

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2503213
Decision Date:	05/08/2025	Hearing Date:	03/28/2025
Hearing Officer:	Christine Therrien		

Appearance for Appellant:



Appearance for MassHealth:

Katina Dean, Transportation



*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:	05/08/2025	Hearing Date:	03/28/2025
MassHealth's Rep.:	Katina Dean	Appellant's Rep.:	██████
Hearing Location:	Quincy Harbor South Telephonic		

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 2/10/25, MassHealth denied the appellant's application for MassHealth transportation benefits because MassHealth determined that it is not a covered service. (130 CMR 407.411 and Exhibit 3). The appellant filed this appeal in a timely manner on 2/25/25. (130 CMR 610.015(B) and Exhibit 1). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for transportation to and from Adult Day Health (ADH).

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 407.411(B)(2), in determining that transportation to and from ADH is a non-covered service.

Summary of Evidence

The MassHealth representative from the transportation department testified that MassHealth received a PT-1, or Provider Request for Transportation, Form, which was denied on 2/10/25, and

a duplicate PT-1, which was denied on 2/26/25 because the request was for non-covered services. The MassHealth representative testified that the appellant attends ADH, and the ADH programs have their own transportation, which is included with the ADH program.

The appellant is a disabled adult over the age of 65. The appellant's mother testified that the appellant's ADH program closed, so the appellant sought a new ADH program. The appellant's mother testified that the appellant needed an ADH program where there are English-speaking members because the appellant needs the socialization of speaking with others. The appellant's mother testified that they found an ADH program that was satisfactory, but they live outside the transportation zone for the ADH program. (Exhibit 2).

The MassHealth representative testified that the ADH program contracts with the transportation vendor to provide transportation. The MassHealth representative testified that MassHealth will not cover the transportation because it is a duplicate service.

Findings of Fact

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

1. MassHealth received a PT-1 on behalf of the appellant, which was denied on 2/10/25, and a duplicate PT-1 which was denied on 2/26/25, because the request was for non-covered services.
2. The appellant, a disabled adult, attends ADH, and the ADH programs have their own transportation, which is included with the ADH program.
3. The appellant's ADH program closed, so the appellant sought a new ADH program.
4. The appellant lives outside the transportation zone for the new ADH program.
5. ADH programs contract with a transportation vendor to provide transportation for members to and from the program.
6. MassHealth will not cover the transportation to ADH program because it is a duplicate service.

Analysis and Conclusions of Law

As per regulations governing transportation providers participating in MassHealth, MassHealth pays for transportation in the following circumstances as set forth in 130 CMR 407.411:

(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: Coverage Types).

(1) In the case of public transportation, the MassHealth agency determines those medical services that are covered by MassHealth.

(2) In the case of fee-for-service ambulance and wheelchair van transportation, it is the responsibility of the transportation provider to judge which medical services are covered by MassHealth and to advise the member in cases where transportation is requested to a service that, in the provider's judgment, may not be or is not covered by MassHealth. If a member is in doubt as to whether or not a medical service is covered by MassHealth, the member should contact the MassHealth agency.

(3) In the case of brokered transportation, the MassHealth agency determines those services that are covered by MassHealth.

(B) Noncovered Services. The following are examples of transportation services that are not covered by MassHealth:

(1) transportation to child day-care centers and nurseries;

(2) transportation of persons who are elderly or disabled to adult day health programs, except when arranged by special contract with the MassHealth Adult Day Health Program;

(3) transportation to schools, summer camps, and recreational programs (for example, swimming classes);

(4) transportation of family members to visit a hospitalized or institutionalized member;

(5) transportation to a medical facility or physician's office for the sole purpose of obtaining a medical recommendation for homemaker/chore services;

(6) transportation to government-agency offices;

(7) transportation to visit a child in foster-care placement or in group-care placement;

(8) transportation to a medical service that is within 0.75 miles of the member's home or other MassHealth agency-approved point of origin, when the member is able to ambulate freely with or without an escort;

(9) transportation to pharmacies to obtain medications; and

(10) transportation to obtain computerized axial tomography (CAT) scans at a facility other than one that has been issued a Certificate of Need by the Massachusetts Department of Public Health.

(emphasis added)

MassHealth does not cover transportation to and from ADH programs pursuant to 130 CMR 407.411(B)(2). The ADH programs provide transportation, and it would be a duplication of services for MassHealth to pay for additional transportation to and from ADH programs.

Accordingly, 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.

Christine Therrien
Hearing Officer
Board of Hearings


cc: MassHealth Representative: Katina Dean, MAXIMUS