
OVERVIEW

When a Home Help or Adult Community Placement (ACP) referral is received or a DHS-390, Adult Services Application is submitted, written notification must be provided to the client, notifying them of the approval or denial of services. A written notice must be sent at the time the adult services worker (ASW) approves or denies the pending Home Help or Adult Community Placement referral; see: [ASM 110, Referral Process](#).

Clients with active cases must be provided with written notice of any change in their services (increase, reduction, suspension, or termination).

**Written
Notification of
Case Action**

All notifications are documented in the Michigan Adult Integrated Management System (MiAIMS) *Contacts* module, when they are generated. This documentation acts as the file copy for the case record. For this purpose, the form letters used are:

- DHS-1210-A, Services and Payment Approval Notice.
- DHS-1210-B, Services Approval Notice.
- DHS-1210-C, Services Increase Approval Notice.
- DHS-1212-A, Adequate Negative Action Notice.
- DHS-1212-B, Advance Negative Action-Reduced.
- DHS-1212-C, Advance Negative Action-Suspended.
- DHS-1212-D, Advance Negative Action Notice-Terminated.

Each notification letter must include information for requesting an administrative hearing. The DCH-0092, Request for Hearing, notification must be generated from the *Forms* module in MiAIMS and sent with all negative action notices.

**Services
Approval
Notices****Adult Community Placement**

When Adult Community Placement services are approved, the DHS-1210-B, Services Approval Notice, is sent to the client indicating which services will be authorized.

Home Help

When Home Help services are approved a Services Approval Notice is sent to the client notifying them that services are authorized. A copy of the client's MDHHS-6064-C, Client Time and Task Management form and MDHHS-6064-P, Provider Time and Task Management form (if applicable) must be sent with the services approval notice.

DHS-1210-A, Services and Payment Approval Notice

This notification is used to inform the client that Home Help services have been approved, and an agency provider or individual caregiver has been chosen.

DHS-1210-B, Services Approval Notice

This notification is used to inform the client that Home Help services have been approved. This notification is sent when a caregiver or agency provider has not been identified.

DHS-1210-C, Services Increase Approval Notice

This notification is used on open Home Help cases to inform the client when there is an increase in services.

**Negative Action
Notices*****DHS-1212-A, Adequate Negative Action Notice***

The DHS-1212-A, Adequate Negative Action Notice, is used and generated from MiAIMS when Home Help services and Adult Community Placement services have been denied. This notice does not require a 10-business day notice be sent to the client. The notice must include the reason for denial and a copy of the DCH-0092, Request for Hearing.

Advance Negative Action Notices

The Advance Negative Action Notices are used on open Home Help cases when there is a reduction, suspension, or termination of

services. The notice must include the reason for the action and a copy of the DCH-0092, Request for Hearing.

- **DHS-1212-B, Advance Negative Action Notice-Reduced.**
This notification is used to inform the client that Home Help services will be reduced. A copy of the client's MDHHS-6064-C, Client Time and Task Management form and MDHHS-6064-P, Provider Time and Task Management form (if applicable) must also be included.
- **DHS-1212-C, Advance Negative Action Notice-Suspended.**
This notification is used to inform the client that Home Help services will be suspended but the case remains open.
- **DHS-1212-D, Advance Negative Action Notice-Terminated.**
This notification is used to inform the client that Home Help services will be closed.

Negative Actions Requiring 10-Day Notice

The effective date of the negative action is 10-business days **after** the date the notice is mailed to the client. The effective date must be entered on the negative action notice.

If the client does not request an administrative hearing before the effective date, the adult services worker must proceed with the proposed action.

If the client requests an administrative hearing before the effective date of the negative action, and the ASW is made aware of the hearing request, continue payments until a hearing decision has been made. If the ASW is made aware of the hearing request **after** payments have ended, payments must be reinstated pending the outcome of the hearing. Offer the client the option of discontinuing payment pending the hearing decision.

Note: When payments continue pending the outcome of a hearing, the client must repay any overpayments if the department's negative action is upheld. Initiate recoupment procedures by sending the client a MDHHS-6237, Recoupment Letter; see [ASM 165, Overpayment and Recoupment Process](#).

Negative Actions Not Requiring 10-Day Notice

The following situations **do not** require 10-business day notice on negative actions:

- When a DHS-1212-A, Adequate Negative Action Notice for referral denial is sent.
- The department has factual confirmation of the death of the client (negative action notice must be mailed to the guardian or individual acting on the client's behalf) or death of the caregiver.
- The department receives a verbal or written statement from the client, stating they no longer want or require services, or that they want services reduced.

Note: This information must be clearly documented in the *Contacts* module of MiAIMS. Written statements from the client must be maintained in the case file and documented in the *Contacts* module.

- The department receives a verbal or written statement from the client that contains information requiring negative action. The statement must acknowledge the client is aware the negative action is required, **and** they understand the action will occur.

Example: A Home Help client informs the ASW that they are engaged and will be married on a specific date. They also acknowledge that their new spouse will be responsible for meeting their personal care needs and they will no longer qualify for Home Help services.

Note: This information must be clearly documented in the *Contacts* module of MiAIMS. Written notices must be maintained in the case file and documented in the *Contacts* module.

- The client has been admitted to an institution or setting (for example, hospital, nursing home, or adult foster care home) where the client no longer qualifies for federal financial participation under the Medicaid State Plan for personal care services in the community.

Note: When a client is admitted to a hospital, nursing home, or adult foster care home the facility is reimbursed for the client's care on the day the client is admitted. The Home Help individual caregiver or agency provider cannot be reimbursed for the date the client is admitted to the facility.

- The client cannot be located, and the department mail directed to the client's last known address has been returned by the post office indicating the forwarding address is unknown.
- The client has been accepted into a different program and has been confirmed to be receiving services.
- The time frame for a services payment, granted for a specific time period, has elapsed. The client was informed, in writing, at the time payments were initiated, that services would automatically terminate at the end of the specified period.

Administrative Hearings

The client may appeal any negative action by requesting an administrative hearing. The ASW must include a DCH-0092, Request for Hearing form whenever a negative action notice is sent.

Note: Home Help individual caregivers or agency providers **cannot** appeal a negative action given to the client. Only the client can request an administrative hearing.

Hearing procedures are explained in [Bridges Administrative Manual \(BAM\) 600, Hearings](#).

REFERENCES

See. [ASM 110, Referral Process](#).

See [ASM 165, Overpayment and Recoupment Process](#).

See. [Bridges Administrative Manual \(BAM\) 600, Hearings](#).

CONTACT

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