

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

IN THE MATTER OF:

██████████  
Appellant  
\_\_\_\_\_ /

**CASE INFORMATION**

Docket No.: 15-001162-HHS

Case No.: ██████████

Appellant:

██████████

Respondent:

Department of Community Health

**HEARING INFORMATION**

Hearing Date: March 18, 2015

Start Time: 08:30 AM

Location

In Person at Agency Office

Oakman Adult Services

3040 W. Grand Blvd., Suite L450

Detroit, MI 48202

**DECISION AND ORDER**

Following Appellant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, a three way hearing was held on March 18, 2015, from Detroit, Michigan. Participants on behalf of Appellant included the Appellant. Claimant's Authorized Hearing Representative (AHR), ██████████ also appeared. Appearing on behalf of the Department of Health and Human Services (Department) included ██████████ Adult Services Supervisor, and ██████████, Adult Services Specialist. ██████████ Appeal Review Officer, Department of Health and Human Services, also appeared.

**ISSUE**

Did the Department properly issue a Negative Action Notice suspending the provider payments due to Appellant's failure to provide HHS provider logs?

**FINDINGS OF FACT**

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

1. On November 25, 2014 the Department issued the Appellant an Advance Negative Action Notice suspending services for Home Help Services (HHS) pending receipt of past-due provider logs. The Advance Negative Action was effective December 11, 2014.

2. The missing provider logs in question were for the third quarter (July, August and September 2014). At the time of the hearing the Appellant had been paid in full for HHS fees through December 2014. The Department had not received the completed Provider logs for the third quarter. The Appellant has not received any payments after December 2014 and first quarter logs are not yet due.
3. The Appellant's AHR agreed to complete the provider logs for the third quarter of 2014 after the hearing.
4. The Appellant requested a hearing on January 20, 2015 protesting the Department's suspension as all the logs had been provided.

### **CONCLUSIONS OF LAW**

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.

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.

The provider **must** keep a log of the services provided on the DHS-721, Personal Care Services Provider Log and submit it on a quarterly basis. The log must be signed by both the provider and client or the client's representative. ASM 135 (December 1, 2013) p. 3.

The log must be submitted to the local office quarterly. Provider logs must be received within 10 business days after the last service date on the log. Failure to do so will result in suspension of payment. ASM 135 p.5

Additionally, in this case the Department suspended HHS payments and sent a Negative Action Notice suspending the payments due to failure of Appellant to provide completed provider logs documenting services. At the hearing the Department testified that the Appellant had received payments through December 2014. Although the Appellant had indicated the logs had been provided, there was no evidence presented to support the testimony that the completed logs were sent in and no copies of the logs were provided by Appellant. Additionally the Department was entitled to suspend the HHS payments until the logs were completed and received by the Department. Thus its suspension of the January, February and March 2015 payments was correct as no completed provider logs were received by the Department at the time of the hearing for the third quarter (2014) provider logs.

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 suspended provider payments effective December 11, 2014 due to failure to receive from the Appellant completed provider logs for July 2014 through September 2014 (3<sup>rd</sup> quarter), and once the completed provider logs for the third quarter of 2014 are received, the Appellant will have completed its obligations as required by ASM 135.

### **DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.



**Lynn M. Ferris**  
Administrative Law Judge  
for Nick Lyon, Director  
Michigan Department of Health and Human  
Services

Date Signed: April 27, 2015

Date Mailed: April 27, 2015

LMF/cl

cc:

[REDACTED]  
[REDACTED]  
[REDACTED]  
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[REDACTED]  
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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.