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Date Mailed: June 3, 2024
MOAHR Docket No.: 24-002627
Agency No.: [redacted]
Petitioner: [redacted]

ADMINISTRATIVE LAW JUDGE: Steven Kibit

DECISION AND ORDER

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

After due notice, a telephone hearing was held on May 15, 2024. [redacted] Petitioner's son, and [redacted] Petitioner's daughter-in-law, appeared and testified on Petitioner's behalf. Leigha Klaver, Appeals Review Officer, represented the Respondent Department of Health and Human Services (DHHS or Department). Shelly Carter, Adult Services Worker (ASW), testified as a witness for the Department.

During the hearing, the Department submitted an evidence packet that was admitted into the record without objection as Exhibit A, pages 1-88. Petitioner did not submit any proposed exhibits.

ISSUE

Did the Department err in determining the amount of Petitioner's approved Home Help Services (HHS)?[1]

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 an [redacted] year-old Medicaid beneficiary who has been referred for HHS through the Department. (Exhibit A, pages 17, 21-22).

[1] Petitioner initially challenged the start date of HHS as well, but that was resolved prior to the hearing.

2. As part of the Petitioner's application for HHS, his doctor submitted a Medical Needs form stating that Petitioner has been diagnosed with dementia; impaired mobility and gait; frailty; hypertension; coronary artery disease; muscular degenerative disease; and impaired vision. (Exhibit A, pages 18, 25).

3. On December 12, 2023, the ASW completed a comprehensive assessment with Petitioner and his daughter-in-law in their home. (Exhibit A, page 28).

4. During the assessment, it was determined that Petitioner lives with his adult son and his daughter-in-law. (Exhibit A, page 27; Testimony of Petitioner's son).

5. Petitioner's daughter-in-law also described the assistance she and her husband provide to Petitioner, including constant monitoring and guiding due to Petitioner's dementia and risk of elopement. (Exhibit A, pages 28-29; Testimony of Petitioner's daughter-in-law; Testimony of ASW).

6. On January 10, 2024, the ASW also spoke with Petitioner's son regarding the care his father needs and the assistance provided by Petitioner's son and daughter-in-law. (Exhibit A, page 30; Testimony of Petitioner's son; Testimony of ASW).

7. On January 18, 2024, the Department sent Petitioner a written Services Approval Notice stating that he had been approved for 73 hours and 6 minutes per month of HHS. (Exhibit A, pages 31-33).

8. Specifically, Petitioner was approved for assistance with bathing 18 minutes per day, 7 days per week (9:02 per month); assistance with dressing 10 minutes a day, 7 days a week (5:01 per month); assistance with grooming 12 minutes a day, 7 days per week (6:01 per month); assistance with mobility 14 minutes per day, 7 days per week (7:01 per month); assistance with transferring 8 minutes per day, 7 days per week (4:01 per month); assistance with housework 6 minutes per day, 7 days per week (3:01 per month); assistance with laundry 49 minutes per day, 2 days per week (7:01 per month); assistance with medications 6 minutes per day, 7 days per week (3:01 per month); assistance with meal preparation 50 minutes per day, 7 days per week (25:05 per month); assistance with shopping 17 minutes per day, 2 days per week (2:26 per month); and travel for shopping 10 minutes per day, 2 days per week (1:26 per month). (Exhibit A, page 38).

9. The assistance authorized for shopping and housework would have been more based on Petitioner's rankings, but it was also prorated by one-half because Petitioner lived in a shared living arrangement with other adults. (Testimony of ASW).

10. The assistance authorized for meal preparation and laundry were not prorated because those tasks are completed in the home separately for Petitioner. (Testimony of ASW).

11. The Services Approval Notice also advised Petitioner that, if he disagreed with the action, he could request a hearing. (Exhibit A, page 33).

12. The service authorization was initially made effective as of November 10, 2023, but that was later changed to October 13, 2023. (Exhibit A, pages 31-36).

13. On March 18, 2024, MOAHR received the request for hearing filed in this matter. (Exhibit A, pages 10-16).

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 statutes, the Social Welfare Act, 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 physician and may be provided by individuals or by private or public agencies.

Adult Services Manual (ASM) 101 (4-1-2018) and ASM 120 (5-1-2023) address the issue of what services were included in HHS and how such services are assessed. For example, ASM 101 provides in part:

> 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. These services are furnished to individuals who are **not** currently residing in a hospital, nursing facility, licensed foster care home/home for the aged, intermediate care

facility (ICF) for persons with developmental disabilities or institution for mental illness.

These activities **must** be certified by a Medicaid enrolled medical professional and may be provided by individuals or by private or public agencies. **The medical professional does not prescribe or authorize personal care services.** Needed services are determined by the comprehensive assessment conducted by the adult services specialist.

Personal care services which are eligible for Title XIX funding are limited to:

Activities of Daily Living (ADL)

- Eating.
- Toileting.
- Bathing.
- Grooming.
- Dressing.
- Transferring.
- Mobility.

Instrumental Activities of Daily Living (IADL)

- Taking medication.
- Meal preparation/cleanup.
- Shopping for food and other necessities of daily living.
- Laundry.
- Light housecleaning.

An individual must be assessed with at least one activity of daily living (ADL) in order to be eligible to receive home help services.

Note: If the assessment determines a need for an ADL at a level 3 or greater but these services are not paid for by the department, the individual would be eligible to receive IADL services.

Example: Ms. Smith is assessed at a level 4 for bathing however she refuses to receive assistance. Ms. Smith would be eligible to receive assistance with IADL's [sic] if the assessment determines a need at a level 3 or greater.

Note: If an individual uses adaptive equipment to assist with an ADL, and without the use of this equipment the person would require hands-on care, the individual must be ranked a level 3 or greater on the functional assessment. This individual would be eligible to receive home help services.

Example: Mr. Jones utilizes a transfer bench to get in and out of the bathtub which allows him to bathe himself without the hands-on assistance of another. The adult services specialist must rank Mr. Jones a 3 or greater under the functional assessment. Mr. Jones would be eligible to receive home help services.

Assistive technology would include such items as walkers, wheelchairs, canes, reachers, lift chairs, bath benches, grab bars and handheld showers.

* * *

Services not Covered by Home Help

Home help services must **not** be approved for the following:

- Supervising, monitoring, reminding, guiding, teaching or encouraging (functional assessment rank 2).

- Services provided for the benefit of others.

- Services for which a responsible relative is **able** and **available** to provide (such as house cleaning, laundry or shopping). A responsible relative is defined as an individual's spouse or a parent of an unmarried child under age 18.

- Services provided by another resource at the same time (for example, hospitalization, MI-Choice Waiver).
- Transportation - See Bridges Administrative Manual (BAM) 825 for medical transportation policy and procedures.

- Money management such as power of attorney or representative payee.

- Home delivered meals.

- Adult or child day care.

- Recreational activities. (For example, accompanying and/or transporting to the movies, sporting events etc.)

Note: The above list is not all inclusive.

ASM 101, pages 1-3, 4-5

Moreover, ASM 120 states in part:

Functional Tab

The *Functional* Tab under *Assessment* module in MiAIMS is the basis for service planning and for Home Help services payment. Document the client's abilities and needs in the *Functional* tab to determine the client's ability to perform the following activities:

Activities of Daily Living (ADL)

- Eating.
- Toileting.
- Bathing.
- Grooming.
- Dressing.
- Transferring.
- Mobility.

Instrumental Activities of Daily Living (IADL)

- Taking Medication.
- Meal Preparation and Cleanup.
- Shopping.
- Laundry.
- Light Housework.

Functional Scale

ADLs and IADLs are assessed according to the following five-point scale:

1. Independent

   Performs the activity safely with no human assistance.

2. Verbal Assistance

Performs the activity with verbal assistance such as reminding, guiding or encouraging.

3. Some Human Assistance

Performs the activity with some direct physical assistance and/or assistive technology.

4. Much Human Assistance

Performs the activity with a great deal of human assistance and/or assistive technology.

5. Dependent

Does not perform the activity even with human assistance and/or assistive technology.

Home Help payments may only be authorized for needs assessed at the 3 level or greater.

An individual must be assessed with at least one activity of daily living ranked 3 or higher or a complex care need to be eligible to receive home help services.

Note: If the assessment determines a need for an ADL at a level 3 or greater but these services are not paid for by the department, the individual would be eligible to receive IADL services if assessed at a level 3 or greater.

Example: Ms. Smith is assessed at a level 4 for bathing however she refuses to receive assistance, or her daughter agrees to assist her at no charge. Ms. Smith would be eligible to receive assistance with IADLs if the assessment determines a need at a level 3 or greater.

Note: If an individual uses adaptive equipment to assist with an ADL, and without the use of this equipment the person would require hands-on care, the individual must be ranked a level 3 or greater on the *Functional* tab in MiAIMS. This individual would be eligible to receive Home Help services.

Example: Mr. Jones utilizes a transfer bench to get in and out of the bathtub, which allows him to bathe himself without

the hands-on assistance of another. The adult services worker (ASW) must rank Mr. Jones a 3 or greater under the *Functional* tab. Mr. Jones would be eligible to receive Home Help services.

Assistive technology includes such items as walkers, wheelchairs, canes, reachers, lift chairs, bath benches, grab bars and hand-held showers.

See ASM 121, Functional Assessment Definitions and Ranks for a description of the rankings for activities of daily living and instrumental activities of daily living.

* * *

Time and Task

The ASW will allocate time for each task assessed at a rank of 3 or greater, based on interviews with the client and caregiver, observation of the client's abilities, and use of the reasonable time schedule (RTS) as a **guide.** The RTS is built into the Functional tab within MiAIMS for each task. ASW's should modify how much time is needed based on the client's documented need.

MiAIMS includes a functional assessment time based on the ASW's assessment of the client's needs. MiAIMS also has a provider time and task based on the client's choice of activities and frequency to be performed by their chosen provider. The client functional assessment summary may be different from the provider time and task due to client choice or provider availability. The client's functional assessment summary indicates the maximum approved time based on the client's assessed need. Upon client request, the provider authorization may exceed the provider time and task, but may not exceed the client functional assessment. The ASW should document the reason for the variance from the provider time and task in the payment rationale box in MiAIMS.

Note: This allows flexibility for client choice while also assuring the basic needs of the client are being met. The caregiver must correctly document which tasks they are performing.

Example: Miss Smith has been assessed to need bathing assistance. However, she does not want her caregiver or agency provider to assist her with bathing. Miss Smith continues to do bathing on her own with difficulty. Miss Smith's functional
assessment summary will have bathing allocated, but bathing will not be included in her provider's time and task.

An assessment of need, at a ranking of 3 or greater, does not automatically guarantee the suggested allotted time allowed by the RTS. **The ASW must assess each task according to the average time and frequency required for its completion.**

Example: A client needs assistance with cutting up food. The ASW would only pay for the average time required to cut the food.

Example: On a good day, it takes the caregiver or agency provider 10 minutes to dress Miss Jones. On a bad day, when Miss Jones is in a lot of pain, it can take the caregiver or agency provider 20 minutes to assist Miss Jones with dressing. The average daily time needed is 15 minutes. Therefore 15 minutes is what is entered in the time and task.

Example: Sally is assessed needing an average of 20 minutes a day for bathing and reports frequency of 4 days a week. However, one day during the week, Sally was not feeling well and decided to skip her bath. The next day the caregiver assisted Sally with bathing in the morning and in the evening, due to illness. Both bathing activities totaled 20 minutes each. The frequency shows the caregiver only completed three days of bathing due to documentation restrictions. However, the caregiver assisted in four bathing occurrences during that week with one day having completed two baths.

Note: It is important to understand that each day a client may have different needs due to their health restrictions. Therefore, the average time and frequency may vary due to changes in the client's needs.

IADL Maximum Allowable Hours

There are monthly maximum hour limits on all instrumental activities of daily living (IADL), except medication. The limits are as follows:

- Five hours/month for shopping.
- Six hours/month for light housework.
- Seven hours/month for laundry.
- 25 hours/month for meal preparation.

Proration of IADLs

If the client does not require the maximum allowable hours for IADLs, authorize only the amount of time needed for each task. Assessed hours for IADLs (except medications) must be prorated by **one half** in shared living arrangements where other adults reside in the home, as Home Help services are **only** for the benefit of the client.

Note: This does not include situations where others live in adjoined apartments/flats or in a separate home on shared property and there is no shared, common living area.

In shared living arrangements, where it can be **clearly** documented that IADLs for the eligible client are completed separately from others in the home, hours for IADLs do not need to be prorated.

Example:

- Client has special dietary needs and meals are prepared separately.

- Client is incontinent of bowel and/or bladder and laundry is completed separately.

- Client's shopping is completed separately due to special dietary needs and food is purchased from specialty stores, etc.

- Caregiver does not live with the client and completes the client's laundry, shopping, and meal preparation separately from the client's roommate. The client's roommate does their own laundry, shopping, and meal preparation, therefore, these IADLs are not

> prorated because the client is the only person benefiting from the service. However, housework is prorated as it is a common living area.
>
> *ASM 120, pages 2-9*

Regarding the Functional Assessment Definitions and Ranks discussed above, ASM 121 (8-1-2018) further states in part:

> **ACTIVITIES OF DAILY LIVING**
>
> Use the following information as guidance when completing a comprehensive assessment.
>
> **Eating** - helping with the use of utensils, cup/glass, getting food/drink to mouth, cutting up/manipulating food on plate, swallowing foods and liquids, cleaning face and hands after a meal.
>
> 1. No assistance required.
>
> 2. Verbal assistance or prompting required. Client must be prompted or reminded to eat.
>
> 3. Minimal hands-on assistance or assistive technology needed. Help with cutting up food or pushing food within reach; help with applying assistive devices. The constant presence of another person is not required.
>
> 4. Moderate hands-on assistance required. Client has some ability to feed self but is unable to hold utensils, cup, or glass.
>
> 5. Totally dependent on others in all areas of eating.
>
> **Toileting** - helping on/off the toilet, commode or bedpan; emptying commode, bed pan or urinal, managing clothing, wiping and cleaning body after toileting, cleaning ostomy and/or catheter tubes/receptacles, applying diapers and disposable pads. May also include catheter, ostomy or bowel programs.
>
> 1. No assistance required.
>
> 2. Verbal direction, prompting or reminding is required.

3. Minimal hands-on assistance or assistive technology needed with some activities. The constant presence of another person while toileting is not necessary.

4. The client does not carry out most activities without human assistance.

5. Totally dependent on others in all areas of toileting.

Bathing - helping with cleaning the body or parts of the body using a tub, shower or sponge bath; including getting a basin of water, managing faucets, soaping, rinsing and drying. helping shampoo hair.

1. No assistance required.

2. Bathes self with direction or intermittent monitoring. May need reminding to maintain personal hygiene.

3. Minimal hands-on assistance or assistive technology required to carry out task. Generally, bathes self but needs some assistance with cleaning hard to reach areas; getting in/out of tub/shower. Client can sponge bath, but another person must bring water, soap, towel. Client relies on a bath or transfer bench when bathing. The constant presence of another is not required.

4. Requires direct hand- on assistance with most aspects of bathing. Could be at risk if unassisted.

5. Totally dependent on others in all areas of grooming.

Grooming - Maintaining personal hygiene and a neat appearance; including the combing/brushing of hair; brushing/cleaning teeth, shaving, fingernail and toenail care.

1. No assistance required.

2. Bathes self with direction or intermittent monitoring. May need reminding to maintain personal hygiene.

3. Minimal hands-on assistance required. Grooms self but needs some assistance with activities of personal hygiene.

4. Requires direct hands-on assistance with most aspects of grooming. Could be at risk if unassisted.

5. Totally dependent on others in all areas of grooming.

Dressing - Putting on and taking off garments; fastening and unfastening garments/undergarments, assisting with special devices such as back or leg braces, elastic stockings/garments and artificial limbs or splints.

1. No assistance required.

2. Client can dress self but requires reminding or direction in clothing selection.

3. Minimal hands-on assistance or assistive technology required. Client unable to dress self completely (for example, tying shoes, zipping, buttoning) without the help of another person or assistive device.

4. Requires direct hands on assistance with most aspects of dressing. Without assistance would be inappropriately or inadequately dressed.

5. Totally dependent on others in all areas of dressing.

Transferring - Moving from one sitting or lying position to another. Assistance from the bed or wheelchair to the sofa, coming to a standing position and/or repositioning to prevent skin breakdown.

1. No assistance required.

2. Client can transfer but requires encouragement or direction.

3. Minimal hands-on assistance needed from another person for routine boosts or positioning. Client unable to routinely transfer without the help of another or assistive technology such as a lift chair.

4. Requires direct hands-on assistance with most aspects of transferring. Could be at risk if unassisted.

5. Totally dependent on others for all transfers. Must be lifted or mechanically transferred.

Mobility - Walking or moving around inside the living area, changing locations in a room, assistance with stairs or maneuvering around pets, or obstacles including uneven floors.

1. No assistance required even though the client may experience some difficulty or discomfort. Completion of the task poses no risk to safety.

2. Client can move independently with only reminding or encouragement. For example, needs reminding to lock a brace, unlock a wheelchair or to use a cane.

3. Minimal hands-on assistance required for specific maneuvers with a wheelchair, negotiating stairs or moving on certain surfaces. Without the use of a walker or pronged cane, client would need physical assistance.

4. Requires hands-on assistance from another person with most aspects of mobility. Could be at risk if unassisted.

5. Totally dependent on other for all mobility. Must be carried, lifted or pushed in a wheelchair or gurney always.

INSTRUMENTAL ACTIVITIES OF DAILY LIVING

Taking Medication - Taking prescribed and/or over the counter medications.

1. No assistance required.

2. Client can take all medications but needs reminding or direction.

3. Client can take all medication if someone assists in measuring dosages or prepares administration schedule.

4. Client can take some medication if another person assists in preparation but needs someone to assist in administering other medications.

5. Totally dependent on another. Does not take medication unless someone assists in administering.

Meal Preparation - Planning menus. Washing, peeling, slicing, opening packages/cans, mixing ingredients, lifting pots/pans, reheating food, cooking, safely operating stove, setting the table, serving the meal. Washing/drying dishes and putting them away.

1. No assistance required.

2. Verbal direction, prompting or reminding is required for menu planning, meal preparation or clean up.

3. Minimal hands-on assistance required for some meals. Client can reheat food prepared by another and/or prepare simple meals/snacks.

4. Requires another person to prepare most meals and do clean-up.

5. Totally dependent on another for meal preparation.

Shopping - Compiling a list, managing cart or basket, identifying items needed, transferring items to home and putting them away, phoning in and picking up prescriptions. Limited to brief, occasional trips in the local area to shop for food, medical necessities and household items required specifically for the health and maintenance of client.

1. No assistance required.

2. Verbal direction, prompting or reminding is required for shopping.

3. Minimal hands-on assistance required for some task (grocery shopping) but client can compile a list and go to nearby store for small items.

4. Requires hands-on assistance from another person with most aspects of shopping but client can accompany and select needed items.

5. Totally dependent on another for shopping.

Laundry - Gaining access to machines, sorting, manipulating soap containers, reaching into the machine for wet/dry clothing, operating the machine controls, hanging laundry to dry, folding and putting away.

1. No assistance required.

2. Performs all tasks but needs reminding or direction to do laundry on a regular basis or to do it properly.

3. Minimal hand-on assistance required with some tasks but can do most laundry without assistance.

4. Requires hands-on assistance from another person with most aspects of laundry. Can perform some laundry tasks such as folding small clothing items or putting clothes away.

5. Totally dependent on another for laundry.

Light Housecleaning - Sweeping, vacuuming and washing floors; washing kitchen counters and sinks; cleaning the bathroom; changing bed linens; taking out garbage; dusting; cleaning stove top; cleaning refrigerator.

1. No assistance required.

2. Performs all tasks but needs reminding or direction from another.

3. Requires minimal assistance from another for some tasks due to limited endurance or limitations in bending, stooping or reaching.

4. Requires assistance for most tasks although client can perform a few simple tasks alone such as dusting and wiping counters.

5. Totally dependent on another for housecleaning

ASM 121, pages 1-6

Here, as discussed above, the Department approved Petitioner for 73 hours and 6 minutes per month of HHS, which included assistance with bathing 18 minutes per day, 7 days per week (9:02 per month); assistance with dressing 10 minutes a day, 7 days a week (5:01 per month); assistance with grooming 12 minutes a day, 7 days per week (6:01 per month); assistance with mobility 14 minutes per day, 7 days per week (7:01 per month); assistance with transferring 8 minutes per day, 7 days per week (4:01 per month); assistance with housework 6 minutes per day, 7 days per week (3:01 per month); assistance with laundry 49 minutes per day, 2 days per week (7:01 per month); assistance with medications 6 minutes per day, 7 days per week (3:01 per month); assistance with meal preparation 50 minutes per day, 7 days per week (25:05 per month); assistance with shopping 17 minutes per day, 2 days per week (2:26 per month); and travel for shopping 10 minutes per day, 2 days per week (1:26 per month).

Petitioner and his representatives have now appealed that decision and, in doing so, bear the burden of proving by a preponderance of the evidence that the Department erred. Moreover, the undersigned Administrative Law Judge is limited to reviewing the Department's decision in light of the information that was available at the time the decision was made.

Given the available information and applicable policies in this case, Petitioner has failed to meet that burden of proof and the Department's decision must be affirmed.

Petitioner's representatives broadly testified about the extensive amount of care that Petitioner needs, but the record clearly demonstrates that the vast majority of the care they identified is not covered by the Home Help Program.

For example, while Petitioner must be supervised around-the-clock due to his dementia and risk of elopement, that general supervision cannot be approved as part of HHS per ASM 101.

Similarly, supervision or monitoring with respect to specific tasks, like walking behind Petitioner while he walks, are expressly non-covered and Petitioner's representatives failed to distinguish between when covered services and non-covered services are being provided with respect to certain tasks or demonstrate why additional services need to be authorized. For instance, Petitioner is approved for some assistance with mobility, for when hands on assistance is being provided, and Petitioner's representatives have failed to show that any additional assistance would be for more of that type of care rather than just supervision.

Moreover, with respect to other specific tasks, and considering the fact that he shares his household with other adults, Petitioner is approved for the monthly maximum amount he can be for the IADLS of housework, laundry, meal preparation and shopping pursuant to ASM 120.

To the extent Petitioner's needs change or he and his representatives have additional information to report, they can always request HHS again in the future with that updated information. With respect to the decision at issue in this case, however, the Department's decision must be affirmed given the available information and applicable policies.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly determined the amount of Petitioner's HHS.

IT IS, THEREFORE, ORDERED that:

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

Steven Kibit

SK/sj

Steven Kibit
Administrative Law Judge

NOTICE OF APPEAL: Petitioner 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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

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

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

PROOF OF SERVICE

I certify that I served a copy of the foregoing document upon all parties, to their last known addresses in the manner specified below, this 3rd day of June 2024.

S. James

S. James
Michigan Office of Administrative Hearings and Rules

Via First Class & Electronic Mail:

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MI [redacted]

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