WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES SUMMARY AND DECISION OF THE SATE HEARING OFFICER

I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a fair hearing concluded on March 24, 2005 for _____. This hearing was held in accordance with the provisions found in the Common Chapters Manual, Chapter 700 of the West Virginia Department of Health and Human Resources. This fair hearing was convened on March 24, 2005 on a timely appeal, filed December 29, 2004.

It should be noted here that the claimant's benefits have been denied.

II. PROGRAM PURPOSE:

The Program entitled Non-Emergency Medical Transportation (NEMT) is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

The purpose of the Non-Emergency Medical Transportation Program is to provide reimbursement of transportation and certain related expenses to eligible Medicaid and Children With Special Health Care Needs Program recipients for travel to and from medical care providers. Benefits consist of payments made to transportation providers at a certain mileage rate or to commercial carrier at the rates allowed by the Public Service Commission.

Certain related expenses are comprised of meal and lodging allowances in certain situations during the duration of the travel and medical treatment. Tolls incurred on turnpikes and bridges are also allowed for certain related expenses.

III. PARTICIPANTS:

_____, Claimant
Gayla Adkins, Department Hearing Representative

IV. QUESTIONS TO BE DECIDED:

The question to be decided is whether the Department was correct in the decision to deny a NEMT payment because the medical service obtained is not covered by Medicaid.

V. APPLICABLE POLICY:

Section 19.3B #5 of the West Virginia Income Maintenance Manual reads in part:

Services provided under this program include reimbursement for transportation and certain related expenses necessary to secure medical services normally covered by Medicaid.

Reimbursement for transportation and related expenses is available to Medicaid recipients who:

Require transportation to keep an appointment for medical services covered under the Medicaid coverage for which he was approved.

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department' Exhibits:

- Exhibit D-1) Copy of OFA-NEMT-1 dated 11/09/04
- Exhibit D-2) Copy of notification letter dated 12/29/04
- Exhibit D-3) Copy of hearing request dated 02/29/04
- Exhibit D-4) Copy of West Virginia Income Maintenance Manual Section 19.3
- Exhibit D-5) Copy of form IG-BR-29 Hearing/Grievance Record Information
- Exhibit D-6) Copy of notification letter for hearing date
- Exhibit D-7) Department's Hearing Summary

VII. FINDINGS OF FACT:

- The claimant submitted an NEMT application received in the DHHR office 11/12/04. Included on the form was a trip to in WV on 11/10/04. The medical provider and the driver signed the form. (Exhibit D-1)
- 2) The above trip on the NEMT application was denied on 11/29/04. Reason: The medical service obtained is not covered by Medicaid. (Exhibit D-2)
- Ms. Adkins testified that the claimant had expressed an interest in needing dental work and his worker had given him the name of a place that could help him explaining that Medicaid does not cover dental services for adults.
- 4) ______testified that he thought maybe the program was some kind of waiver. He took his medical card, it was accepted, and the form was signed at the doctor's office. He received a bill for \$5.00. They should not have signed the form if the service wasn't covered.

VIII. CONCLUSIONS OF LAW:

- 1) The claimant submitted an NEMT form for payment to WV. The trip was for dental services.
- 2) Medicaid does not cover dental services for adults.
- Policy specifies that reimbursement for transportation and related expenses is available to Medicaid recipients who: Require transportation to keep an appointment for medical services covered under the Medicaid coverage fo which he was approved.

IX. DECISION:

It is the finding of the State Hearing Officer that the claimant is not eligible for travel reimbursement for the trip on November 10, 2004 to as the service provided is not covered by Medicaid. The Department is upheld in the decision to deny the NEMT payment as outlined in the notification letter dated November 29, 2004.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29