



Date Mailed: August 4, 2025

Docket No.: 25-023415

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 দ্রষ্টাবেজ অনুবাদ করুন।

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Docket No.: 25-023415  
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Petitioner: [REDACTED]

## DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and upon Petitioner's request for a hearing.

After due notice, a telephone hearing was held on July 24, 2025. [REDACTED], Petitioner's Guardian, appeared on behalf of Petitioners. Evan George, Fair Hearing Officer, appeared on behalf of Respondent, Washtenaw Community Mental Health (Department). Krista DeWeese, Program Administrator, appeared as a witness for the Department.

### Exhibits:

Petitioner	1 – Letter
Department	A – Hearing Summary for Docket Number 25 023415
	B – Hearing Summary for Docket Number 25 023416

## ISSUE

Did Department properly reduce Petitioner's Community Living Supports (CLS)?

## FINDINGS OF FACT

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

1. Petitioners ([REDACTED].) are Medicaid beneficiaries who receive services from Department (Exhibit A; Exhibit B; Testimony.)
2. Prior to 2025, Petitioner's Adult Home Help (AHH) benefits were allowed to lapse. (Exhibit A; Exhibit B; Testimony.)
3. As a result of the AHH benefits lapsing, Department increased Petitioner [REDACTED] CLS services to supplant the lost AHH benefits and encouraged Petitioner [REDACTED] to re-apply for AHH. (Exhibit A; Exhibit B; Testimony.)
4. On December 27, 2024, the Michigan Department of Health and Human Services approved Petitioner [REDACTED] for AHH. (Exhibit A; Exhibit B; Testimony.)

5. On December 28, 2024, the Michigan Department of Health and Human Services approved Petitioner [REDACTED] for AHH. (Exhibit A; Exhibit B; Testimony.)
6. On January 16, 2025, the Department sent Petitioner's Advance Negative Action Notices, informing Petitioners that their CLS services were being reduced as a result of Petitioners being approved for AHH. The reduction was an hour for hour reduction for each AHH hour approved. (Exhibit A; Exhibit B; Testimony.)
7. Following receipt of the Negative Action Notice, Petitioners requested a local level appeal. (Exhibit A; Exhibit B; Testimony.)
8. On February 12, 2025, the Department sent Petitioners a Notice of Appeal Denial. The notice upheld the January 16, 2025, determinations to reduce CLS services. (Exhibit A; Exhibit B; Testimony.)
9. On June 25, 2025, the Michigan Office of Administrative Hearings and Rules received from Petitioners, a request for hearing. (Hearing File.)

### **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 Social Welfare Act, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program:

Title XIX of the Social Security Act, enacted in 1965, authorizes Federal grants to States for medical assistance to low-income persons who are age 65 or over, blind, disabled, or members of families with dependent children or qualified pregnant women or children. The program is jointly financed by the Federal and State governments and administered by States. Within broad Federal rules, each State decides eligible groups, types and range of services, payment levels for services, and administrative and operating procedures. Payments for services are made directly by the State to the individuals or entities that furnish the services.<sup>5</sup>

The State plan is a comprehensive written statement submitted by the agency describing the nature and scope of its Medicaid program and giving assurance that it will be administered in conformity with the specific requirements of

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<sup>5</sup> 42 CFR 430.0.

title XIX, the regulations in this Chapter IV, and other applicable official issuances of the Department. The State plan contains all information necessary for CMS to determine whether the plan can be approved to serve as a basis for Federal financial participation (FFP) in the State program.<sup>6</sup>

Section 1915(b) of the Social Security Act provides:

The Secretary, to the extent he finds it to be cost-effective and efficient and not inconsistent with the purposes of this subchapter, may waive such requirements of section 1396a of this title (other than subsection (s) of this section) (other than sections 1396a(a)(15), 1396a(bb), and 1396a(a)(10)(A) of this title insofar as it requires provision of the care and services described in section 1396d(a)(2)(C) of this title) as may be necessary for a State...<sup>7</sup>

The State of Michigan has opted to simultaneously utilize the authorities of the 1915(b) and 1915 (c) programs to provide a continuum of services to disabled and/or elderly populations. Under approval from the Centers for Medicare and Medicaid Services (CMS) the Department of Health and Human Services (DHHS) operates a section 1915(b) Medicaid Managed Specialty Services and Support program waiver in conjunction with a section 1915(c).

Here, as discussed above, Petitioner is seeking CLS services and a fiscal intermediary. With respect to the requested services, the applicable version of the Medicaid Provider Manual (MPM) provides in part:

#### **17.4.A. COMMUNITY LIVING SUPPORTS**

NOTE: This service is a State Plan EPSDT service when delivered to children birth-21 years.

Community Living Supports (CLS) are used to increase or maintain personal self-sufficiency, facilitating a beneficiary/s achievement of their goals of community inclusion and participation, independence or productivity. The supports may be provided in the participant's residence or in community settings (including, but not limited to, libraries, city pools, camps, etc.).

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<sup>6</sup> 42 CFR 430.10.

<sup>7</sup> 42 USC 1396n(b).

Coverage includes:

- Assisting (that exceeds state plan for adults), prompting, reminding, cueing, observing, guiding and/or training in the following activities:
  - meal preparation
  - laundry
  - routine, seasonal, and heavy household care and maintenance
  - activities of daily living (e.g., bathing, eating, dressing, personal hygiene)
  - shopping for food and other necessities of daily living

**CLS services may not supplant services otherwise available to the beneficiary through a local educational agency under the Individuals with Disabilities Education Act (IDEA) or the Rehabilitation Act of 1973 or state plan services, e.g., Personal Care (assistance with ADLs in a certified specialized residential setting) and Home Help or Expanded Home Help (assistance in the individual's own, unlicensed home with meal preparation, laundry, routine household care and maintenance, activities of daily living and shopping). If such assistance appears to be needed, the beneficiary must request Home Help and, if necessary, Expanded Home Help from the Department of Human Services (MDHHS). CLS may be used for those activities while the beneficiary awaits determination by MDHHS of the amount, scope and duration of Home Help or Expanded Home Help.** If the beneficiary requests it, the PIHP case manager or supports coordinator must assist him/her in requesting Home Help or in filling out and sending a request for Fair Hearing when the beneficiary believes that the MDHHS authorization of amount, scope and duration of Home Help does not

appear to reflect the beneficiary's needs based on the findings of the MDHHS assessment.

- CLS staff providing assistance, support and/or training with activities such as:
  - money management
  - non-medical care (not requiring nurse or physician intervention)
  - socialization and relationship building
  - transportation from the beneficiary's residence to community activities, among community activities, and from the community activities back to the beneficiary's residence (transportation to and from medical appointments is excluded)
  - participation in regular community activities and recreation opportunities (e.g., attending classes, movies, concerts and events in a park; volunteering; voting)
  - attendance at medical appointments
  - acquiring or procuring goods, other than those listed under shopping, and non-medical services
- Reminding, observing and/or monitoring of medication administration
- Staff assistance with preserving the health and safety of the individual in order that he/she may reside or be supported in the most integrated, independent community setting.

CLS may be provided in a licensed specialized residential setting as a complement to, and in conjunction with, state plan coverage Personal Care in Specialized Residential Settings. Transportation to medical appointments is covered by Medicaid through MDHHS or the Medicaid Health Plan. Payment for CLS services may not be made, directly or indirectly, to responsible relatives (i.e., spouses, or parents

of minor children), or guardian of the beneficiary receiving community living supports.

CLS assistance with meal preparation, laundry, routine household care and maintenance, activities of daily living and/or shopping may be used to complement Home Help or Expanded Home Help services when the individual's needs for this assistance have been officially determined to exceed the DHS's allowable parameters. CLS may also be used for those activities while the beneficiary awaits the decision from a Fair Hearing of the appeal of a MDHHS decision. Reminding, observing, guiding, and/or training of these activities are CLS coverages that do not supplant Home Help or Expanded Home Help.<sup>8</sup>

Here, Petitioner's are appealing a reduction in CLS service that occurred following an approval by the Department of Health and Human Services that found Petitioner's eligible for AHH. In appealing that decision, Petitioner has the burden of showing by a preponderance of the evidence, that the Department erred in their decision.

Having reviewed the evidence, the Petitioners are found to have failed in meeting their burden. There is no dispute that Petitioner's CLS reduction was an hour for hour reduction related to their respective AHH approvals. In accordance with the applicable policy, CLS cannot be used to supplant those specific service allocations. Accordingly, the Department's actions should be affirmed.

### **DECISION AND ORDER**

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly reduced Petitioner's CLS benefits.

**IT IS THEREFORE ORDERED** that:

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

*J. A. Arendt*  
\_\_\_\_\_  
**COREY A. ARENDT**  
**ADMINISTRATIVE LAW JUDGE**

<sup>8</sup> Medicaid Provider Manual, Behavioral Health and Intellectual and Developmental Disability Supports and Services, January 1, 2024, pp 150-151.

**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://lrs.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 [MOAHR-BSD-Support@michigan.gov](mailto:MOAHR-BSD-Support@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:**

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**Petitioner**  
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