

**STATE OF MICHIGAN**  
**MICHIGAN ADMINISTRATIVE HEARING SYSTEM**  
**FOR THE DEPARTMENT OF COMMUNITY HEALTH**  
P.O. Box 30763, Lansing, MI 48909  
Phone: (517) 335-3997; Fax: (517) 373-4147

IN THE MATTER OF:

██████████  
Appellant  
\_\_\_\_\_ /

**CASE INFORMATION**

Docket No.: 15-000008-HHS  
Case No.: ██████████  
Appellant:  
██████████  
Respondent:  
Department of Community Health

**HEARING INFORMATION**

Hearing Date: March 11, 2015  
Start Time: 02:00 PM  
Location  
In Person at Agency Office  
Oakman Adult Services  
3040 W. Grand Blvd., Suite L450  
Detroit, MI 48202

**HEARING DECISION**

After due notice, a hearing was held on March 11, 2015. Appellant's Authorized Hearing Representative appeared on her behalf. ██████████, Appeals Review Officer, represented the Department of Community Health (DCH or Department). ██████████, Adult Services Worker, and ██████████, Adult Services Supervisor for the Wayne County Department of Human Services (DHS), testified as witnesses for the Department.

**ISSUE**

Did the Department properly deny the Home Help Services?

**FINDINGS OF FACT**

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

██████████  
**Docket No. 15-000008-HHS**  
**Decision and Order**

1. The Department attempted to interview the Appellant on November 18, 2014 and was unable to meet with her because she was hospitalized so the home visit was cancelled. Exhibit 1
2. On December 10, 2014 a Notice was sent to the Appellant as there was no response for rescheduling the appointment. Subsequently the Appellant passed away on ██████████. The Appellant never returned home after being hospitalized on ██████████.
3. The Appellant was sent a Negative Action Notice denying her application effective December 24, 2014.
4. The Appellant's spouse requested a hearing on January 2, 2015

**CONCLUSIONS OF LAW**

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

Additionally, in this case the Department denied the Home Health Services application as no face-to-face interview was completed with the Appellant as required by Department policy. In this case no such interview was ever completed as the Appellant was hospitalized during the period after the first home health visit was cancelled and thereafter never returned home having passed away on ██████████.

Home Help Services (HHS) 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.

**Docket No. 15-000008-HHS**  
**Decision and Order**

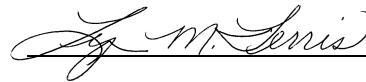
Appellant requested a hearing to dispute the denial of HHS eligibility. DCH provided testimony that Appellant's HHS eligibility was denied, because a home call visit was not completed and could not be completed because the Appellant was hospitalized.

The specialist must, at a minimum, have a face-to-face interview with the client, prior to case opening, then every six months in the client's home, at review and redetermination. ASM 115 (5/2013), p. 3. The requirement of a home call at application to determine HHS eligibility is required and failure to complete such a visit supports that a negative action is appropriate when a client cannot complete a home call. In addition the Appellant was not living in her home and was hospitalized and thus did not meet the eligibility requirements for the program. ASM 150 (5/1/13) p. 4

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it denied the Appellant's HHS application as no interview was ever conducted.

**DECISION AND ORDER**

Accordingly, the Department's decision is **AFFIRMED**.



**Lynn M. Ferris**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Community Health

Date Signed: **4/14/2015**

Date Mailed: **4/14/2015**

LMF / cl

CC:

[Redacted list of recipients]