

**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) 373-4147

**IN THE MATTER OF:**

**Docket No.** 2013-66630 HHS

██████████

██████████

██████████

Appellant.

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**DECISION AND ORDER**

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

After due notice, a hearing was held on ██████████ Appellant's daughter, appeared and testified on Appellant's behalf. Appellant also testified on her own behalf. ██████████, Appeals Review Officer, represented the Department of Community Health. ██████████, Adult Services Supervisor from the ██████████ County-██████████ DHS office appeared as a witness for the Department.

**ISSUE**

Did the Department properly deny Appellant's request for 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. Appellant is a ██████-year-old Medicaid beneficiary who has been diagnosed with dementia, cerebrovascular accident, depressive disorder, hypertension, hyperlipidemia, and arthritis. (Respondent's Exhibit A, pages 5, 10).
2. On ██████████, Appellant was referred for HHS. (Respondent's Exhibit A, page 9).
3. As part of his application, Appellant submitted a medical needs form signed by her doctor on ██████████. (Respondent's Exhibit A, page 5).
4. That form indicated that Appellant has a medical need for assistance with the tasks of bathing, mobility, taking medications, laundry, housework, shopping, and meal preparation. (Respondent's Exhibit A, page 5).

5. The doctor also wrote “w/ prompts” next to bathing and “unsteady” next to mobility. (Respondent’s Exhibit A, page 5; Testimony of Appellant’s representative).
6. The tasks of taking medications, laundry, housework, shopping, and meal preparation are all identified as Instrumental Activities of Daily Living (IADLs) by the Department. (Adult Services Manual 101 (11-1-2011) (hereinafter “ASM 101”), page 1 of 4).
7. The tasks of bathing and mobility are identified as Activities of Daily Living (ADLs) by the Department. (ASM 101, page 1 of 4).
8. On ██████████, Adult Services Worker (ASW) ██████████ conducted a visit and assessment in Appellant’s home with Appellant. (Respondent’s Exhibit A, page 12).
9. During that assessment, Appellant reported that she was independent in all personal care tasks and that she did not want or need HHS. (Respondent’s Exhibit A, page 12).
10. Based on Appellant’s reports made during the assessment, ASW ██████████ determined that Appellant’s request for HHS should be denied. (Respondent’s Exhibit A, page 9).
11. On ██████████ the Department sent written notice to Appellant indicating that her application for HHS was being denied because she reported that she did not need assistance at this time. (Respondent’s Exhibit A, pages 6-8).
12. On ██████████, the Michigan Administrative Hearing System (MAHS) received the Request for Hearing in this matter. (Respondent’s Exhibit A, 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 Social Welfare Act, 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.

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.

For example, ASM 101 provides:

### **Home Help Payment Services**

Home help services are non-specialized personal care service activities provided under the independent living 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.

\* \* \*

### Services not Covered by Home Help

- Supervising, monitoring, reminding, guiding, teaching or encouraging (functional assessment rank 2) . . .

*ASM 101, pages 1-3 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 HHS 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 2-4 of 5*

Here, the Department denied the request for HHS on the basis that Appellant reported that she was independent in all personal care tasks and that she did not want or need HHS.

Appellant's representative does not dispute what was reported, but she also testified that Appellant misspoke during the assessment and that Appellant does require HHS.

Appellant bears the burden of proving by a preponderance of the evidence that the Department erred in denying his application. Moreover, in reviewing that decision, this Administrative Law Judge is limited to reviewing the Department's decision based on the information available at the time.

In this case, Appellant does not have a legal guardian and the Department is justified in relying on what she reported. Based on those reports, the Department properly denied her request. To the extent Appellant and her representative have new or additional information they want to provide, that information would have to be the subject of a new request for HHS through the Department. Appellant is free to submit a new application at any time.

Moreover, even if the Department had discounted Appellant's own reports, it does not appear that Appellant meets the criteria for HHS.

As described in the above policy, an individual is only eligible to receive HHS if he or she has a need for assistance with at least one ADL at a level 3 or greater. In this case, whatever Appellant's needs are with respect to IADLs, she and her representative only

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seek assistance with two ADLs, bathing and mobility, and Appellant's needs in those areas do not rise to a level 3 or greater.

For example, with respect to bathing, the medical needs form provides that Appellant only needs "prompts" and such reminding or guiding is not covered under HHS. Appellant's representative does argue that, since the denial, Appellant now needs assistance getting in-and-out of the bathtub, but it is undisputed that she did not require such assistance at the time of the negative action in this case and, as noted above, this Administrative Law Judge is limited to reviewing the Department's decision in light of the information available at the time.

Additionally, with respect to mobility, the medical needs form does state that Appellant has an unsteady gait, but it is also undisputed that Appellant does not use any adaptive equipment or any physical assistance from others in ambulating.

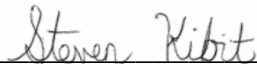
Accordingly, with respect to the denial at issue in this case, the Department properly found that Appellant has no need for physical assistance with any ADLs and its decision to deny services on that basis must be affirmed.

**DECISION AND ORDER**


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


**IT IS THEREFORE ORDERED THAT:**

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



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

Date Signed: 

Date Mailed: 

SK/db

cc: 

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**\*\*\* 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.