

HOUSE BILL No. 5950

April 23, 2002, Introduced by Reps. Van Woerkom, Scranton, Middaugh, Phillips, Pappageorge, Meyer, Gilbert, Vander Veen, Schauer, Voorhees, Hart, Tabor, Shackleton, Kooiman, Faunce, Gosselin, Birkholz, Spade, Bisbee, Ehardt, Hager, Zelenko, Jacobs, Jelinek, Lipsey, Mortimer and George and referred to the Committee on Health Policy.

A bill to amend 1939 PA 280, entitled
"The social welfare act,"
by amending section 109c (MCL 400.109c), as amended by 1994 PA
302.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 109c. (1) The state department shall include, as part
2 of its program of medical services under this act, home- or
3 community-based services to eligible persons whom the state
4 department determines would otherwise require nursing home serv-
5 ices or similar institutional care services under section 109.
6 The home- or community-based services shall be offered to quali-
7 fied eligible persons who are receiving inpatient hospital or
8 nursing home services as an alternative to those forms of care.

9 (2) The home- or community-based services shall include
10 safeguards adequate to protect the health and welfare of

1 participating eligible persons, and shall be provided according
2 to a written plan of care for each person. The services avail-
3 able under the home- or community-based services program shall
4 include, at a minimum, all of the following:

- 5 (a) Home delivered meals.
 - 6 (b) Chore services.
 - 7 (c) Homemaker services.
 - 8 (d) Respite care.
 - 9 (e) Personal care.
 - 10 (f) Adult day care.
 - 11 (g) Private duty nursing.
 - 12 (h) Mental health counseling.
 - 13 (i) Caregiver training.
 - 14 (j) Emergency response systems.
 - 15 (k) Home modification.
 - 16 (l) Transportation.
 - 17 (m) Medical equipment and supply services.
- 18 (3) This section shall be implemented so that the average
19 per capita expenditure for home- or community-based services for
20 eligible persons receiving those services does not exceed the
21 estimated average per capita expenditure that would have been
22 made for those persons had they been receiving nursing home serv-
23 ices, inpatient hospital or similar institutional care services
24 instead.
- 25 (4) The state department shall seek a waiver necessary to
26 implement this program from the federal department of health and
27 human services, as provided in section 1915 of title XIX,

1 42 U.S.C. 1396n. The department shall request any modifications
2 of the waiver that are necessary in order to expand the program
3 in accordance with subsection (9).

4 (5) The state department shall establish policy for identi-
5 fying the rules for persons receiving inpatient hospital or nurs-
6 ing home services who may qualify for home- or community-based
7 services. The rules shall contain, at a minimum, a listing of
8 diagnoses and patient conditions to which the option of home- or
9 community-based services may apply, and a procedure to determine
10 if the person qualifies for home- or community-based services.

11 (6) The state department shall provide to the legislature
12 and the governor an annual report showing the detail of its home-
13 and community-based case finding and placement activities. At a
14 minimum, the report shall contain each of the following:

15 (a) The number of persons provided home- or community-based
16 services who would otherwise require inpatient hospital
17 services. This shall include a description of medical condi-
18 tions, services provided, and projected cost savings for these
19 persons.

20 (b) The number of persons provided home- or community-based
21 services who would otherwise require nursing home services. This
22 shall include a description of medical conditions, services pro-
23 vided, and projected cost savings for these persons.

24 (c) The number of persons and the annual expenditure for
25 personal care services.

1 (d) The number of hearings requested concerning home- or
2 community-based services and the outcome of each hearing ~~which~~
3 THAT has been adjudicated during the year.

4 (7) The written plan of care required under subsection (2)
5 for an eligible person shall not be changed unless the change is
6 prospective only, and the state department does both of the
7 following:

8 (a) Not later than 30 days before making the change, except
9 in the case of emergency, consults with the eligible person or,
10 in the case of a child, with the child's parent or guardian.

11 (b) Consults with each medical service provider involved in
12 the change. This consultation shall be documented in writing.

13 (8) An eligible person who is receiving home- or
14 community-based services under this section, and who is dissatis-
15 fied with a change in his or her plan of care or a denial of any
16 home- or community-based service, may demand a hearing as pro-
17 vided in section 9, and subsequently may appeal the hearing deci-
18 sion to circuit court as provided in section 37.

19 (9) The state department shall expand the home- and
20 community-based services program by increasing the number of
21 counties in which it is available, in conformance with this
22 subsection. The program may be limited in total cost and in the
23 number of recipients per county who may receive services at 1
24 time. Subject to obtaining the waiver and any modifications of
25 the waiver sought under subsection (4), the program shall be
26 expanded as follows:

1 (a) Not later than ~~1 year after the effective date of this~~
2 ~~subsection~~ JULY 14, 1995, home- and community-based services
3 shall be available to eligible applicants in those counties that,
4 when combined, contain at least 1/4 of the population of this
5 state.

6 (b) Not later than ~~2 years after the effective date of this~~
7 ~~subsection~~ JULY 14, 1996, home- and community-based services
8 shall be available to eligible applicants in those counties that,
9 when combined, contain at least 1/2 of the population of this
10 state.

11 (c) Not later than ~~3 years after the effective date of this~~
12 ~~subsection~~ JULY 14, 1997, home- and community-based services
13 shall be available to eligible applicants in those counties that,
14 when combined, contain at least 3/4 of the population of this
15 state.

16 (d) Not later than ~~4 years after the effective date of this~~
17 ~~subsection~~ JULY 14, 1998, home- and community-based services
18 shall be available to eligible applicants on a statewide basis.

19 (10) The state department shall work with the office of
20 services to the aging in implementing the home- and
21 community-based services program, including the provision of pre-
22 admission screening, case management, and recipient access to
23 services.

24 (11) IF A PERSON RECEIVING HOME- OR COMMUNITY-BASED SERVICES
25 UNDER THIS SECTION NO LONGER REQUIRES THOSE SERVICES, THE DEPART-
26 MENT OF COMMUNITY HEALTH SHALL PROVIDE THE REMAINDER OF THE
27 PERSONAL EXPENDITURE FOR THAT PERSON TO ANOTHER ELIGIBLE PERSON.