



Date Mailed: September 29, 2025

Docket No.: 25-028102

Case No.: [REDACTED]

Petitioner: [REDACTED]

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এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

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Ky është një dokument ligjor i rëndësishëm. Ju lutem, kini dikë ta përktheni dokumentin.

[REDACTED] MI [REDACTED]

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DECISION AND ORDER

On August 11, 2025, Petitioner [REDACTED] requested a hearing to dispute a prior authorization denial. As a result, a hearing was scheduled to be held on September 25, 2025. Medicaid services hearings are held pursuant to MCL 400.9 and 400.37; 42 CFR 431.200 to 431.250; 42 CFR 438.400 to 438.424; and Mich Admin Code, R 792.11002.

The parties appeared for the scheduled hearing. Petitioner appeared and represented herself. Respondent Michigan Department of Health and Human Services (Department) had Appeals Review Officer Florence Scott-Emuakpor appear as its representative. Respondent had two witnesses: Nurse Analyst Jacob Disley-Cielen and Independent Consultant Dr. David Wartinger. There were no other participants.

Both parties provided sworn testimony, and one exhibit was admitted into evidence. A 30-page packet of documents provided by the Department was admitted into evidence as Exhibit A.

ISSUE

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

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. On [REDACTED] 2025, Petitioner met with Dr. Zwghuizen to discuss oncoplastic reduction. The medical notes from the visit provided the following information:
 - a. Petitioner was recently diagnosed with left breast cancer.
 - b. Petitioner was hoping to pursue a lumpectomy followed by radiation therapy.
 - c. The lumpectomy may cause cosmetic changes to Petitioner's breast.

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- d. Dr. Zwghuizen could perform a left oncoplastic reduction/lift and a right breast reduction for symmetry. This would help reduce the chance of a left breast deformity, and it would help match the left breast to the right breast. The procedure could be done at the same time as the lumpectomy.
 - e. Petitioner agreed to the procedure as described.
 - f. Petitioner wanted to have a reduced breast size after the procedure. Petitioner was a 36D at the time, and she wanted to be more like a 36C after the procedure.
3. On March 19, 2025, Molina Healthcare authorized a breast reduction. The authorization was valid from March 12, 2025, to June 10, 2025.
 4. On June 30, 2025, Sparrow Medical Group submitted a prior authorization request to the Department on Petitioner's behalf. The prior authorization request only included the medical notes from Petitioner's February 25, 2025, visit with Dr. Zwghuizen. The prior authorization request did not include any medical records indicating that Petitioner had already had a lumpectomy performed on her left breast. Additionally, the prior authorization request did not clearly indicate which procedure Sparrow Medical Group wanted to have authorized.
 5. The Department had Dr. Wartinger review the prior authorization request. Dr. Wartinger determined that Sparrow Medical Group was requesting authorization to perform a breast reduction procedure, based in part on the fact that the medical records submitted stated that Petitioner wanted to have a reduced breast size after the procedure. Dr. Wartinger determined that there was nothing in the medical records that were provided that supported a breast reduction procedure.
 6. On July 8, 2025, the Department denied the prior authorization request for a breast reduction procedure. The Department mailed a notification of denial to Petitioner to notify her that the prior authorization request was denied. The notification stated the reason for the denial was that "Medicaid does not cover elective cosmetic surgery or procedures."
 7. Petitioner requested a hearing to dispute the denial.
 8. Petitioner has already had the breast procedure performed, and Petitioner has not been billed for the procedure. Petitioner requested a hearing because she was concerned about receiving a bill for the procedure she had performed.

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.

The Medicaid Provider Manual states, “Medicaid requires prior authorization (PA) to cover certain services before those services are rendered to the beneficiary. The purpose of prior authorization is to review the medical need for certain services.” *MDHHS Medicaid Provider Manual* (July 1, 2025), Practitioner Chapter, Section 1.9, p. 4. Medicaid only covers cosmetic surgery if PA has been obtained. *Id.* at Section 12.3, p. 58. “A physician may request PA if any of the following exist: the condition interferes with employment, it causes significant disability or psychological trauma (as documented by a psychiatric evaluation), it is a component of a program of reconstructive surgery for congenital deformity or trauma, or it contributes to a major health problem.” *Id.* “The physician must identify the specific reasons any of the above criteria are met in the PA request.” *Id.*

Petitioner is disputing the Department’s decision to deny her prior authorization request for a breast reduction procedure. The Department denied the prior authorization request because the Department determined that the procedure was a cosmetic procedure. The Department determined that the procedure was cosmetic based on the prior authorization request that was submitted because it did not contain any information indicating that Petitioner already had a lumpectomy, it indicated that Petitioner wanted a breast reduction, and it did not contain any information to support the medical necessity of a breast reduction. The physician must identify the specific reasons that the criteria for a cosmetic procedure to be performed have been met when the physician submits a prior authorization request for the cosmetic procedure, and the physician did not do so in this instance.

Petitioner did not present sufficient evidence to establish that the Department’s determination was not in accordance with its policies. Based on the medical record that was provided to the Department in support of the prior authorization request, the Department properly determined that the breast reduction procedure was cosmetic, and the Department properly determined that the physician did not identify the specific reasons that the criteria for the cosmetic procedure to be performed were met. Accordingly, the Department properly determined that the prior authorization requirements for the breast reduction procedure were not met. Therefore, the Department properly denied Petitioner’s prior authorization request.

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 prior authorization for a breast reduction.

IT IS ORDERED that the Department's decision is **AFFIRMED**.



JEFFREY KEMM
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:

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