



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

MARLON BROWN
DIRECTOR

Date Mailed: October 17, 2024
MOAHR Docket No.: 24-009820
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Robert J. Meade

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 Petitioner's request for a hearing.

After due notice, a telephone hearing was held on October 16, 2024. [REDACTED] Petitioner, appeared and testified on her own behalf. Leigha Klaver, Appeals Review Officer, represented Respondent, Michigan Department of Health and Human Services (MDHHS or Department). Theralene Howell-Daniel, Adult Services Worker (ASW) appeared as a witness for the Department.

ISSUE

Did the Department properly determine the start date for Petitioner's Home Help Services (HHS)?

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 beneficiary who was first referred for HHS on February 12, 2024. (Exhibit A, p 12; Testimony)
2. The 54A Medical Needs form submitted with Petitioner's HHS application was signed by a chiropractor, who was not authorized to certify a need for HHS under policy. (Exhibit A, pp 18-20; Testimony)
3. On May 21, 2024, the ASW contacted Petitioner and requested a new 54A Medical Needs form. (Exhibit A, p 20; Testimony)
4. On June 24, 2024, the ASW issued a Negative Action Notice to Petitioner because she did not receive a new 54A Medical Needs form. (Exhibit A, p 21; Testimony)

The Notice also informed Petitioner that her chosen provider had not yet completed the HHS enrollment process for providers. (*Id.*)

5. On July 25, 2024, a new referral for HHS was entered for Petitioner when the Department received a new 54A Medical Needs form for Petitioner signed by an M.D. (Exhibit A, pp 27, 32; Testimony)
6. On September 26, 2024, the ASW sent Petitioner a Service Approval Notice after Petitioner's provider completed the HHS enrollment process through CHAMPS. (Exhibit A, pp 34, 39; Testimony)
7. On September 5, 2024, the Michigan Office of Administrative Hearings and Rules (MOAHR) received Petitioner's request for hearing. (Exhibit A, pp 9-11; Testimony)

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.

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.

Applicable policies regarding HHS can be located in various parts of the Adult Services Manual (ASM) and the Bridges Administrative Manual (BAM). For example, with respect to the 54A Medical Needs form, ASM 015 states in part:

* * *

The DHS-54A, Medical Needs, form is required for all clients receiving Medicaid personal care services. The DHS-54A must be signed and dated by a medical professional certifying a medical need for personal care services. The medical professional must be an existing enrolled Medicaid provider and hold one of the following professional licenses:

- Physical (M.D. or D.O).
- Nurse practitioner.
- Occupational therapist
- Physical therapist.

- Physician assistant (PA).

The client or their representative is responsible for obtaining the medical certification of need, but the form must be completed by the medical professional and not the client. The National Provider Identifier (NPI) number must be entered on the form by the medical provider and the medical professional must indicate whether they are a Medicaid enrolled provider.

*ASM 015
January 1, 2018, p 1*

Moreover, regarding eligibility for HHS, ASM 105 states in part:

OVERVIEW

Home Help services are available if the client meets all eligibility requirements. The Adult Services Worker (ASW) may open a Home Help case with supportive services methodology to assist the client in applying for Medicaid (MA), if necessary.

Home Help services payments cannot be authorized prior to establishing Medicaid eligibility and completing a face-to-face assessment with the client. Once MA eligibility has been established, the case service methodology must be changed to case management.

Requirements

Home Help eligibility requirements include all the following:

- Medicaid eligibility.
- Appropriate program enrollment type (PET) code.
- 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 (ADL).

Medicaid Eligibility

The client may be eligible for Medicaid (MA) when either all requirements for Medicaid eligibility have been met, or the Medicaid deductible obligation has been met.

The client must have a scope of coverage of either:

- 1F or 2F.
- 1D or 1K (Freedom to Work).
- 1T (Healthy Kids Expansion).
- 3G (Healthy Michigan Plan).
- 7W (MI Child).
- 8L (Flint).

Clients with a scope of coverage 20, 2C, or 2B are not eligible for Medicaid until they have met their MA deductible obligation.

Note: A change in the scope of coverage in Bridges will generate a system tickler in the Michigan Adult Integrated Management System (MiAIMS) for active services cases

*ASM 105
June 1, 2020, page 1*

With respect to Home Help Caregivers, ASM 135 states in part:

Criminal History Screen

All Home Help individual caregivers must undergo a criminal history screen prior to providing personal care services.

Note: The MDHHS Provider Enrollment unit, **not** local office staff, conducts criminal history screens for Home Help individual caregivers. Adult services workers **must only** use Law Enforcement Information Network (LEIN) information during an APS investigation. Use of LEIN in any other adult services program is **prohibited**; see SRM 700 and SRM 701.

CAREGIVER INTERVIEW

The ASW must complete an initial face-to-face interview with all Home Help caregiver(s). The ASW must make a face-to-face or phone contact with the caregiver(s) at the six-month review to verify receipt of services. If the last review was a phone contact, a face-to-face contact with the caregiver is mandatory for the next review. The ASW must document the contact in MiAIMS by selecting 'face-to-face-provider' as the contact type and indicating that the contact is an SOP contact, under the *Contacts* module.

The caregiver must present a picture identification (ID) card that includes their name for verification. The picture ID may include driver's license/state

ID, passport, or employee ID. Expired IDs are acceptable if the adult services worker can verify identity.

Explain the following points to the client and the caregiver(s) during the initial interview:

- Home Help services are a benefit to the client and earnings to the caregiver.
- The client employs the individual caregiver, not the State of Michigan.
- As the employer, the client has the right to hire and fire the caregiver.
- The caregiver must be enrolled in the Community Health Automated Medicaid Processing System (CHAMPS) and undergo a criminal history screen. The screening must be completed and passed before a provider can be paid to provide Home Help services.
- The caregiver must keep their contact information up to date in CHAMPS; see caregiver address changes in this item.

*ASM 135
May 1, 2023, pp 79-80
Emphasis added*

Regarding HHS Payment Authorizations, ASM 140 provides:

Payment Authorizations

No payment can be authorized unless the individual caregiver has been enrolled and screened for criminal history in the Community Health Automated Medicaid Processing System (CHAMPS).

*ASM 140
February 1, 2023*

The Department's ASW testified that the 54A Medical Needs form submitted with Petitioner's HHS application was signed by a chiropractor, who was not authorized to certify a need for HHS. The Department's ASW indicated that on May 21, 2024, she contacted Petitioner and requested a new 54A Medical Needs form. The Department's ASW testified that on June 24, 2024, she issued a Negative Action Notice to Petitioner because she did not receive a new 54A Medical Needs form. The ASW noted that the Notice also informed Petitioner that her chosen provider had not yet completed the HHS enrollment process for providers. The Department's ASW testified that on July 25, 2024, a new referral for HHS was entered for Petitioner when the Department received a new

54A Medical Needs form for Petitioner signed by an M.D. The Department's ASW indicated that on September 26, 2024, she sent Petitioner a Service Approval Notice after Petitioner's provider completed the HHS enrollment process through CHAMPS.

Petitioner testified that she was not aware that her 54A Medical Needs form needed to be signed by a Medicaid doctor. Petitioner indicated that she was just told to get the form filled out. Petitioner testified that she updated her address with DHS in person but her worker kept sending mail to the old address. Petitioner indicated that she tried calling the ASW several times but always got her voice mail or was told that the ASW was out of the office. Petitioner testified that she mailed in the new 54A Medical Needs form as soon as she knew she had to, but could not understand why it still took two months for her HHS to start. Petitioner also indicated that she did not know that her provider needed to do anything else, such as enroll in CHAMPS before he could become an HHS provider.

Based on the evidence presented, Petitioner has failed to prove by a preponderance of the evidence that the Department erred in determining her start-date for HHS services. While there may have been some communication issues between Petitioner and the ASW, the ASW appears to have done her best to get Petitioner approved for HHS as soon as possible. As indicated above, policy provides that HHS services cannot begin until a proper 54A Medical Needs form is received and the provider is properly enrolled in CHAMPS. Here, both of those things did not happen until September 26, 2024 and payments were authorized that same day. Given these facts, it cannot be said that the ASW erred in processing Petitioner's HHS application.

As such, the Department's decision was proper and should be upheld.

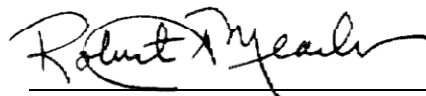
DECISION AND ORDER

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

IT IS THEREFORE ORDERED THAT:

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

RM/sj



Robert J. Meade

Administrative Law Judge

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 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 17th day of October 2024.

S. James

S. James
**Michigan Office of Administrative
Hearings and Rules**

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