

Date Mailed: February 6, 2026

Docket No.: 25-047432

Case No.: [REDACTED]

Petitioner: [REDACTED]

DECISION AND ORDER

On December 26, 2025, Petitioner [REDACTED] requested a hearing to dispute a Home Help Services (HHS) determination. As a result, a hearing was scheduled to be held on February 4, 2026. Medicaid services hearings are held pursuant to MCL 400.9 and 400.37; 42 CFR 431.200 to 431.250; 42 CFR 438.400 to 438.424; and Mich Admin Code, R 792.11002.

The parties appeared for the scheduled hearing. Petitioner appeared and represented herself. Petitioner had one witness, [REDACTED]. Respondent Michigan Department of Health and Human Services (Department) had Appeals Review Officer Allison Pool appear as its representative. Respondent had two witnesses: Adult Services Specialist Kirsten Robinson and Adult Services Supervisor Aurelia Edwards. There were no other participants.

Both parties provided sworn testimony, and one exhibit was admitted into evidence. A 20-page packet of documents provided by the Department was admitted into evidence as Exhibit A.

ISSUE

Did the Department properly suspend 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 an HHS recipient.
2. In September 2025, the Department initiated the process to complete a periodic update of Petitioner's assessment.
3. On September 22, 2025, an adult services worker met with Petitioner in her home. The adult services worker asked to speak with Petitioner's provider, and Petitioner informed the adult services worker that her provider was unavailable because her provider was ill. Petitioner's provider had not been submitting logs to verify that she had been providing services for Petitioner. The adult services worker informed Petitioner that the Department could not issue any HHS payments until the adult services worker was able to speak with her provider and verify that her provider was providing services.

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4. On September 25, 2025, the Department mailed a negative action notice to Petitioner to inform Petitioner that her HHS was going to be suspended, effective October 9, 2025, because the Department could not verify that Petitioner's provider was providing services.
 5. Petitioner requested a hearing to dispute the Department's decision.

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.

In order to be eligible for HHS, an individual must have a need for services based on a comprehensive assessment indicating a need for hands-on assistance with at least one activity of daily living (ADL) or a need for complex care. ASM 120 (October 1, 2025), p. 3. Those activities known as ADL's are eating, toileting, bathing, grooming, dressing, transferring, and mobility. *Id.* at 2-3. Complex care includes care such as catheters, bowel programs, specialized skin care, suctioning, range of motion exercises, wound care, respiratory treatments, ventilators, and injections. *Id.* at 4-5.

The comprehensive assessment is the Department's primary tool for determining a client's need for services. *Id.* at 1. Although a medical professional may certify a client's need for services, it is the Department who determines whether there is a need for services through its comprehensive assessment. ASM 115 (October 1, 2025), p. 2. During the assessment, the Department documents a client's abilities and needs in order to determine the client's ability to perform activities. ASM 120 at 2.

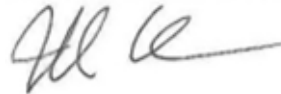
The comprehensive assessment must be periodically updated. It must be updated as often as necessary, but minimally at the six-month review. *Id.* at 1. The Department must speak with the client's HHS provider during the review to verify that the client is receiving services. ASM 115 at 5. In this case, the Department unsuccessfully attempted to speak with Petitioner's HHS provider during a periodic review of Petitioner's comprehensive assessment. The Department was unable to verify that Petitioner was receiving services, so the Department suspended Petitioner's HHS. Petitioner is disputing the Department's decision to suspend her HHS.

The Department attempted to update Petitioner's comprehensive assessment as required by ASM 120, but the Department was unable to because the Department was unable to speak with Petitioner's HHS provider as required by ASM 115. Accordingly, the Department suspended Petitioner's HHS. The Department acted in accordance with ASM 170 when it suspended Petitioner's HHS. Petitioner must have her provider contact Petitioner's adult services worker so the adult services worker can verify that Petitioner is receiving services.

DECISION AND ORDER

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

IT IS ORDERED that the Department's decision is **AFFIRMED**.



JEFFREY KEMM
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. 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://irs.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, **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.

