



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
Christopher Seppanen  
Executive Director

MIKE ZIMMER  
DIRECTOR

[REDACTED]

Date Mailed: April 12, 2016  
MAHS Docket No.: 16-001876  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE:** Corey Arendt

**DECISION AND ORDER**

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

After due notice, a hearing was held on [REDACTED]. [REDACTED] appeared on her own behalf. [REDACTED], Appeals Review Officer, represented the Department of Health and Human Services (Department). [REDACTED], Adult Services Worker (ASW), appeared as a witness for the Department.

**Exhibits**

Petitioner: None  
Department: Exhibit A – Hearing Summary

**ISSUE**

Did the Department properly close the Appellant's Home Help Services ("HHS") case?

**FINDINGS OF FACT**

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

1. As of [REDACTED], the Petitioner was receiving HHS. (Exhibit A, p. 18.)
2. On [REDACTED], the Department received a Medical Needs form (54A) that was completed by a [REDACTED] PAC on the Petitioner's behalf. The 54A indicated the Petitioner did not need assistance with any personal care activities. (Exhibit A, p. 16; Testimony.)

3. On [REDACTED], the Department sent the Petitioner an Advance Negative Action notice. The notice indicated the Petitioner's HHS case was being closed effective [REDACTED] as the recently returned 54A did not identify a need for assistance with an activity of daily living. (Exhibit A, p. 7; Testimony.)
4. On [REDACTED], the Michigan Administrative Hearings System received the Petitioner's request for hearing. (Exhibit A, p. 6.)

### **CONCLUSIONS OF LAW**

The Medical Assistance Program (MA) 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 health professional and may be provided by individuals or by private or public agencies.

ASM 170 (5-1-2013) addresses the issue of case closures:

#### **Notification of the Negative Action**

When home help services are terminated, suspended or reduced for **any** reason, a DHS-1212, Advance Negative Action Notice, must be generated in **ASCAP** and sent to the client advising of the negative action and explaining the reason for the action; see ASM 150, Notification of Eligibility to determine need for 10 business day notice of action.

ASM 170, 5-1-2013, pp 1, 2.

ASM 150 (5-1-2013) addresses the issue of notification of eligibility determinations:

#### **Written Notification of Disposition**

All notifications are documented under ASCAP contacts when they are generated. This documentation acts as the file copy for the case record. For this purpose, the form letters used are:

- DHS-1210, Services Approval Notice.
- DHS-1212A, Adequate Negative Action Notice.
- DHS-1212, Advance Negative Action Notice.

Each notification letter includes an explanation of the procedures for requesting an administrative hearing.

### **Advance Negative Action Notice (DHS-1212)**

The DHS-1212, Advance Negative Action Notice, is used and generated on ASCAP when there is a reduction, suspension or termination of services. Appropriate notations must be entered in the comment section to explain the reason for the negative action.

- Reduced - decrease in payment.
- Suspended - payments stopped but case remains open.
- Terminated - case closure.

### **Negative Actions Requiring Ten Day Notice**

The effective date of the negative action is ten business days **after** the date the notice is mailed to the client. The effective date must be entered on the negative action notice.

### ***Negative Actions Not Requiring Ten Day Notice***

The following situations **do not** require the ten business day notice on negative actions:

- The department has factual confirmation of the death of the client (negative action notice must be mailed to the guardian or individual acting on the client's behalf) or death of the service provider.

**Note:** Cases should remain open until all appropriate payments have been issued.

- The department receives a verbal or written statement from the client, stating they no longer want or require services, or that they want services reduced.

**Note:** This information must be clearly documented in the general narrative of ASCAP. Written notices must be maintained in the paper case file and documented in the general narrative.

- The department receives a verbal or written statement from the client that contains information requiring a

negative action. The statement must acknowledge the client is aware the negative action is required and they understand the action will occur.

**Example:** A home help services client informs the specialist that they are engaged and will be married on a specific date. They also acknowledge that their new spouse will be responsible for meeting their personal care needs and they will no longer qualify for home help services.

**Note:** This information must be clearly documented in the general narrative of ASCAP. Written notices must be maintained in the paper case file and documented in the general narrative.

ASM 150, 5-1-2013, pp 1-4.

ASM 170 (5-1-2013) addresses the issue of notification of reopening a services case:

#### **Reopening a Services Case**

If a case has closed and reopens within 90 days, a new DHS-390, Services Application and DHS-54A, Medical Needs form are **not** required.

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On [REDACTED], the Department closed the Petitioner's case and sent the Petitioner an Advance Negative Action notice indicated the HHS case would be closing on the very date in which the notice was being delivered.

ASM 170 requires an advance negative action notice be sent to the Petitioner regarding a case closure. Advance Negative Action notices, must provide a ten day notice prior to the negative action going into effect.<sup>1</sup> The notice is to provide the Petitioner with an opportunity to continue receiving benefits up through the appeal process as long as the Petitioner timely requests a hearing before the effective date of the notice. In this case, the Petitioner was deprived of that ability as the effective date was the same date the notice was generated and sent to the Petitioner.

Therefore, based on the evidence presented, I find, the Department improperly closed the Petitioner's HHS case as policy requires an advance negative action notice be issued when a suspension of benefits occurs.

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<sup>1</sup> ASM 170 allows for negative actions that do not require a ten day notice period as long as certain situations are met. In this case, none of those situations applied.

**DECISION AND ORDER**


The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that

**IT IS, THEREFORE, ORDERED** that:

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

The Department is ordered to initiate the reopening of the Petitioner's HHS case with an effective date of [REDACTED] and issue benefits if otherwise eligible and qualified.

CA [REDACTED]

  
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Corey Arendt  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

**NOTICE OF APPEAL:** A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; Attention: MAHS Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P.O. Box 30763  
Lansing, Michigan 48909-8139

**DHHS**

[REDACTED]

**Agency Representative**

[REDACTED]

**DHHS Department Rep.**

[REDACTED]

**DHHS -Dept Contact**

[REDACTED]

**Petitioner**

[REDACTED]