

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

P.O. Box 30763, Lansing, MI 48909  
(877) 833-0870; Fax: (517) 334-9505

IN THE MATTER OF:

██████████,

Appellant

\_\_\_\_\_ /

**Docket No.** 2010-2213 CL  
**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 ██████████. ██████████ represented ██████████.

██████████, represented the Department. ██████████ appeared as a witness for the Department.

**ISSUE**

Did the Department properly reduce the amount of Incontinent Wipes authorized for the Appellant's use each month?

**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 ██████████ male who has multiple medical issues. He is incontinent. (uncontested)
2. The Appellant attends school. At the time of the last nursing assessment, he was not attending school full time, Monday-Friday. (Department Exhibit A, page 7)

3. The Appellant now attends school Monday through Friday. (testimony from the Appellant's father at hearing)
4. Wipes are only provided by the Department for use outside the home. (Department Exhibit A, page 9)
5. On ██████████, the Department notified the Appellant the number of wipes he was authorized to receive coverage for each month was being reduced from 2 boxes to 1 box.
6. The Department's reason for reduction in the number of wipes provided was based upon the information that the Appellant was only leaving the home 2 to 3 days per week. (testimony from Department witness)
7. On ██████████, the Department received Appellant's Request for Hearing, protesting an alleged termination of diapers and milk.
8. The Department of Community Health has not reduced or terminated coverage for the Appellant's diapers. The Department of Community Health, incontinent supplies section, has no knowledge of termination or reduction in any food supplement program the Appellant may participate in.

### **CONCLUSIONS OF LAW**

The Medical Assistance Program is established pursuant to Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). It is administered in accordance with state statute, the Social Welfare Act, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program.

New Department policy regarding Medicaid covered incontinent supplies went into effect on April 1, 2005. The new policy appeared first in the form of a MSA Bulletin and was incorporated into the Medicaid Provider Manual on April 1, 2005, where it remains currently.

The Department policy on pull-on brief coverage, as addressed in the MDCH Medicaid Provider Manual:

#### **2.19 Incontinent Supplies**

Incontinent supplies are items used to assist individuals with the inability to control excretory functions.

The type of coverage for incontinent supplies may be dependent on the success or failure of a bowel/bladder training

program. A bowel/bladder training program is defined as instruction offered to the beneficiary to facilitate:

- Independent care of bodily functions through proper toilet training.
- Appropriate self-catheter care to decrease risk of urinary infections and/or avoid bladder distention.
- Proper techniques related to routine bowel evacuation.

**Diapers, incontinent pants, liners, and belted/unbelted undergarments without sides** are covered for individuals age three or older if both of the following applies:

- A medical condition resulting in incontinence and there is no response to a bowel/bladder training program.
- The medical condition being treated results in incontinence, and beneficiary would not benefit from or has failed a bowel/bladder training program.

**Pull-on briefs** are covered for beneficiaries age 3 through 20 when there is the presence of a medical condition causing bowel/bladder incontinence, and one of the following applies:

- The beneficiary would not benefit from a bowel/bladder program but has the cognitive ability to independently care for his/her toileting needs, **or**
- The beneficiary is actively participating and demonstrating definitive progress in a bowel/bladder program. (Emphasis added.)

**Pull-on briefs** are covered for beneficiaries age 21 and over when there is the presence of a medical condition causing bowel/bladder incontinence and the beneficiary is able to care for his/her toileting needs independently or with minimal assistance from a caregiver. **(per bulletin MSA 05-12 effective 4/1/05)**

Continued Coverage for Pull-On Briefs: Pull-on briefs are considered a short-term transitional product that requires a reassessment every six months. The assessment must detail definitive progress being made in the bowel/bladder training. Pull-on briefs covered as a long-term item require a reassessment once a year. Documentation of the

reassessment must be kept in the beneficiary's file. (per bulletin MSA 05-12 effective 4/1/05)

Continued Coverage for Pull-On Briefs: Pull-on briefs are considered a short-term transitional product that requires a reassessment every six months. The assessment must detail definitive progress being made in the bowel/bladder training. Pull-on briefs covered as a long-term item require a reassessment once a year. Documentation of the reassessment must be kept in the beneficiary's file.

**Incontinent wipes are covered when necessary to maintain cleanliness outside of the home.**

**Intermittent catheters** are covered when catheterization is required due to severe bladder dysfunction.

**Hydrophilic-coated intermittent catheters** are considered for individuals that have Mitrofanoff stomas, partial stricture or small, tortuous urethras.

**Disposable underpads** are covered for beneficiaries of all ages with a medical condition resulting in incontinence.

Documentation must be less than 30 days old and include the following:

- Diagnosis of condition causing incontinence (primary & secondary diagnosis).
- Item to be dispensed.
- Duration of need.
- Quantity of item and anticipated frequency the item requires replacement.
- For pull-up briefs, a six-month reassessment is required.

*MDCH Medicaid Provider Manual, Medical Supplier Section,  
effective July 1, 2007.*

The Appellant had been approved for two boxes of wipes per month. Following the most recent nursing assessment, the authorization was reduced to 1 box per month, based upon the information provided by the Appellant's father that the Appellant only left the home 2 to 3 days per week. At hearing, the Appellant's father stated he was back in school full time now and had been for the last three weeks. He was informed

[REDACTED]  
Docket No. 2010-2213 CL  
Decision and Order

that if he notified the supplier of the change in circumstances, a change in authorization should result. He was advised to inform the supplier that his son was back in school full time again.

The Appellant's father was informed the notice sent him did not reduce or terminate coverage for diapers or milk.

This Administrative Law Judge finds the Department's reduction in accord with established policy and supported by the nursing assessment. The Appellant did not contest the contents of the nursing assessment and in fact provided testimony consistent with it. He indicated his son was back at school for the last three weeks. The nursing assessment had taken place [REDACTED], thus his son was not in school full time at the time of assessment. Coverage for the time he is outside the home is all the policy allows coverage for, thus a reduction was proper based upon the information the Department had at the time of decision.

**DECISION AND ORDER**

The Administrative Law Judge, based on the above findings of fact and conclusions of law, finds the Department properly reduced the authorization for wipes from 2 boxes per month to 1.

**IT IS THEREFORE ORDERED** that

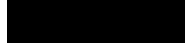
The Department's decision is AFFIRMED.

---

Jennifer Isiogu  
Administrative Law Judge  
for Janet Olszewski, Director  
Michigan Department of Community Health

cc: [REDACTED]

Date Mailed: 12/1/2009

  
Docket No. 2010-2213 CL  
Decision and Order

**\*\*\* 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.