

**STATE OF MICHIGAN**  
**MICHIGAN ADMINISTRATIVE HEARING SYSTEM**  
**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

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Docket No. 2011-46391 TRN  
Case No. ██████████

**DECISION AND ORDER**

This matter is before the undersigned Administrative Law Judge (ALJ) 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 ██████████ ██████████, the Appellant, appeared on his own behalf. ██████████, ex-spouse, appeared as a witness for the Appellant. ██████████, Appeals Review Officer, represented the Department. ██████████ Community Resources Coordinator, Medicaid Department Analyst, appeared as a witness on behalf of the Department.

**ISSUE**

Did the Department properly deny the Appellant's request for medical transportation mileage reimbursement?

**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. The Appellant's ex-spouse transported him to doctor appointments on ██████████, and ██████████. (Exhibit 1, page 5)
3. On ██████████, the Department received a MSA-4674 Medical Transportation Statement seeking mileage reimbursement for medical transportation for doctor appointments on ██████████ and ██████████. There were no signatures from the medical provider or his staff. (Exhibit 1, page 5)

4. On ██████████, the Department issued a Medical Transportation Notice to the Appellant indicating that his request could not be approved because the Medical Transportation Statement was received more than 90 days after the dates of the appointments. (Exhibit 1, page 4)
5. On ██████████, the Appellant filed a hearing request contesting the Department's denial of medical transportation mileage reimbursement. (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.

Department policy governing medical transportation coverage is found in the Bridges Administrative Manual (BAM), Section 825, Medical Transportation:

#### **COVERED MEDICAL TRANSPORTATION**

Medical transportation is available to obtain medical evidence or receive any MA- covered service from any MA-enrolled provider, including:

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

#### ***Exception:***

Payment may be made for transportation to V.A. hospitals and hospitals which do not charge for care (such as St. Jude Children's Hospital, Shriners Hospital).

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#### **Payment Authorization**

#### **MSA-4674**

Use the MSA-4674, Medical Transportation Statement, to:

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- Authorize payment for routine travel expenses that do not require advance payment,
- Verify that transportation was provided.

Use an MSA-4674 to authorize payment whenever a less expensive means for medical transportation is not otherwise available. Use comparable documentation from the provider and/or transporter if the client is unable to obtain the MSA-4674 prior to a medical visit.

A separate MSA-4674 is required for each medical provider or transporter. Chronic and ongoing treatment to the **same provider** may have more than 5 multiple trips within a calendar month reflected on the MSA-4674-A, Medical Transportation Statement - Chronic and Ongoing Treatment; see Reference Forms & Publications (RFF) manual.

You must receive the MSA-4674 within 90 days from the date of service in order to authorize payment. Do not make payment less frequently than monthly.

**Exception:** An MSA-4674 is not required for volunteer services drivers if an DHS-4681, Volunteer Transportation Request/Authorization, is submitted for payment to the local office fiscal unit.

The client and medical provider(s) (or their staff) must sign the form. The transporter must sign if payment is to be issued to the transporter, except for mass transit transporters.

*Bridges Administrative Manual (BAM),  
Section 825 Medical Transportation,  
January 1, 2011, Pages 2 and 11-12 of 17  
(emphasis in original).*

The Community Resource Coordinator testified that the Department denied the Appellant's request for medical transportation mileage reimbursement because the Medical Transportation Statement was received on ██████████, which was over 90 days from the ██████████ and ██████████ doctor appointment dates. (See Exhibit 1, page 5) She explained that the denial was in accordance with the above cited policy requiring the MSA-4674 Medical Transportation Statement to be received within 90 days from the date of service in order to authorize payment.

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The Appellant disagrees with the denial. The Appellant's ex-spouse testified that when they spoke to the Community Resource Director around [REDACTED], she stated that the Department could go back 90 days. The Appellant's ex-spouse stated that this was one of the first Medical Transportation Statements they sent in. She explained that it was too far to drive to the doctor's office to have them complete their portion of the form, so they mailed it to the doctor's office and asked them to mail it back to the Department of Human Services office. The Appellant's ex-spouse did not know when the doctor's office mailed the form back to the Department of Human Services or why it was not signed by the doctor.

While this ALJ sympathizes with the Appellant's circumstances, Department policy does not allow for payment if the MSA-4674 Medical Transportation Statement was received more than 90 days from the date of service. Further, the policy requires a signature from the medical provider or their staff. Unfortunately, the MSA-4674 Medical Transportation Statement for the [REDACTED] and [REDACTED], appointments was not returned to the Department of Human Services office within 90 days of the appointment dates and was not signed by the medical provider or their staff. (Exhibit 1, page 5) The Department's denial of medical transportation mileage reimbursement must be upheld.

**DECISION AND ORDER**

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

**IT IS THEREFORE ORDERED** that:

The Department's decision is **AFFIRMED**.

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Colleen Lack  
Administrative Law Judge  
for Olga Dazzo, Director  
Michigan Department of Community Health

cc:

[REDACTED]

Date Mailed: 10/11/2011

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**\*\*\* NOTICE \*\*\***

The Michigan Administrative Hearing System 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 Michigan Administrative Hearing System 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.