

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: DENIED

Appeal Number: 2202202

Decision Date: 6/16/2022

Hearing Date: 05/06/2022

Hearing Officer: Kenneth Brodzinski

Appearance for Appellant:



Appearance for MassHealth:

Robert Morris – Transportation Unit



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	DENIED	Issue:	Transportation
Decision Date:	6/16/2022	Hearing Date:	05/06/2022
MassHealth's Rep.:	Robert Morris	Appellant's Rep.:	[REDACTED]
Hearing Location:	Quincy		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through notice dated March 17, 2022, MassHealth denied Appellant's request for a prescription for medical transportation (Exhibit A). Appellant filed this appeal in a timely manner on March 22, 2022 (see 130 CMR 610.015(B) and Exhibit B). Denial of assistance for MassHealth benefits constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied Appellant's prescription for medical transportation.

Issue

The appeal issue is whether MassHealth applied the controlling regulation(s) to accurate facts when it denied Appellant's prescription for medical transportation.

Summary of Evidence

MassHealth (Massachusetts Medicaid) was represented by a member of the Transportation Unit who appeared by telephone and testified that the subject action concerns MassHealth's denial of a prescription for medical transportation (a PT-1 form) filed on behalf of Appellant seeking transportation coverage to a medical provider, Clough Family Center for Rehab located at 310 Baker Ave., Concord, Ma. 01742 (Exhibit B). The MassHealth representative testified that the PT-1 was denied because the provider, Clough Family Center for Rehab located at 310 Baker Ave., Concord, Ma. 01742, is not a MassHealth provider. In support of the agency's action, the MassHealth representative cited regulation 130 CMR 407.411(A).

Appellant's authorized representative appeared by telephone and testified that Appellant recently underwent wrist surgery at Emerson Hospital in Concord, Massachusetts. Appellant's surgeon referred Appellant to an affiliated physical therapy practice, Clough Family Center for Rehab (Clough). Appellant's representative testified that she contacted Clough to see if they took Appellant's insurance and she was told they did.

In response, the MassHealth representative testified that Emerson Hospital is a MassHealth provider, but the Clough Family Center for Rehab is not, although it may be affiliated with Emerson in other ways.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant is a MassHealth member who receives benefits which covers medical transportation.
2. MassHealth received a prescription for medical transportation (a PT-1 form) filed on behalf of Appellant seeking transportation coverage to a medical provider, Clough Family Center for Rehab (Exhibit B).
3. Clough Family Center for Rehab is not a MassHealth provider.
4. MassHealth denied the PT-1 form because the provider, Clough Family Center for Rehab, is not a MassHealth provider.

Analysis and Conclusions of Law

"The burden of proof is on the appealing party to show that the order appealed from is invalid, and we have observed that this burden is heavy" (*Massachusetts Inst. of Tech. v. Department of Pub. Utils.*, 425 Mass. 856, 867, 684 N.E.2d 585 (1997)).

130 CMR 407.411: Transportation Utilization Restrictions:

*(A) Covered Services. The MassHealth agency pays for transportation services that meet the requirements of 130 CMR 407.000 **only when such services are covered under the member's MassHealth coverage type and only when members are traveling to obtain medical services covered under the member's coverage type** (see 130 CMR 450.105).*

(Emphasis supplied).

130 CMR 450.101 - definitions: In pertinent part states:

*Provider — an individual, group, facility, agency, institution, organization, or business that furnishes medical services **and participates in MassHealth under a provider contract with the MassHealth agency.***

(Emphasis supplied).

130 CMR 407.421(C)(3)(e) states that a prescription for medical transportation must include "the destination of the trip (the name and address of the location of the service **covered by MassHealth**)"

(Emphasis supplied).

On the evidence presented, Appellant has not met her burden of evidencing the invalidity of MassHealth's denial of the subject PT-1 for travel to Clough Family Center for Rehab. Pursuant to the above-cited regulations, services provided to Appellant by Clough would not be covered by MassHealth because it is not a MassHealth provider; therefore, transportation costs associated with traveling to Clough Family Center for Rehab cannot be authorized.

Appellant's representative only made and assertion that she placed a telephone call to Clough and was told that Appellant would be covered. Appellant offered no objective and reliable evidence to support a finding that Clough Family Center for Rehab is actually a MassHealth provider.

For the foregoing reasons, the appeal is DENIED.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Transportation Unit, MAXIMUS, 55 Summer St., 8th Fl.,
Boston, MA 02110