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## OVERVIEW

The MDHHS-5534, Adult Services Comprehensive Assessment, is the primary tool for determining a client's need for services. The comprehensive assessment must be completed on **all open Home Help services cases**. The Michigan Adult Integrated Management System (MiAIMS) provides the format for the comprehensive assessment and all information must be entered in the computer program.

### Requirements

Requirements for the comprehensive assessment include, but are not limited to:

- A comprehensive assessment will be completed on all new cases.
- A face-to-face contact is required with the client in their place of residence.

**Note:** If there are worker safety issues related to meeting the client in the home, a policy exception may be requested from the Home Help Policy Section to conduct the visit at another setting.

- The assessment may also include an interview with the individual who will be providing Home Help services.
- If there is a request for an increase in services between the six-month reviews, a phone interview may be conducted in place of a new face-to-face assessment.
- When a request for an increase is made, the ASW has 15 business days to complete the comprehensive assessment.

**Note:** If the client is non-verbal or requests the visit to be in the home, the ASW must complete the face-to-face request for an increase in the home.

- A face-to-face assessment is required on all transfer-in cases before a payment is authorized.
- The assessment must be updated as often as necessary, but **minimally** at the six-month review.

- A release of information must be obtained when requesting documentation from confidential sources and/or sharing information from the department record.
  - Use the DHS-27, Authorization to Release Information, when requesting client information from another agency.
  - Use the DHS-1555, Authorization to Release Protected Health Information, if requesting additional medical documentation. This form is primarily used for APS cases.
- Follow the rules of confidentiality when Home Help cases have companion Adult Protective Services cases; see [SRM 131, Confidentiality](#).

### Check MA/PET Button

The *Check MA/PET* button in MiAIMS contains information pertaining to the client's type of assistance (TOA) eligibility, scope of coverage, and program enrollment type (PET).

### Medical Tab

The *Medical* tab under the *Assessment* module in MiAIMS contains information regarding the physician(s), diagnosis, other health issues, adaptive equipment, medical treatments, and medications. The DHS-54A, Medical Needs certification signature date is entered in the *Medical* tab, at the initial certification and each time a new medical needs form is obtained; see ASM 115, Adult Services Requirements.

### Functional Tab

The *Functional* tab under the *Assessment* module in MiAIMS is the basis for service planning and for the Home Help services payment. Document the client's abilities and needs in the *Functional* tab to determine the client's ability to perform the following activities:

#### ***Activities of Daily Living (ADL)***

- Eating.
- Toileting.
- Bathing.
- Grooming.
- Dressing.
- Transferring.

- Mobility.

### ***Instrumental Activities of Daily Living (IADL)***

- Taking Medication.
- Meal preparation and cleanup.
- Shopping.
- Laundry.
- Light housework.

### ***Functional Scale***

ADLs and IADLs are assessed according to the following 5-point scale:

1. Independent.

Performs the activity safely with no human assistance.

2. Verbal assistance.

Performs the activity with verbal assistance such as reminding, guiding, or encouraging.

3. Some human assistance.

Performs the activity with some direct physical assistance and/or assistive technology.

4. Much human assistance.

Performs the activity with a great deal of human assistance and/or assistive technology.

5. Dependent.

Does not perform the activity even with human assistance and/or assistive technology.

Home Help payments may only be authorized for needs assessed at the ranking of level 3 or greater.

An individual must be assessed with at least one activity of daily living ranked 3 or higher or a complex care need to be eligible to receive Home Help services.

**Note:** If the assessment determines a need for an ADL at a level 3 or greater, but these services are not paid for by the department,

the individual would be eligible to receive IADL services if assessed at a level 3 or greater.

**Example:** Ms. Smith is assessed at a level 4 for bathing. However, she refuses to receive assistance, or her daughter agrees to assist her at no charge. Ms. Smith would be eligible to receive assistance with IADLs if the assessment determines a need at a level 3 or greater.

**Note:** If an individual uses adaptive equipment to assist with an ADL, and without the use of this equipment the person would require hands-on care, the individual must be ranked a level 3 or greater on the *Functional* tab in MiAIMS. This individual would be eligible to receive Home Help services.

**Example:** Mr. Jones utilizes a transfer bench to get in and out of the bathtub, which allows him to bathe himself without the hands-on assistance of another. The adult services worker (ASW) must rank Mr. Jones a 3 or greater under the *Functional* tab. Mr. Jones would be eligible to receive Home Help services.

Assistive technology includes such items as; walkers, wheelchairs, canes, reachers, lift chairs, bath benches, grab bars, and handheld showers.

See ASM 121, Functional Assessment Definitions and Ranks, for a description of the rankings for activities of daily living and instrumental activities of daily living.

### ***Complex Care Needs***

Complex care refers to conditions requiring intervention with special techniques and/or knowledge. These complex care tasks are performed on clients whose diagnoses or conditions require more management. Prior to performing complex care tasks, some conditions may also require special treatment and/or equipment instructions provided by the client or a health care professional, for example:

- Eating and feeding.
- Catheters or legs bags.
- Colostomy care.
- Bowel program.
- Suctioning.
- Specialized skin care.
- Range of motion exercises.

- Peritoneal dialysis.
- Wound care.
- Respiratory treatment.
- Ventilators.
- Injections.

When assessing a client with complex care needs, refer to the MDHHS-5535, Complex Care Assessment, from the *Forms* module in MiAIMS for assistance with activity ranking, frequency, and length of time needed per occurrence.

### Time and Task

The ASW will allocate time for each task assessed at a rank of 3 or greater, based on interviews with the client and caregiver, observation of the client's abilities, and use of the reasonable time schedule (RTS) as a **guide**. The RTS is built into the *Functional* tab within MiAIMS for each task. ASW's should modify how much time is needed based on the client's documented need.

MiAIMS includes a functional assessment time based on the ASW's assessment of the client's needs. MiAIMS also has a provider time and task based on the client's choice of activities and frequency to be performed by their chosen provider. The client functional assessment summary may be different from the provider time and task due to client choice or provider availability. The client's functional assessment summary indicates the maximum approved time based on the client's assessed need. Upon client request, the provider authorization may exceed the provider time and task, but may not exceed the client functional assessment. The ASW should document the reason for the variance from the provider time and task in the payment rationale box in MiAIMS.

**Note:** This allows flexibility for client choice while also assuring the basic needs of the client are being met. The caregiver must correctly document which tasks they are performing.

**Example:** Miss Smith has been assessed to need bathing assistance. However, she does not want her caregiver or agency provider to assist her with bathing. Miss Smith continues to do bathing on her own with difficulty. Miss Smith's functional assessment summary will have bathing allocated, but bathing will not be included in her provider's time and task.

An assessment of need, at a ranking of 3 or greater, does not automatically guarantee the suggested allotted time allowed by the

**RTS. The ASW must assess each task according to the average time and frequency required for its completion.**

**Example:** A client needs assistance with cutting up food. The ASW would only pay for the average time required to cut the food.

**Example:** On a good day, it takes the caregiver or agency provider 10 minutes to dress Miss Jones. On a bad day, when Miss Jones is in a lot of pain, it can take the caregiver or agency provider 20 minutes to assist Miss Jones with dressing. The average daily time needed is 15 minutes. Therefore 15 minutes is what is entered in the time and task.

**Example:** Sally is assessed needing an average of 20 minutes a day for bathing and reports frequency of 4 days a week. However, one day during the week, Sally was not feeling well and decided to skip her bath. The next day the caregiver assisted Sally with bathing in the morning and in the evening, due to illness. Both bathing activities totaled 20 minutes each. The frequency shows the caregiver only completed three days of bathing due to documentation restrictions. However, the caregiver assisted in four bathing occurrences during that week with one day having completed two baths.

**Note:** It is important to understand that each day a client may have different needs due to their health restrictions. Therefore, the average time and frequency may vary due to changes in the client's needs.

### ***IADL Maximum Allowable Hours***

There are monthly maximum hour limits on all instrumental activities of daily living (IADL), except medication. The limits are as follows:

- Five hours/month for shopping.
- Six hours/month for light housework.
- Seven hours/month for laundry.
- 25 hours/month for meal preparation.

### ***Proration of IADLs***

If the client does not require the maximum allowable hours for IADLs, authorize only the amount of time needed for each task. Assessed hours for IADLs (except medications) must be prorated by **one half** in shared living arrangements where other adults

reside in the home, as Home Help services are **only** for the benefit of the client.

**Note:** This does not include situations where others live in adjoining apartments/flats or in a separate home on shared property and there is no shared, common living area.

In shared living arrangements, where it can be **clearly** documented that IADLs for the eligible client are completed separately from others in the home, hours for IADLs do not need to be prorated.

**Example:**

- Client has special dietary needs and meals are prepared separately.
- Client is incontinent of bowel and/or bladder and laundry is completed separately.
- Client's shopping is completed separately due to special dietary needs and food is purchased from specialty stores, etc.
- Caregiver does not live with the client and completes the client's laundry, shopping, and meal preparation separately from the client's roommate. The client's roommate does their own laundry, shopping, and meal preparation, therefore, these IADLs are not prorated because the client is the only person benefiting from the service. However, housework is prorated as it is a common living area.

***Responsible Relatives***

A responsible relative is defined as an individual's spouse or a parent of an unmarried child under the age of 18.

Activities of daily living (ADLs) may be approved when the responsible relative is **unavailable** or **unable** to provide these services.

**Note:** **Unavailable** means absence from the home for an extended period due to employment, school, or other legitimate reasons. The responsible relative must provide a work or school schedule to verify they are unavailable to provide care. **Unable** means the responsible person has disabilities of their own which prevent them from providing care. These disabilities must be documented and

verified by a medical professional on the DHS-54A, Medical Needs, form.

Do **not** approve shopping, laundry, or light housecleaning when a responsible relative of the client resides in the home, **unless** they are unavailable or unable to provide these services. Document findings in the *Contacts* module in MiAIMS.

**Example:** Mrs. Smith needs Home Help services. Her spouse is employed and is out of the home Monday through Friday from 7a.m. to 7p.m. The ASW would not approve hours for shopping, laundry, or house cleaning as Mr. Smith is responsible for these tasks and is able to complete these tasks on the weekends.

### Expanded Home Help Services (EHHS)

Expanded Home Help Services (EHHS) exist when the client's functional assessment hours exceed 179.9 hours per month. The ASW must submit a written request for approval to [MDHHS-Expanded-Home-Help@michigan.gov](mailto:MDHHS-Expanded-Home-Help@michigan.gov) to assure the requested hours are appropriate, safe, and meet the client's needs. ASWs should follow the *Procedure for Submitting Expanded Home Help Requests* job aid found on the adult services home page.

**Note:** Travel time to complete shopping and laundry is not counted in the 179.9 hours when determining if an EHHS request must be completed.

The Home Help Policy Section will provide written documentation of approval using the DCH-1785, Policy Decision memo. A new request **must** be submitted to the [MDHHS-Expanded-Home-Help@michigan.gov](mailto:MDHHS-Expanded-Home-Help@michigan.gov) mailbox whenever there is an increase in the client's care that exceeds approved hours from a prior DCH-1785. A new request is **not** required if the care decreases below the approved hours.

If an Expanded Home Help Services case closes and reopens within 90 days and the care hours remain the same, a new approval is **not** required.



## Functional Assessment History

The goal of the functional assessment history within MiAIMS is to capture changes in the client's assessment. There are four options within the *Functional Assessment* tab:

- **+ Functional Assessment** is completed when opening a new Home Help case or when the ASW chooses to enter a brand-new assessment instead of editing an existing assessment.
- **Edit** is completed when changing the functional assessment.
- **Stop** is completed when a case is transferring to another county, a client is in the hospital or nursing home for an extended period, or case closing.
- **Delete** is completed when the assessment is entered in error (and no portion of the provider time and task has been paid).

The functional assessment period is linked to the authorization period of the case. If there is any change in the functional assessment, and there are active/existing authorization in MiAIMS, the authorization must be stopped.

**Note:** In the *Contacts* module, when entering a contact that is an SOP event (6-month review), a check box will appear asking if a change will be needed in the active assessment. A "yes" answer will result in the active functional assessment being suspended. A "no" answer will result in the active functional assessment remaining active.

**Note:** For instructions on how to utilize MiAIMS functional assessment history, see the MiAIMS Functional Assessment History job aid found on the Adult Services Home Page.

## CONTACT

For questions contact [MDHHS-Home-Help-Policy@michigan.gov](mailto:MDHHS-Home-Help-Policy@michigan.gov).