

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.: 15-002054-HHS
Case No.: ██████████
Appellant:
██████████
Respondent:
Department Community Health

HEARING INFORMATION

Hearing Date: April 02, 2015
Start Time: 03:30 PM
Location
In Person at Agency Office
Oakman Adult Services
3040 W. Grand Blvd., Suite L450
Detroit, MI 48202

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 42 CFR 431.200 *et seq.*, and upon Appellant's request for a hearing. After due notice, a telephone hearing was held on April 2, 2015, from Detroit, Michigan. Participants included the above-named Appellant (via telephone). ██████████, Appellant's son and services provider, testified on behalf of Appellant (via telephone). Participants on behalf of the Department of Human Services (DHS) included Jamie Hicks, specialist, ██████████, supervisor, and ██████████ appeals review officer.

ISSUE

The issue is whether DHS properly terminated Appellant's home help services (HHS) eligibility.

FINDINGS OF FACT

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

1. Appellant was an ongoing HHS recipient.
2. Appellant received all 2014 HHS payments.

3. On ██████████, DHS performed an interview associated with a comprehensive assessment at Appellant's home.
4. On ██████████, DHS mailed Appellant an Advance Negative Action Notice informing Appellant of a termination in HHS eligibility, effective January 2015, for the reason that Appellant does not have sufficient ongoing need for assistance with activities of daily living (ADL).
5. On ██████████, DHS received a Medical Needs form stating that Appellant did not require assistance with activities of daily living (ADL).
6. On ██████████, Appellant requested a hearing to dispute an alleged failure by DHS to issue HHS payments since September 2014.
7. On an unspecified date, DHS reinstated Appellant's HHS eligibility and issued HHS payments to Appellant for January 2015 and February 2015.
8. On ██████████, DHS terminated Appellant's HHS eligibility, effective March 2015.

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. DHS policies regulating the MA program are contained in the Adult Services Manual.

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.

Appellant requested a hearing to dispute a termination of HHS eligibility. Appellant's provider initially testified that he was wrongly denied HHS payments since September 2014.

DHS responded that Appellant received all HHS payments in 2014 and presented a DCH payroll document (Exhibit 2) to verify payment issuances. After a double check of payment records, Appellant's provider conceded that he received all monthly HHS provider payments from 2014.

DHS stated that Appellant's HHS eligibility was initially terminated, effective January 2015. DHS conceded that the termination was improper because it denied HHS payments to Appellant for January 2015 and February 2015. To correct the error, DHS reinstated Appellant's HHS eligibility and issued a combined payment for January 2015 and February 2015. DHS verified their testimony with payroll records (see Exhibit 2).

Appellant's provider testified that he did not receive the payment. DHS gave testimony that Appellant's provider's testimony was consistent with payroll records which stated that the warrant for January 2015 and February 2015 was not yet cashed. Appellant's provider is entitled to receive a payment for January 2015 and February 2015 though he is not entitled to an administrative decision remedy because his failure to receive payment was not due to a DHS error. During the hearing, Appellant's provider was provided information with how to obtain a replacement payment from DHS.

The final dispute concerned Appellant's HHS eligibility from March 2015. DHS terminated Appellant's HHS eligibility due to Appellant not having any certified need for assistance with ADL.

Home help eligibility requirements include all of the following: Medicaid eligibility, certification of medical need, need for service based on a complete comprehensive assessment indicating a functional limitation of level 3 or greater for at least one activity of daily living, and appropriate Level of Care (LOC) status. ASM 105 (December 2013), p. 1. Medical needs are certified utilizing the DHS-54A, Medical Needs form and must be completed by a Medicaid enrolled medical professional. ASM 105 (December 2013), p. 3.


An individual must be assessed [as needing help] with at least one activity of daily living (ADL) in order to be eligible to receive home help services. ASM 101 (December 2013), p. 2. Activities of Daily Living (ADL) include the following: eating, toileting, bathing, grooming, dressing, transferring, and mobility. ASM 120 (December 2013), p. 2.

DHS presented a Medical Needs form (Exhibit 1) signed by Appellant's physician. Appellant's physician stated that Appellant needed assistance with meal preparation, shopping, laundry, and housework. None of Appellant's stated needs qualify Appellant for HHS eligibility.

It is found that Appellant does not have a certified need for assistance with ADLs. Accordingly, it is found that DHS properly terminated Appellant's HHS eligibility, effective March 2015.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly terminated Appellant's HHS eligibility, effective March 2015. It is further found that DHS properly issued payments to Appellant's HHS provider through February 2015. The actions taken by DHS are **AFFIRMED**.



Christian Gardocki
Administrative Law Judge
for Director, Nick Lyon
Michigan Department of Community Health

[REDACTED]

Docket No. 15-002054 HHS
Decision and Order

Date Signed: April 27, 2015

Date Mailed: April 27, 2015

CG/hw

cc:

[REDACTED]

***** 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.