

**STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
FOR THE DEPARTMENT OF COMMUNITY HEALTH**

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IN THE MATTER OF:

██████████

Appellant

Docket No. 2009-37164 TRN
Case No. ██████████

DECISION AND ORDER

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 42 CFR 431.200 *et seq.*, upon the Appellant's request for a hearing.

After due notice, a hearing was held on ██████████. ██████████ appeared on his own behalf. ██████████, appeals review officer, represented the Department. ██████████, ES, appeared as witnessed on behalf of the Department of Human Services (DHS).

ISSUE

Did the Department properly deny the Appellant's request for payment of transportation expenses?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

1. The Appellant is a ██████████ Medicaid beneficiary.
2. On ██████████, the Appellant called an ambulance to transport him to ██████████. The hospital did not admit the Appellant and diagnosed him with a knee strain in the ER. The Appellant called one of the Department's volunteer transporters, to drive him back home from the hospital. (Testimony and Department Exhibit 1, page 5)
3. On ██████████ the Department received the Appellant's request for

reimbursement for medical transportation. (Department Exhibit 1, page 5).

4. On ██████████, the request for transportation reimbursement for the round trip made by the volunteer transporter was denied by the Department because the necessary verification of the need for medical transportation was not provided. (Department Exhibit 1, page 4).
5. The Appellant requested an administrative hearing contesting the transportation denial on ██████████. However, a signed request for an administrative hearing was not received until ██████████. (Department Exhibit 1, page 3)

CONCLUSIONS OF LAW

The Medicaid program was established pursuant to Title XIX of the Social Security Act (SSA) and is implemented by 42 USC 1396 *et seq.*, and Title 42 of the Code of Federal Regulations (42 CFR 430 *et seq.*). The program is administered in accordance with state statute, the Social Welfare Act (MCL 400.1 *et seq.*), various portions of Michigan's Administrative Code (1979 AC, R 400.1101 *et seq.*), and the State Plan promulgated pursuant to Title XIX of the SSA.

The medical transportation coverage under the State Medicaid Plan is stated in Bridges Administrative Manual (BAM), 825 Medical Transportation, August 1, 2008.

Medical transportation is available to Medicaid recipients for the purpose of obtaining medical evidence or to receive any Medicaid covered service from any Medicaid enrolled provider, including:

- Chronic and ongoing treatment
- Prescriptions
- Medical supplies
- Onetime, occasional, and ongoing visits for medical care.

Medical Transportation is not covered for:

- Transportation for noncovered services (e.g., AA meetings, medically unsupervised weight reduction, trips to pharmacies for reasons other than obtaining MA-covered items).
- Reimbursement for transportation for episodic medical services and pharmacy visits that has already been provided.
- Transportation costs for long-term care (LTC) residents. LTC facilities are expected to provide transportation for services outside their facilities.
- Transportation costs to meet a client's personal choice of provider for routine medical care outside the community when comparable care is available locally. Encourage clients to obtain medical care in

their own community unless referred elsewhere by their local physician.

(BAM 825, pages 1-2).

In order for medical transportation to be administered in an equitable and consistent manner, Department policy directs local offices to have procedures to assure medical transportation eligibility and that payment reflect this policy. (BAM 825, page 3)

In the present case, the Appellant was taken from his home in [REDACTED] [REDACTED] by ambulance on [REDACTED]. The Appellant testified he called the ambulance to take him to the hospital for his leg pain because he has a history of blood clots and there was not a local emergency clinic open that late on a Saturday. The Appellant stated that the hospital did not admit him; instead he was discharged from the ER with a diagnosis of knee sprain. The Appellant explained he then called one of the Department's volunteer transporters, whom he knew from prior unrelated trips, to drive him back home from the hospital. The volunteer transporter, who lives in [REDACTED], left at 9:00 pm for the trip to [REDACTED] to pick up the Appellant, transported the Appellant to his home in [REDACTED], and returned to [REDACTED] at 1:00 am. (Department Exhibit 1, page 5)

The Department witness testified that their local office has standard procedures for medical transportation requests. The Department explained that these procedures include giving prior notice to the Department so they can send out a medical needs form to the treatment provider to verify the medical necessity of the trip. The Department witness stated that the Appellant has made many prior medical transportation requests and therefore was well aware of the local office procedures.

The Appellant testified that in this instance, he could not have given the Department prior notice because it was an emergency trip. The Appellant stated he did not have documentation from his ER visit and would need the Department's assistance to get this information from the hospital. The Appellant testified that when he submitted the Medical Transportation Statement (Department Exhibit 1 page 5), he did not give the Department any explanation that this had been an emergency trip, or make any request for assistance in obtaining documentation.

The Department witness testified that when she received the Medical Transportation Statement submitted by the Appellant, she did not realize this had been for an emergency that occurred late on a Saturday when no local treatment providers would be available. However, the travel date and the departure and return times were clearly listed by the volunteer transporter on the Medical Transportation Statement. (Department Exhibit 1, page 5) While the local office procedure requires requests for medical transportation to be made by the Medicaid recipient in advance, emergency situations can arise that prohibit giving prior notice. An exception should be made from the local office procedure in emergency circumstances.

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The Medical Transportation Notice indicates that the denial was based on a failure to provide necessary verification. (Department Exhibit 1, page 4) However, the Department witness testified that she never contacted the Appellant to request any additional documentation before she issued the denial. While it would have been helpful if the Appellant had submitted his request to the Department with the needed verification or at least an explanation of the circumstances, the Department was required to give the Appellant notice to submit this information. When verification is needed for any program, Department policy directs that the client be told what verification is required, how to obtain it, and the due date. The Department is also required to assist with gathering the documentation if help is needed and requested. (BAM 130 pages 2-3)

The Department's denial of the medical transportation request, based upon the Appellant's failure to provide verification, was not proper. The Department failed to give the Appellant notice and the opportunity to provide the needed documentation before denying the medical transportation request.

DECISION AND ORDER

This Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department improperly denied the Appellant's request for medical transportation expenses.

IT IS THEREFORE ORDERED that:

The Department's decision is REVERSED. Therefore, the Department is ordered to issue a notice to the Appellant indicating what verifications are needed to process the [REDACTED], medical transportation request, providing assistance in gathering the documentation if requested.

Colleen Lack
Administrative Law Judge
for Janet Olszewski, Director
Michigan Department of Community Health

cc:

[REDACTED]

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Date Mailed: 1/6/2010

***** NOTICE *****

The State Office of Administrative Hearings and Rules may order a rehearing on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. The State Office of Administrative Hearings and Rules will not order a rehearing on the Department's motion where the final decision or rehearing cannot be implemented within 90 days of the filing of the original request. The Appellant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt of the rehearing decision.