



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED]
[REDACTED] MI [REDACTED]

Date Mailed: October 19, 2020
MOAHR Docket No.: 20-005758
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; 42 CFR 431.200 to 431.250; and 42 CFR 438.400 to 438.424, upon the Petitioner's request for a hearing.

After due notice, a hearing was held on October 13, 2020. [REDACTED] appeared on his own behalf. Theresa Root, Appeals Review Officer, represented the Department of Health and Human Services (Department). Jennifer LaSalla, Adult Services Worker, appeared and testified for the Department. Department Exhibit A, pp. 1-9 was received and admitted. Department Exhibit B was received and admitted.

ISSUE

Did the Department properly deny Petitioner's request for Home Help Services (HHS) benefits?

FINDINGS OF FACT

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

1. On or around July 2, 2020, Petitioner requested HHS.
2. On July 20, 2020, the Petitioner dropped off the required documents at the Department office at 3:35 p.m. The drop off sign in log provided by the Department confirms this and supported the credible testimony of Petitioner at hearing. (Ex. B)
3. On August 14, 2020, the Department sent the Petitioner an Adequate Action notice. The notice indicated the Petitioner's request for HHS was being denied as a result of not having submitted required paperwork within 21 days. (Ex A, p 5; Testimony.)
4. On September 18, 2020, the Michigan Office of Administrative Hearings and Rules

received from the Petitioner a request for a hearing. (Ex A, p 4.)

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.

Case Assignment and Disposition

The supervisor or their designee assigns the pending referral to the adult services worker (ASW) using the Assign Worker button under the Case Action section in MiAIMS. Documentation The ASW must print the introduction letter, the DHS-390, Adult Services Application, and the DHS-54A, Medical Needs form located in the Forms module and mail to the client. The introduction letter allows the client 21-calendar days to return the documentation to the local office. Note: The introduction letter does not serve as adequate notification if Home Help services are denied. The ASW must send the client a DHS-1212A, Adequate Negative Action Notice; see ASM 150, Notification of Eligibility Determination. Standard of Promptness (SOP) The ASW must determine eligibility within the 45-day standard of promptness, which begins the day after the referral is received and entered on MiAIMS. The referral date entered on MiAIMS must be the date the referral was received in the local office. The computer system calculates 45 days beginning the day after the referral date and counting 45-calendar days. If the due date falls on a weekend or holiday, the due date is the next business day. When a signed DHS-390 serves as the initial request for services, the referral date must be the date the application was received in the local office. Note: A DHS-54A, Medical Needs form does not serve as an application for services. If the local office receives a DHS-54A as the initial request for services, a referral must be entered on MiAIMS for the date the form was received in the local office and an application mailed or given to the individual requesting services. After receiving the assigned referral, the ASW gathers information through an assessment, contacts, etc. and decides to approve or

deny the referral; see ASM 115, Adult Services Requirements. ASM 110 (June 2020)

In this case, the Petitioner credibly testified and the log sheet provided by the Department confirms that Petitioner dropped off the required documents at the local office and listed his worker's name on the log sheet.

As a result, based upon the testimony provided and the documentation provided, I find the Department did not act appropriately in denying the Petitioner's request for services as he provided adequate proof that he submitted the required paperwork prior to the deadline. ASM 110

Accordingly, the determination to deny Petitioner's request for HHS benefits must be reversed.

DECISION AND ORDER

IT IS, THEREFORE, ORDERED that:

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

Accordingly, the Department is **ORDERED** to:

1. Reinstate and reprocess Petitioner's July 2, 2020 request for Home Help Services.

AM/dh



Aaron McClintic

Administrative Law Judge
for Robert Gordon, 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 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

DHHS -Dept Contact

Michelle Martin
Capitol Commons
6th Floor
Lansing, MI 48909

DHHS

Dawn Tromontine
41227 Mound Rd.
Sterling Heights, MI 48314

DHHS Department Rep.

M. Carrier
Appeals Section
PO Box 30807
Lansing, MI 48933

Petitioner

[REDACTED]
[REDACTED] MI [REDACTED]

Agency Representative

Theresa Root
222 N Washington Sq
Suite 100
Lansing, MI 48933