



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS
DIRECTOR

[REDACTED]
MI [REDACTED]

Date Mailed: May 7, 2021
MOAHR Docket No.: 21-001615
Agency No.:
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Jeffrey Kemm

DECISION AND ORDER

Following Petitioner's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; 42 CFR 438.400 to 438.424; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on May 4, 2021. Petitioner, [REDACTED] appeared and represented herself. Respondent, Meridian Health, had Lisa Kenny, Operations Manager, appear as its representative. Neither party had any additional witnesses.

ISSUE

Whether Meridian Health properly denied Petitioner's request for 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. Petitioner is a Medicaid beneficiary, and Respondent provides her Medicaid benefits.
2. Respondent provides mileage reimbursement to its members as a Medicaid benefit.
3. Respondent has a transportation vendor it uses to provide transportation for its members.
4. When a member wants to claim mileage reimbursement for a trip that is more than 100 miles each way, the member must obtain prior authorization from Respondent. The member obtains prior authorization by contacting Respondent's transportation vendor with information about the trip, including the

doctor's office. Respondent's transportation vendor then assigns the trip an identification number and submits it to Respondent for approval.

5. On or about January 1, 2021, Petitioner contacted Respondent's transportation vendor to set up transportation to an appointment in [REDACTED]
6. Petitioner was required to obtain prior authorization from Respondent because the trip was more than 100 miles each way.
7. Petitioner did not provide the transportation vendor with information about the doctor's office initially, but Petitioner called back later and provided the information.
8. Petitioner called the transportation vendor back a few days later to check on her trip, and the transportation vendor provided Petitioner with a trip identification number and advised Petitioner that the trip was approved.
9. On or about [REDACTED] 2021, Petitioner went to her appointment in [REDACTED] and had the doctor's office sign her transportation log with the trip identified by the number Respondent provided.
10. Petitioner submitted her signed transportation log to Respondent for reimbursement for 216 miles of transportation to and from her appointment.
11. Respondent denied Petitioner's request for mileage reimbursement because it alleged that Petitioner did not obtain prior authorization as required.
12. Petitioner requested a hearing to dispute the denial.

CONCLUSIONS OF LAW

The Medical Assistance Program (MA) 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.

Respondent is a Medicaid Health Plan that provides Medicaid benefits to individual enrollees, including Petitioner. Respondent denied Petitioner's request for mileage reimbursement because it determined that Petitioner did not obtain prior authorization as required. Based on the evidence presented, Petitioner followed all the steps necessary to obtain prior authorization from Respondent before the date of her trip, and Respondent did not advise Petitioner before the date of her trip that her request for prior authorization was denied. Under these circumstances, Respondent did not properly deny Petitioner's request for mileage reimbursement. Therefore, Respondent's decision is reversed.

DECISION AND ORDER

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that Respondent did not properly deny Petitioner's request for mileage reimbursement.

IT IS ORDERED Meridian Health's decision is **REVERSED**. Meridian Health shall begin to implement this decision within 10 days.



Jeffrey Kemm
Administrative Law Judge

JK/dh

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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

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

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

Petitioner

[REDACTED]
MI [REDACTED]

Community Health Rep

Meridian Health Plan of Michigan Inc.
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PO Box 44287
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