



**Date Mailed:** July 24, 2025

**Docket No.:** 25-020723

**Case No.:** [REDACTED]

**Petitioner:** [REDACTED]

This is an important legal document. Please have someone translate the document.

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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

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Ky është një dokument ligjor i rëndësishëm. Ju lutem, kini dikë ta përktheni dokumentin.

[REDACTED] MI [REDACTED]

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### **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 July 22, 2025. [REDACTED] Petitioner's caregiver, appeared and testified on Petitioner's behalf. Florence Scott-Emuakpor, Appeals Review Officer, represented Respondent, Michigan Department of Health and Human Services (MDHHS or Department). Catherine Bridges, Adult Services Worker (ASW) and Shannon Wallace, Adult Services Supervisor, appeared as witnesses 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 24, 2025. (Exhibit A, p 8; Testimony.)
2. At the time of this first referral, Petitioner did not have active Medicaid so a Negative Action Notice was issued. (Exhibit A, pp 10, 16; Testimony.)
3. On March 24, 2025, another referral for HHS was received from Petitioner. (Exhibit A, p 11; Testimony.) Petitioner still did not have active Medicaid, so another Negative Action Notice was issued. (Exhibit A, p 13; Testimony.)
4. On April 7, 2025, a third referral for HHS was received from Petitioner. (Exhibit A, p 14; Testimony.) At this time, Petitioner had qualifying Medicaid but a 54A Medical Needs form had not yet been received. (Exhibit A, p 15; Testimony.)
5. On April 10, 2025, a 54A Medical Needs form was received for Petitioner and an assessment was completed. (Exhibit A, p 18; Testimony.)

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6. On April 29, 2025, the ASW sent Petitioner a Service Approval Notice, effective April 28, 2025, after Petitioner's provider became linked to her preferred agency. (Exhibit A, p 20; Testimony.)
  7. On June 5, 2025, the Michigan Office of Administrative Hearings and Rules (MOAHR) received Petitioner's request for hearing. (Exhibit A, p 7; 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*

Petitioner's caregiver testified that Petitioner is a relative who was moved to Michigan after his house burned down in another state. Petitioner's caregiver indicated that she went on CHAMPS by herself and figured out how to register as a caregiver but no one ever came to assess Petitioner. Petitioner's caregiver testified that she continued to provide care for Petitioner, who has dementia. Petitioner's caregiver indicated that she was unaware of all the rules and no one from the Department ever contacted her to help. Petitioner's caregiver also indicated that no one at the Department ever informed her she needed to get a 54A Medical Needs form for Petitioner and it was actually Petitioner's doctor who informed her of this need.

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Based on the evidence presented, Petitioner has failed to prove by a preponderance of the evidence that the Department erred in determining the start-date for Petitioner's HHS services. Here, Petitioner's caregiver did not become linked with her preferred HHS agency until April 28, 2025.

Per policy, HHS could not begin until Petitioner's caregiver was linked to her preferred agency. Given these facts, it cannot be said that the ASW erred in processing Petitioner's HHS application or determining the start-date.

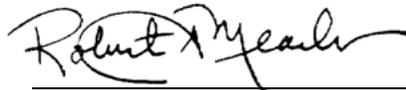
As such, the Department's decision was proper and should be upheld.

**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**.



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**ROBERT J. MEADE**  
**ADMINISTRATIVE LAW JUDGE**

**APPEAL RIGHTS:** Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at [courts.michigan.gov](http://courts.michigan.gov). The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://rs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to [LARA-MOAHR-DCH@michigan.gov](mailto:LARA-MOAHR-DCH@michigan.gov), **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to  
Michigan Office of Administrative Hearings and Rules  
Rehearing/Reconsideration Request  
P.O. Box 30639  
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed.



**Via Electronic Mail:**

**Agency/Department Representative**  
MARY CARRIER  
FLORENCE SCOTT-EMUAKPOR  
MDHHS APPEALS SECTION  
P.O. BOX 30807  
LANSING, MI 48909  
**SCOTT@MICHIGAN.GOV**  
**MDHHS-APPEALS@MICHIGAN.GOV**

**Agency/Department Representative**  
MACOMB COUNTY DHHS  
41227 MOUND RD  
STERLING HEIGHTS, MI 48314  
**MDHHS-MACOMB-36-**  
**HEARINGS@MICHIGAN.GOV**

**Department Contact**  
MICHELLE MARTIN  
MDHHS  
400 S PINE ST 5TH  
LANSING, MI 48933  
**MDHHS-HOME-HELP-**  
**POLICY@MICHIGAN.GOV**

**Via First Class Mail:**

**Authorized Hearing Representative**

[REDACTED]  
[REDACTED] MI [REDACTED]

**Petitioner**

[REDACTED]  
[REDACTED] MI [REDACTED]