OVERVIEW

Home Help services are available if the client meets all eligibility requirements. The Adult Services Worker (ASW) must ensure all of the required steps in the case opening process are completed.

DHS-390, ADULT SERVICES APPLICATION

The client must complete and sign a DHS-390, Adult Services Application, to receive Home Help services. An authorized representative or other person acting for the client may sign the DHS-390 if the client either:

- Is incapacitated.
- Has a court-appointed guardian.

The date the DHS-390 is received by the Michigan Department of Health and Human Services (MDHHS) is the application date.

A client unable to write may sign with an X, witnessed by one other person (for example, relative or department staff). The adult services worker (ASW) **must not** sign the DHS-390 on behalf of the client.

Note: If a DHS-390 is received in the local office and is signed by someone other than the client or guardian, a referral may be entered on the Michigan Adult Integrated Management System (MiAIMS). The referral date must be the date the application was received in the local office; however, a new DHS-390 must be obtained with proper signatures to verify the client wants the services requested.

The date that a valid client or guardian signature is received in the local office is the application date.

The DHS-390 remains valid unless the case record is closed for more than 90 days.

Note: Verbal attestation of the DHS-390, Adult Services Application, is acceptable during the COVID-19 Public Health Emergency from 04/01/2020 through 05/11/2023.

MEDICAL NEEDS FORM

A medical needs form must be signed and dated by a medical professional certifying a medical need for personal care services based on the existing medical condition, physical disability, or cognitive disability of the client. A medical needs form may include the MDHHS-6200, Adult Services Medical Needs Certification form or the DHS-54-A, Medical Needs form. The medical professional must be an approved Medicaid provider, enrolled in CHAMPS, and hold one of the following professional licenses:

- Physician (M.D. or D.O.).
- Physician assistant.
- Nurse practitioner.
- Occupational therapist.
- Physical therapist.
- Clinical Nurse Specialist.

A medical needs form is only required for Home Help clients at the initial opening of a case, unless one of the following exists:

- The ASW assesses a decline in the client's health which significantly increases their need for services, and clarification is needed from the medical provider.

- The ASW assesses an improvement in the client's ability for self-care, resulting in a decrease or elimination of services and the client states their care needs have not changed.

- The current medical needs form has a specified time frame for needed services and that time frame has elapsed.

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

The medical professional certifies that the client’s need for service is related to an existing medical condition, physical disability, or cognitive disability. **The medical professional does not prescribe or authorize personal care services**. Needed services are determined by the comprehensive assessment conducted by the adult services worker.

The date that the valid medical provider signs the medical needs form is the medical certification date entered into MiAIMS.

If the case is closed and reopened within 90 days with no changes in the client's condition, a new medical needs form is not necessary.

If the case is denied and a new referral is made within 90 days of the original certification date on a medical needs form, a new medical needs form is not needed unless there are changes in the client's condition..

Veteran's Administration (VA)

A qualified medical provider affiliated with the Veteran's Administration may complete the VA Medical Certificate 10-10M, the MDHHS-6200 or the DHS-54A.

IMPORTANT DATES

When a signed DHS-390, Adult Services Application, serves as the initial request for services, the referral date must be the date the application was received in the local office.

The application date is the date the local office receives the DHS 390 form with a valid client or guardian signature.

The medical needs form does not serve as the application for services. If the signature date on the medical needs form is **before** the DHS-390 received date, payment for Home Help services must begin on the application date.

Do not authorize Home Help services prior to the date of the medical professional's signature on the medical needs form.

The case opening date for a Home Help case is the latter of the DHS-390 received date and the medical needs form medical provider signature date.

Example: The local office adult services unit receives a medical needs form signed on 07/18/2020, but a referral for Home Help has not been received yet. The adult services staff enters a referral on MiAIMS for 7/18/2020, and either mails an application to the client or sets up a home visit and brings the application to the client. The application is returned to the office on 08/07/2020. Payment cannot begin until 08/07/2020, or later, if the caregiver was not working

during this period or was not enrolled in CHAMPS; see ASM 135, Home Help Caregivers.

MDHHS-5534, ADULT SERVICES COMPREHENSIVE ASSESSMENT

The ASW must conduct an in-person face-to-face interview with the client in their home to assess the personal care needs. During the assessment, complete the MDHHS-5534, Adult Services Comprehensive Assessment, generated from MiAIMS; see ASM 120, Adult Services Comprehensive Assessment.

MDHHS-5536, HOME HELP PLAN OF CARE

The ASW must develop a plan of care with the client and/or the client's representative. The ASW must determine the method of service delivery, if the client is utilizing services from any other program, and any other unmet needs of the client. The Home Help plan of care is developed whenever an issue is identified in the comprehensive assessment; see ASM 125, Coordination with Other Services, and ASM 130, Plan of Care.

CLIENT AND PROVIDER CONTACTS

Within the *Contacts* module of MiAIMS, the following contact types are available:

- Face-to-face.
- Telephone.
- Miscellaneous.
- Email.
- Text.
- Case conference with supervisor.
- Narrative entry only.

The ASW must document all contacts between the ASW, client, provider, and collateral contacts in MiAIMS.

The ASW must, at a minimum, have an in-home face-to-face interview with the client, prior to case opening, and every six months for the review.

The ASW must complete an initial in-person face-to-face interview with the Home Help caregiver in the client's home or local Michigan Department of Health and Human Services (MDHHS) office. The caregiver is the person providing direct care to the client. The ASW must make a face-to-face or phone contact with all caregivers at the next review to verify services are being furnished.

Note: If the ASW makes contact by phone, the caregiver must offer identifying information such as date of birth and the last four digits of their Social Security number. The ASW must complete a face-to-face interview in the client's home or local MDHHS office at the next review.

Procedure for Utilizing Text Messaging as a Form of Contact

- The ASW cannot initiate text messages between the ASW and client.
- The ASW must verify the phone number from the text matches the phone number of the client before responding to a text message.
- The ASW must respond to text messages with the minimum information necessary and use extreme caution to avoid confidentiality breaches or HIPAA violations.

  Note: Avoid using the client's name, medical information, Social Security number, date of birth, and address information in the text message.
- The ASW must not use text messaging in lieu of the required phone contact and/or face-to-face contact.

REFERENCES

Administrative Policy Legal, APL 68D-102.

See ASM 120, Adult Service Comprehensive Assessment.

See ASM 125, Coordination with Other Services.

See ASM 130, Plan of Care.

See ASM 135, Home Help Caregivers.

CONTACT

For questions contact MDHHS-Home-Help-Policy@michigan.gov.