on in-home assessment she discovered the Appellant to have less need for the ADL tasks of transferring and mobility based on her in-home observations. She proposed the elimination of those tasks, while adding the ADL of toileting — based on the comments provided by the Appellant and her choreprovider during the in-home assessment. This resulted in a total cost of care reduction in the amount of \$ and a reduction in time from 44:39 per month to 40:08 hours per month.

The Appellant and her witness said that the Appellant used her walker and particularly needed assistance with transferring from bed to the toilet. The ASW testimony suggested that time with garment adjustment and getting to the toilet was probably more important – so she added that ADL at a first established RTS of 5:31 hours per month.

The testimony of both the ASW and the Appellant supported the idea that she needed assistance with the ADLs and IADLs, but with the elimination of the aforementioned tasks [transferring and mobility] owing to the ASW's observations – including her addition of the ADL of toileting.

The following items[s] summarize the ADL[s] and the ALJ's observation:

- The personal care task of <u>transferring was properly eliminated</u> based on the skilled observations of the ASW.
- The personal care task of <u>mobility was properly eliminated</u> based on the skilled observations of the ASW.
- The ADL of <u>toileting was properly added</u> based on the statements of the Appellant and the choreprovider during the in-home assessment – and the observations of the ASW in the home.

Docket No. 2013-25429 HHS Hearing Decision & Order

On review of the testimony and evidence, the Administrative Law Judge finds that the comprehensive assessment was properly drawn. During the hearing the most pointed debate came on the issue transferring and the Appellant's use of her walker. Today, the Appellant did not preponderate her burden of proof on that issue – particularly in light of the toileting issue and the need voiced by the all of the parties for that task. Toileting was added by the ASW on in-home assessment.

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 the ASW's face-to-face review, the Appellant remains eligible for the HHS program, but with a modestly reduced time and task allotment.

The Appellant did not meet her burden of proof.

DECISION AND ORDER

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

IT IS THEREFORE ORDERED that:

The Department's decision is AFFIRMED.

Dale Malewska
Administrative Law Judge
for James K. Haveman, Director
Michigan Department of Community Health

cc:

Date Mailed: 4/18/2013

*** 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.