

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2512067
Decision Date:	11/5/2025	Hearing Date:	09/22/2025
Hearing Officer:	Christine Therrien		

Appearance for Appellant:
Pro se

Appearance for MassHealth/CCA:
Cassandra Horne, Appeals/Grievance Dept.
Manager



*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:	11/5/2025	Hearing Date:	09/22/2025
MassHealth/CCA Rep.:	Cassandra Horne	Appellant's Rep.:	Pro se
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 8/11/25, Commonwealth Care Alliance (CCA), an integrated care organization (ICO), denied the appellant's Level 1 appeal for non-emergency transportation because CCA determined the provider is more than 50 miles away from the appellant and there are closer dermatologists. (Exhibit 1). The appellant filed this appeal in a timely manner on 8/18/25. (130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

CCA denied the appellant's prior authorization request for non-emergency transportation to a provider more than 50 miles away.

Issue

The appeal issue is whether CCA was correct in denying the appellant's prior authorization request for non-emergency transportation to a provider more than 50 miles away.

Summary of Evidence

The CCA representative testified that on 6/30/25, the appellant, who is under age [REDACTED] submitted a prior authorization for non-emergency medical transportation to a dermatologist who is 61.5 miles away to administer Bimzelx. The CCA representative testified that on 7/6/25, a Notice of Denial of Medical Coverage was sent to the appellant. The CCA representative testified that services were denied because the member handbook states that non-emergency transportation must be within 50 miles of the member's home.¹ The CCA representative testified that on 7/14/25, the appellant submitted an expedited appeal request. The CCA representative testified that on 8/11/25, a CCA clinician reviewed and denied the appeal. The CCA representative testified that Bimzelx does not require provider administration after teaching how the medication is administered. The CCA representative testified that this is not the appellant's first time taking this medication. CCA has paid claims for this medication since February 2025. The CCA representative testified that this medication is a subcutaneous injection, which is generally administered monthly after a ramp-up. The CCA representative testified that the medication does not require monitoring after injection. The CCA representative testified that there is no clinical reason the appellant cannot do the injection at home while she waits for an appointment with a much closer dermatologist. The CCA representative testified that CCA may cover non-medical non-emergent trip(s) which exceed the covered distance when CCA reviews for appropriateness and determines there is not a location that provides comparable services within the covered distance. The CCA representative testified that there are ten in-network dermatologists within 50 miles of the appellant's home.

The appellant testified that she is taking the medication to treat several inflammatory conditions. The appellant testified that she has been monitored by her dermatologist since 2022 for her medical condition, [REDACTED]. The appellant testified that she had to wait almost six months to get this dermatologist to see her. The appellant testified that almost every dermatologist in her area has a waiting list of 6 months to a year for new patients. The appellant testified that she cannot drive herself to these appointments because she cannot sit that long. The appellant testified that she had a friend who drove her to these appointments previously, but the friend is unwilling to drive her now. The appellant testified that she administers the medication at home, but needs the dermatologist to monitor her.

Findings of Fact

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

1. The appellant is under age [REDACTED]

¹ CCA ONE CARE MEMBER HANDBOOK. **Medically necessary non-emergency transportation.** The plan covers transportation you need for medical reasons other than emergencies to approved destinations and confirmed appointment destinations in the plan's service area within 50 miles of pick-up location. (Exhibit 5, p. 81).

2. Commonwealth Care Alliance is an integrated care organization (ICO), and an agent for MassHealth.
3. On 6/30/25, the appellant submitted a prior authorization for non-emergency medical transportation to a dermatologist, who is 61.5 miles from her home, to administer Bimzelx.
4. On 7/6/25, CCA sent a Notice of Denial of Medical Coverage to the appellant.
5. The services were denied because the member handbook states that non-emergency transportation must be within 50 miles of the member's home.
6. On 7/14/25, the appellant submitted an expedited appeal request.
7. On 8/11/25, a CCA clinician reviewed and denied the appeal.
8. Bimzelx does not require provider administration after teaching the patient how the medication is administered.
9. The appellant has taken Bimzelx before. CCA has paid claims for this medication since February 2025.
10. Bimzelx is a subcutaneous injection, which is generally administered monthly after a ramp-up period.
11. Bimzelx does not require monitoring after injection.
12. There is no clinical reason the appellant cannot do the injection at home while she waits for an appointment with a much closer dermatologist.
13. CCA may cover non-medical non-emergent trip(s) which exceed the covered distance when CCA reviews for appropriateness and determines there is no location that provides comparable services within the covered distance.
14. There are ten in-network dermatologists within 50 miles of the appellant's home.
15. Bimzelx is used to treat the appellant's [REDACTED]
16. The appellant has seen her dermatologist since 2022.
17. The appellant cannot drive herself to these appointments because she cannot sit that long.
18. The appellant administers the medication at home.

Analysis and Conclusions of Law

In order to be eligible to enroll in an integrated care organization (ICO), a MassHealth member must meet all of the following criteria, and may not be enrolled or concurrently participate in any of the programs or plans listed in 130 CMR 508.007(F):

- (a) be [REDACTED] years of age at the time of enrollment;
- (b) be eligible for MassHealth Standard as defined in 130 CMR 450.105(A): MassHealth Standard or MassHealth CommonHealth as defined in 130 CMR 450.105(E): MassHealth CommonHealth;
- (c) be enrolled in Medicare Parts A and B, be eligible for Medicare Part D, and have no other health insurance that meets the basic-benefit level as defined in 130 CMR 501.001: Definition of Terms; and
- (d) live in a designated service area of an ICO. (130 CMR 508.007(A)(1)).

The appellant meets the requirements to enroll in an ICO. (130 CMR 508.007).

When a member is enrolled in an ICO in accordance with the requirements under 130 CMR 508.007(A), the ICO will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. (130 CMR 508.007(C)). Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports. (130 CMR 508.007(C)).

CCA is responsible for providing enrolled members with the full continuum of Medicare- and MassHealth-covered services. (130 CMR 450.105). As an ICO, CCA can provide more services to members than MassHealth allows, but not less.

MassHealth pays only for medically necessary services to eligible MassHealth members and may require that medical necessity be established through the prior authorization process. (130 CMR 420.410(A)(1)).

A service is "medically necessary" if:

- (1) it is reasonably calculated to prevent, diagnose, prevent the worsening of, alleviate, correct, or cure conditions in the member that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or to aggravate a handicap, or result in illness or infirmity; and
- (2) there is no other medical service or site of service, comparable in effect, available, and suitable for the member requesting the service, that is more

conservative or less costly to MassHealth. (130 CMR 450.204(A)).

The MassHealth regulations governing transportation services state that MassHealth pays for transportation for medical care only within the member's locality. This regulation further states that "when necessary medical services are unavailable in the member's locality, transportation to the nearest medical facility in which treatment is available is covered by MassHealth." (130 CMR 407.411(C)).

The CCA OneCare Member Handbook, Chapter 4, Medically necessary non-emergency transportation, states that "[t]he plan covers transportation you need for medical reasons other than emergencies to approved destinations and confirmed appointment destinations in the plan's service area within 50 miles of pick-up location." (Exhibit 5, p. 81).

As noted above, the CCA may authorize transportation for medically necessary services outside the appellant's locality if comparable services are unavailable within the appellant's locality. The appellant has access to dermatologists within 50 miles of her home. The appellant testified that she receives the Bimzelx at home, thus negating the need to visit the dermatologist more than 50 miles away for this treatment. The decision made by CCA was correct.

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: ICO Commonwealth Care Alliance, Attn: Nayelis Guerrero, 30 Winter Street, Boston, MA 02108