

**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:

Docket No. 2012-21566 PA  
Case No. [REDACTED]

[REDACTED],

Appellant

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**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 [REDACTED]. The Appellant was represented by his mother, [REDACTED].

[REDACTED], Manager of the Appeals and Review section for the Department of Community Health represented the Department. [REDACTED], R. N. analyst was the Department witness.

**ISSUE**

Did the Department properly deny Appellant's request for Prior Authorization (PA) of a sleep Apnea Monitor?

**FINDINGS OF FACT**

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

1. At the time of hearing the Appellant is a [REDACTED] year-old infant.
2. The Appellant is a Medicaid beneficiary.
3. On [REDACTED], the Department received the request for Prior Authorization (PA) of an Apnea Monitor.
4. The Apnea Monitor the Department received PA request for was delivered to the Appellant in [REDACTED].

5. On [REDACTED] the request was reviewed by the Department and denied based on Medicaid policy.
6. The Appellant requested a formal administrative hearing [REDACTED].

## **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.

Prior Authorization is not required if the standards of Coverage are met. The Standards of Coverage are specified below, citing the Medicaid Provider Manual.

### **2.1 APNEA MONITOR**

**Definition** An apnea monitor measures both heart rate and respirations and meets all of the Equipment Control Regulatory Industry (ECRI) Standards for home monitors.

**A Newborn Infant Following Hospital Discharge –**  
Units are covered for a newborn infant up to three months following hospital discharge if one of the following diagnoses or medical conditions applies:

- Apnea of newborn
- Apnea of prematurity
- Apparent life threatening event (ALTE)
- Sibling of Sudden Infant Death Syndrome (SIDS)
- Bronchopulmonary Dysplasia

**A Sibling of Sudden Infant Death Syndrome (SIDS) Following Hospital Discharge –**

- Units are covered for up to one month past the age of the sibling who died from SIDS; or
- Up to three months past the age of the sibling who died if the child was a twin of the beneficiary being monitored.

**An Acute Respiratory Illness** - Short-term coverage of a unit (up to two months) is a benefit when the beneficiary has a respiratory illness/diagnosis such as Pertussis, Respiratory Syncytial Virus (RSV), or Pneumonia.

**As a Diagnostic Tool** - Short-term coverage of a unit (up to three months) used as a diagnostic tool is a benefit if the infant is under three months of age at set up, and the parent and/or guardian reports suspected events.

**Beneficiaries with Tracheostomy** – Units are generally not covered for beneficiaries who have a tracheostomy. Units may be considered for coverage only if, after careful evaluation of current treatment plan and equipment already in the home, the beneficiary's medical needs are still not met. Documentation explaining the medical need must be submitted with a detailed plan of management.

**Beneficiaries who are Ventilator Dependent** - Units are considered to be included in the ventilator reimbursement to function as a back up alarm for the ventilator low-pressure alarm.

*MPM, Medical Supplier § 2.1,  
October 1, 2011*

### **PA Requirements**

PA is not required for any of the following if the Standards of Coverage are met:

- Up to three months usage for newborn infants following a hospital discharge
- Up to three months usage for siblings of SIDS following a hospital discharge
- Used up to two months due to a respiratory illness (e.g., Pertussis, Respiratory Syncytial Virus (RSV), or Pneumonia).

- Used up to three months as a diagnostic tool for the following diagnoses or medical conditions:
  - Apnea of newborn
  - Apnea of prematurity
  - Apparent life threatening event (ALTE)
  - Sibling of Sudden Infant Death Syndrome (SIDS)
  - Bronchopulmonary Dysplasia

PA is required for either of the following:

- Continuation of the monitor beyond the initial two or three months.
- For other diagnosis/medical conditions or applications not indicated in the Standards of Coverage.

MPM Medical Supplier  
Version Date: October 1, 2011.

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The testimony from the Department witness established the request was received retroactively dating back to [REDACTED]. The request for Prior Authorization was not received until [REDACTED]. The Department cannot approve Prior Authorization for equipment that was already delivered normally. Furthermore, the data that was downloaded from the apnea monitor that was being used showed no events during its use, thus no medical necessity can be established.

The Appellant's representative stated the child was hospitalized for 3 months at birth and did not come home until he was three months old. She had to call the fire department out to the house in [REDACTED] because he had stopped breathing and he was blue. She got a monitor after that. She further stated the doctor wanted him on the machine until [REDACTED].

After review of the uncontested material facts and Department policy, the evidence of record establishes that the Appellant does not meet the criteria set forth in the Medicaid Provider Manual for continued coverage of an Apnea Monitor. Therefore, the department's decision to deny coverage was appropriate.

**DECISION AND ORDER**

The 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 prior authorization of the apnea monitor.

**IT IS THEREFORE ORDERED** that:

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

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Jennifer Isioug  
Administrative Law Judge  
for Olga Dazzo, Director  
Michigan Department of Community Health

cc:

[REDACTED]

Date Mailed: 3/23/2012

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

The Administrative Tribunal 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 Administrative Tribunal 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 mailing date of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the mailing date of the rehearing decision.

