



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: January 18, 2017
MAHS Docket No.: 16-016616
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Landis Lain

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 Petitioner's request for a hearing.

After due notice, a hearing was held on January 11, 2017. Petitioner's Mother [REDACTED] appeared on behalf of the Petitioner, [REDACTED], [REDACTED] and [REDACTED] represented the Department of Health and Human Services (Department or State).

State's Exhibit A pages 1-47 were admitted as evidence.

ISSUE

Did the Department properly deny Petitioner's request for prior authorization?

FINDINGS OF FACT

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

1. Petitioner is a Medicaid beneficiary.
2. Petitioner is diagnosed with cerebral palsy causing spastic quadriplegia. She has minimal control of her body, head or torso.
3. On September 20, 2016, the Department of Health and Human Services, Michigan Medicaid/Children's Special Health Care Services (CSHCS) received prior authorization request from [REDACTED] Wheelchair Seating Service for a Freedom design wheelchair with accessories.

4. The wheelchair and most of the accessories were approved.
5. The reclining back strap and strap riser shoulder harness were denied.
6. On October 18, 2016 a Notice of Amended Authorization that Procedure Code E1014 Reclining Back Add Ped W/C [REDACTED] was denied because the documentation submitted does not support the medical necessity or meet the coverage requirements for the requested reclining back in addition to the standard tilt in space function. The documentation does not support the medical necessity for the requested strap riser shoulder harness guides when an E0960 shoulder harness has not been requested.
7. On November 16, 2016, the Michigan Administrative Hearings System received a Request for Hearing contesting the denial of medical equipment.

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.

The Children's Special Health Care Services program is established pursuant to 42 USC 700, *et seq.* It is administered in accordance with MCL 333.5805, *et seq.*

Children's Special Health Care Services (CSHCS) is a program within the Michigan Department of Community Health (MDCH) created to find, diagnose, and treat children in Michigan who have chronic illnesses or disabling conditions. CSHCS is mandated by the Michigan Public Health Code, Public Act 368 of 1978, in cooperation with the federal government under Title V of the Social Security Act and the annual MDCH Appropriations Act. CSHCS promotes the development of service structures that offer specialty health care for the CSHCS qualifying condition that is family centered, community based, coordinated, and culturally competent.

MDCH covers medically necessary services related to the CSHCS qualifying condition for individuals who are enrolled in the CSHCS Program. Medical eligibility must be established by MDCH before the individual is eligible to apply for CSHCS coverage. Based on medical information submitted by providers, a medically eligible individual is

provided an application for determination of nonmedical program criteria.

An individual may be eligible for CSHCS and eligible for other medical programs such as Medicaid, Adult Benefits Waiver (ABW), Medicare, or MICHild. To be determined dually eligible, the individual must meet the eligibility criteria for CSHCS and for the other applicable program(s).

Medicaid Provider Manual (MPM), Children's Special Health
Care Services, Section 1, April 1, 2013

Medicaid covers medical supplies, durable medical equipment (DME), orthotics, and prosthetics for use in the beneficiary's place of residence except for skilled nursing or nursing facilities.

*Medicaid Provider Manual, Medical Supplier,
Section 1.3 page 3, October 1, 2015*

Medical devices are covered if they are the most cost-effective treatment available and meet the Standards of Coverage stated in the Coverage Conditions and Requirements Section of this chapter. The medical record must contain sufficient documentation of the beneficiary's medical condition to substantiate the necessity for the type and quantity of items ordered and for the frequency of use or replacement. The information should include the beneficiary's diagnosis, medical condition, and other pertinent information including, but not limited to, duration of the condition, clinical course, prognosis, nature and extent of functional limitations, other therapeutic interventions and results, and past experience with related matters. Information in the medical record must support the item's medical necessity and substantiate that the medical medical device needed is the most appropriate economic alternative that meets MDHHS standards of coverage.

*Medicaid Provider Manual, Medical Supplier,
Section 1.3 page 4, October 1, 2015*

Coverage of both a manual tilt-in-space and recline function for a wheelchair requires medical need (such as high probability of the development of hip contractures) if only tilt-in-space without recline is used. Also, there is a medical contraindication to using recline-only without the tilt-in-space function.

*Medicaid Provider Manual, Medical Supplier,
Section 2.48, page 96, October 1, 2015*

Petitioner's Representative testified that she understood the denial and would have her physician resubmit a request with additional information so that Petitioner can be reconsidered for the reclining feature of the new chair and chest harness.

Respondent indicated that the strap riser was denied because it is an accessory item which needs a shoulder harness to be useful and the shoulder harness was not requested. There was insufficient medical documentation to show that the transit option was medically necessary.

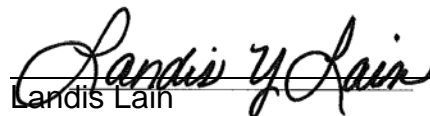
The Department has established by the necessary competent, material and substantial evidence on the record that it was acting in compliance with Department policy when it denied Petitioner's prior authorization request for a strap riser and transit option.

The Administrative Law Judge, based on the above findings of fact and conclusions of law, decides that the Department properly denied the Petitioner's prior authorization request under the circumstances.

IT IS THEREFORE ORDERED that:

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

LL/sb



Landis Lain

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

DHHS Department Rep.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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