



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

MIKE ZIMMER
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
MAHS Docket No.: 16-002063
[REDACTED]
[REDACTED]

ADMINISTRATIVE LAW JUDGE: Steven Kibit

DECISION AND ORDER

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

After due notice, a telephone hearing was held on [REDACTED]. Petitioner appeared and testified on her own behalf. [REDACTED], Appeals Review Officer, represented the Respondent Department of Health and Human Services (DHHS or Department). [REDACTED], a Manager with the Department's Program Review Division, testified as a witness for Respondent.

ISSUE

Did the Department properly deny Petitioner's request for medical transportation?

FINDINGS OF FACT

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

1. In [REDACTED] [REDACTED], Petitioner submitted a request for medical transportation to [REDACTED], a contracted provider for the Department, for an appointment on [REDACTED]. (Testimony of Petitioner; Testimony of Department's witness).
2. On [REDACTED], a representative from [REDACTED] contacted Petitioner's office and learned that the appointment was related to bariatric/weight reduction services. (Exhibit A, page 8; Testimony of Department's witness).

3. On [REDACTED] sent Petitioner written notice that the request for transportation was denied because the transportation would be for a non-covered service. (Exhibit A, page 17).
4. [REDACTED] also attempted to call Petitioner on the telephone, but did not make contact. (Exhibit A, page 8).
5. On [REDACTED] [REDACTED] [REDACTED] Petitioner called [REDACTED] to cancel the reservation and was advised that the request had already been denied. (Exhibit A, page 8; Testimony of Petitioner).
6. On [REDACTED] the Michigan Administrative Hearing System (MAHS) received the request for hearing filed by Petitioner in this matter regarding that denial. (Exhibit A, page 5).

CONCLUSIONS OF LAW

The Medicaid program (MA) 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.

Policy addressing medical transportation coverage under the State Medicaid Plan is found in the Bridges Administrative Manual (BAM), 825 Medical Transportation:

Each Michigan Department of Health and Human Services (MDHHS) office must furnish information in writing and orally, as appropriate, to any requesting individual, acknowledging that medical transportation is **ensured** to and from Medicaid (MA) covered services. The Michigan Medicaid Fee-for-Service Handbook may be used to provide written information.

Local MDHHS staff **must** verify client eligibility prior to the authorization of transportation in order to determine who is responsible for reimbursement.

Reimbursement for medical transportation may be authorized only after it has been determined that it is not otherwise available, and then for the least expensive available means suitable to the beneficiary's needs.

Medical transportation is available to:

- Family Independence Program (FIP) recipients.
- MA recipients (including those who also have Children's Special Health Care Services (CSHCS) coverage).
- Supplemental Security Income (SSI) recipients.
- Healthy Michigan Plan (HMP) recipients.

Note: Unless otherwise indicated, medical transportation coverage for HMP recipients is the same as medical transportation coverage for MA recipients.

MDHHS authorized transportation is limited for clients enrolled in managed care; see **CLIENTS IN MANAGED CARE**.

* * *

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,
- Onetime, occasional and ongoing visits for medical care.

Exception: Reimbursement may be made for transportation to U.S. Department of Veteran Affairs hospitals and hospitals which do not charge for care.

MEDICAL TRANSPORTATION NOT COVERED

Do not authorize payment for the following:

- Transportation for non-covered services;
- Waiting time;
- Transportation for medical services that have already been provided;

- Transportation costs for clients residing in a nursing facility. Nursing 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.
- Transportation services that are billed directly to the Medical Services Administration (MSA); see **BILLED DIRECTLY TO MSA.**

Transportation for clients enrolled in managed care is limited. See **CLIENTS IN MANAGED CARE.**

BAM 825, pages 1-2

Here, the Department denied Petitioner's requests for transportation pursuant to the above policy and on the basis that the transportation would be for non-covered services and therefore could not be authorized. Specifically, as described by its witness, the request for transportation was denied because it was for an appointment involving weight reduction services; such services are only covered if the beneficiary has received prior authorization for them, see Medicaid Provider Manual (MPM), January 1, 2016 version, Practitioner Chapter, page 24; and no such prior authorization was obtained in this case.

In response, Petitioner did not dispute that the appointment was for bariatric adjustments or that she did not obtain prior authorization for such services before the appointment. However, she also testified that she has been seeing the same doctor for the same services for approximately ten years and that she has never had an issue getting medical transportation approved. She also testified that this appointment was no different than other appointments where transportation was approved and she expressed some frustration with how the denial was communicated to her.

Petitioner bears the burden of proving by a preponderance of the evidence that the Department erred in denying her request.

Given the undisputed evidence in this case, Petitioner has failed to meet that burden of proof and the Department's decision must be affirmed. Petitioner sought transportation for an appointment relating to weight reduction services, but, as provided in the MPM, her physician must obtain prior authorization for such services to be covered. Here, no such prior authorization was obtained; the services were therefore non-covered; and medical transportation could not be approved under the applicable policy. Moreover, while Petitioner may have been approved for medical transportation to the same doctor

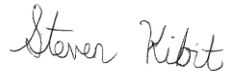
for the same types of services in the past without getting prior authorization first, those past approvals are beyond the scope of this proceeding and any past approval, whether a mistake or not, has no effect on this review. With respect to the sole denial at issue in this case, the Department's decision was proper and must be affirmed.

DECISION AND ORDER

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, decides that the Department properly denied Petitioner's request for transportation.

IT IS, THEREFORE, ORDERED that:

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



SK/db

Steven Kibit
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; Attention: MAHS Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P.O. Box 30763
Lansing, Michigan 48909-8139

Petitioner

[REDACTED]
[REDACTED]
[REDACTED] [REDACTED]

DHHS Department Rep.

[REDACTED]
[REDACTED]
[REDACTED] [REDACTED]

Agency Representative

[REDACTED]
[REDACTED]
[REDACTED] [REDACTED]