



Date Mailed: July 29, 2025

Docket No.: 25-020731

Case No.: [REDACTED]

Petitioner: [REDACTED]



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这是一份重要的法律文件。请让别人翻译文件。

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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.*, and upon the Petitioner's request for a hearing.

After due notice, a telephone hearing was held on July 23, 2025. Brianna Reyes, Supports Coordinator, appeared on behalf of Petitioner. Florence Scott-Emuakpor, Appeals Review Officer, represented the Respondent Department of Health and Human Services (DHHS or Department). Dr. Nenia Mattarella and Jacob Disley-Cielen, appeared as witnesses for the Department.

Exhibits:

Petitioner	None
Department	A – Hearing Summary

ISSUE

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

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 who has been diagnosed with autism and dyssomnia and is currently undergoing treatment for dyssomnia. (Exhibit A; Testimony.)
2. On May 21, 2025, the Department received a Prior Authorization request on behalf of Petitioner for Genome Sequence Analysis. (Exhibit A; Testimony.)
3. Petitioner's medical records indicate Petitioner underwent genetic testing for dystonia which was negative. (Exhibit A; Testimony.)
4. On May 23, 2025, the Department sent Petitioner a Notification of Denial. The notice indicated the request for genome sequence analysis was denied for the following reason:

-
- Laboratory testing not reasonable or medically necessary for the diagnosis or management of the beneficiary's specific condition is not a covered service.⁵
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5. On June 6, 2025, the Michigan Office of Administrative Hearings and Rules received from Petitioner, a request for hearing. (Exhibit A.)

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 statutes, the Social Welfare Act, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program.

Medicaid covered benefits are addressed for the practitioners and beneficiaries in the Medicaid Provider Manual (MPM). Regarding the specific request in this case, the applicable version of the MPM states:

SECTION 6 – NONCOVERED SERVICES

Noncovered laboratory services and items include, but are not limited to, the following:

- Laboratory testing not reasonable or medically necessary for the diagnosis or management of the beneficiary's specific condition.
- Services not ordered by the beneficiary's treating provider.
- Laboratory services determined to be not medically necessary by a beneficiary's eligible other insurance benefits (i.e., Medicare).
- Laboratory services for the treatment of infertility, including embryo/sperm collection and banking.
- Repeat tests required because of technical or professional errors in performance of original test or interpretation of test results.
- Any laboratory service the laboratory is not CLIA certified to provide.
- "Profiles", "batteries" or "panels" of tests that include tests not necessary for the diagnosis or treatment of the beneficiary's specific condition.⁶

⁵ Exhibit A, p 8.

⁶ Medicaid Provider Manual, Laboratory, April 1, 2025, p 23.

The Department denied the request because the testing was not reasonable or medically necessary for the diagnosis or management of the beneficiary's specific condition.

Although Petitioner argues that a treating physician had requested the testing, Petitioner failed to present any evidence that the testing was reasonable or medically necessary for the diagnosis or management of the beneficiary's conditions. Consequently, based on the evidence presented, the Department's decision to deny the requested services should 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 prior authorization request for genetic testing.

IT IS, THEREFORE, ORDERED that:

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



COREY A. ARENDT
ADMINISTRATIVE LAW JUDGE

APPEAL RIGHTS: Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at courts.michigan.gov. The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://irs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to MOAHR-BSD-Support@michigan.gov, **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to
Michigan Office of Administrative Hearings and Rules
Rehearing/Reconsideration Request
P.O. Box 30639
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed.



Via Electronic Mail:

Agency/Department Representative
FLORENCE SCOTT-EMUAKPOR
MDHHS APPEALS SECTION
PO BOX 30807
LANSING, MI 48909
SCOTTTF@MICHIGAN.GOV

Department Contact
GRETCHEN BACKER
400 S PINE ST 6TH FL
PO BOX 30479
LANSING, MI 48909
MDHHS-PRD-HEARINGS@MICHIGAN.GOV

Agency/Department Representative
MARY CARRIER
MDHHS APPEALS SECTION
PO BOX 30807
LANSING, MI 48909
MDHHS-APPEALS@MICHIGAN.GOV

Via First Class Mail:

Authorized Hearing Representative
[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]

Petitioner
[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]