

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2302613
Decision Date:	5/18/2023	Hearing Date:	5/2/2023
Hearing Officer:	David Jacobs		

Appearance for Appellant:
Pro Se

Appearance for MassHealth MCO:
Katina Dean, Transportation specialist



*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 PA
Decision Date:	5/18/2023	Hearing Date:	5/2/2023
MassHealth Rep.:	Katina Dean	Appellant's Rep.:	Pro Se
Hearing Location:	Board of Hearings (Remote)		

Authority

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

Jurisdiction

Through a notice dated March 22, 2023, MassHealth denied the appellant's request for medical transportation benefits due to the medical provider not being a MassHealth provider. (130 CMR 407.411 and Exhibit 1). The appellant filed this appeal in a timely manner on March 31, 2023. (Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth MCO

MassHealth denied Appellant's request for medical transportation because he sought transportation to a provider that did not contract with MassHealth.

Issue

The appeal issue is whether MassHealth properly denied Appellant's request for medical transportation.

Summary of Evidence

The MassHealth transportation authorization unit representative appeared telephonically and testified that on March 21, 2023, the appellant submitted a request for medical transportation benefits to go to his physical therapist. On March 22, 2023, the request was denied because the provider was not enrolled with MassHealth. The MassHealth representative testified that in early 2023, the appellant's physical therapist moved locations and, after moving, stopped including a Provider ID/Service Location (PID/SL) number on their prior authorization forms. The PID/SL number is necessary to show MassHealth that the provider is contracted as a MassHealth provider. MassHealth cannot cover benefits without access to that number.

The appellant appeared telephonically and testified that he was confused why MassHealth had denied his medical transportation benefits as he has been using these benefits for transportation to see the same physical therapist for over a decade. He affirmed that his physical therapist had recently changed locations, but could not offer any other meaningful testimony as to why the PID/SL number was not included on the prior authorization forms from his provider. The record was left open until May 16, 2023, for the appellant to contact his provider and send the PID/SL number to MassHealth (Exhibit 4) The appellant did not respond to the request within the record open period (Exhibit 5).

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. On March 21, 2023, the appellant submitted a request for medical transportation benefits to MassHealth.
2. On March 22, 2023, the appellant's request for medical transportation benefits was denied due to the provider not being enrolled with MassHealth.
3. The provider did not include a PID/SL number on the medical transportation prior authorization forms for the appellant.
4. The appellant's physical therapist moved locations in early 2023.
5. The record was left open until May 16, 2023 for the appellant to submit their provider's PID/SL number.
6. No documents were submitted by the appellant within the record open period.

Analysis and Conclusions of Law

This appeal addresses the issue of whether MassHealth erred in denying Appellant's request for transportation services to a provider that does not participate with MassHealth.

Regulations at 130 CMR 407.411 address transportation utilization restrictions as follows:

(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 added.)

Provider Request for Transportation.

(1) The Provider Request for Transportation (PT-1) form must be used to request authorization for brokered transportation.

(2) A Provider Request for Transportation (PT-1) form must be completed and submitted by an authorized provider, managed-care representative, day habilitation program representative, or early intervention program representative, and approved by MassHealth.

(3) A completed PT-1 must contain:

(a) adequate information to determine the need for the transportation requested and that the member will receive a medically necessary service covered by MassHealth at the trip's destination; and

(b) if recurring transportation is requested, the expected duration of the need for transportation (specific time period not to exceed six months for acute illness; one year for chronic illness; three years for early intervention and five years for day habilitation).

(130 CMR 407.421(C)).

In this instant case, appellant requested MassHealth medical transportation to their physical therapist who recently moved office locations. The appellant's PT did not provide a PID/SL number on the request for transportation forms as is required by the regulations. If the appellant's PT is not a MassHealth provider, any services given by this provider are not covered (i.e. reimbursable) under the appellant's MassHealth coverage type. MassHealth regulations unambiguously prohibit coverage of transportation services unless used for traveling to a MassHealth covered medical service. For these reasons, MassHealth did not err in denying Appellant's request for transportation services.

The appellant is encouraged to take this decision to his provider to ensure they include a PID/SL number on future prior authorization requests if they are indeed a MassHealth enrolled provider.

This 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.

David Jacobs
Hearing Officer
Board of Hearings

cc: MassHealth Transportation Authorization Unit