



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.: 16-001887
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Landis Lain

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]. Petitioner appeared on behalf of the Petitioner. [REDACTED], Appeals Review Officer and [REDACTED], Adult Services Worker represented the Department of Health and Human Services (Department).

Exhibit A pages 1-16 were admitted as evidence.

ISSUE

Did the Department properly propose to suspend Petitioner's Home Help Services (HHS) payments?

FINDINGS OF FACT

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

1. Petitioner is a Medicaid recipient.
2. Petitioner is a HHS recipient.
3. On [REDACTED], the Department Adult Services Worker met with Petitioner in Petitioner's home. The provider was not there and the Petitioner was told to have the provider call the Adult Services Worker and at the next home visit the provider must be present.
4. On [REDACTED], the Adult Services Worker (ASW) sent Petitioner a Home visit letter stating that she was planning to make a home visit on [REDACTED] between 9:00 AM and 12:00 PM. (State's Exhibit A page 7)
5. On [REDACTED], the ASW met with Petitioner in Petitioner's home. The provider was not present.
6. On [REDACTED], the ASW notified Petitioner that a face-to-face meeting with the provider was mandatory and that payment would not be put on the system until the worker meets with the provider face-to-face. (State's Exhibit a page 11)
7. On [REDACTED], the Department Adult Services Worker sent Petitioner an Advance Negative Action Letter stating that services would be suspended effective [REDACTED], pending a face-to-face meeting with Petitioner's provider as required by policy. (State's Exhibit A page 8)
8. On [REDACTED], the Michigan Administrative Hearing System received a Request for Hearing, stating that the ASW had not allowed sufficient time for the provider to take off work from his first shift job so that he could have his face-to-face meeting with the caseworker.

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.

Department policy explicitly states that the Department caseworker is to determine the provider's ability to meet the following minimum criteria in a face-to-face interview with the client and the provider. An initial face-to-face interview must be completed with the home help provider. A face-to-face or phone contact must be made with the provider at the six month review or redetermination to verify services are being furnished. Home Help payment may be terminated if the provider fails to meet any of the provider criteria. (Adult Services Manual (ASM) 135, page 2)

Petitioner testified on the record that her provider works a first shift job and must either take a day off or schedule an appointment after three o'clock.

The Department ASW testified that she has never met the provider and he has not come into the office for a face-to-face meeting. The ASW stated on the record that she received one telephone call from Petitioner's provider. She returned the call and left a voice message but has heard nothing further from him. She stated that she can meet with the provider on [REDACTED] after 3:00 PM at her in office. He should call and confirm the meeting.

The Department has established by the necessary competent, substantial and material evidence on the record that it was acting in compliance with Department policy when it denied claimant's application for HHS based upon the fact that Petitioner's provider did not meet with the ASW face-to-face, as is required by Department policy. The Department's decision to suspend payments must be upheld under the circumstances.

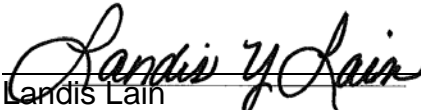
DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department appropriately suspended payment of the provider until the provider has met with the ASW face-to-face as is required by policy.

IT IS, THEREFORE, ORDERED that:

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

LL [REDACTED]


Landis Lain

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-Location Contact

[REDACTED]

Petitioner

[REDACTED]

DHHS Department Rep.

[REDACTED]

DHHS -Dept Contact

[REDACTED]

Agency Representative

[REDACTED]