



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
Post Office Box 2590
Fairmont, WV 26555-2590

Joe Manchin III
Governor

Martha Yeager Walker
Secretary

July 7, 2006

Dear Ms. _____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held May 25, 2006. Your hearing request was based on the Department of Health and Human Resources' action to deny your application for Non-Emergency Medical Transportation (NEMT).

In arriving at a decision, the State Hearings Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility for the Non-Emergency Medical Transportation (NEMT) Program is based on current policy and regulations. Some of the regulations state that NEMT is a reimbursement program for recipients of Medicaid and Children with Special Health Care Needs (CSHCN) for the cost of transportation and other expenses associated with receiving medical services covered by Medicaid. [West Virginia Income Maintenance Manual, Chapter 19.3]

The information submitted at your hearing reveals that the Department appropriately denied payment of NEMT reimbursement when the medical services and treatment received was not billable or billed to Medicaid.

It is the decision of the State Hearing Officer to **uphold** the action of the Department in denying NEMT reimbursement when the medical services and treatment were not billable or billed to Medicaid.

Sincerely,

Thomas E. Arnett
State Hearing Officer
Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review
Michele Robinson, ESW, DHHR

**WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES
BOARD OF REVIEW**

_____,
Claimant,

v.

Action Number: 06-BOR-891

**West Virginia Department of
Health and Human Resources,**

Respondent.

DECISION OF STATE HEARING OFFICER

I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a fair hearing concluded on July 7, 2006 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 May 25, 2006 on a timely appeal, filed January 18, 2006.

II. PROGRAM PURPOSE:

The Program entitled NEMT is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

The Non-Emergency Medical Transportation (**NEMT**) program provides payment to or on behalf of eligible persons for transportation and other related expenses necessary to secure medical and other services covered by the Medicaid Program.

III. PARTICIPANTS:

_____, Claimant
Michele Robinson, ESW, DHHR

Presiding at the Hearing was Thomas E. Arnett, State Hearing Officer and a member of the State Board of Review.

IV. QUESTIONS TO BE DECIDED:

The question to be decided is whether the Department was correct in their action to deny the Claimant's request for NEMT reimbursement.

V. APPLICABLE POLICY:

West Virginia Income Maintenance Manual, Chapter 19.3

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 Hearing Summary
- D-2 OFA-NEMT-1 – (Blank) Application for Non-Emergency Medical Transportation
- D-3 WVIMM Chapter 19.3
- D-4a OFA-NEMT-1 – NEMT Application received 11/10/05
- D-4b OFA-NEMT-1 – NEMT Application received 11/4/05 (all trips paid)
- D-4c OFA-NEMT-1 – NEMT Application received 11/18/05
- D-4d OFA-NEMT-1 – NEMT Application received 11/18/05
- D-4e OFA-NEMT-1 – NEMT Application received 11/10/05
- D-4f OFA-NEMT-1 – NEMT Application received 11/10/05
- D-4g OFA-NEMT-1 – NEMT Application received 12/2/05
- D-4h OFA-NEMT-1 – NEMT Application received 12/9/05
- D-4i OFA-NEMT-1 – NEMT Application received 12/16/05
- D-4j OFA-NEMT-1 – NEMT Application received 12/16/05

VII. FINDINGS OF FACT:

- 1) On or about January 9, 2006, the Claimant was notified that several Non-Emergency Medical Transportation (NEMT) reimbursement requests were denied.
- 2) The Department submitted Exhibit D-2 and OFA-NEMT-1 (blank Non-Emergency Medical Transportation Form) and noted the part that must be signed by the medical provider. This form states – "Medical Provider: Do not sign if the medical service/treatment is not billable and billed to the Medicaid Program."
- 3) The Department reviewed Exhibit D-1 and presented evidence to indicate that several of the Claimant's NEMT requests for travel reimbursement for trips to Dr. [REDACTED]'s office were originally reimbursed. However, upon further review of subsequent requests for reimbursement, the determination was made that Dr. [REDACTED] does not accept West Virginia Medicaid. Because Dr. [REDACTED]'s services are not covered by West Virginia Medicaid, reimbursement through the NEMT Program is not authorized.

- 4) The Department also presented testimony to indicate that NEMT reimbursement was not authorized for trips to [REDACTED] because Medicaid denied payment as the Claimant did not get a referral from her primary care physician.
- 5) In addition to Dr. [REDACTED] and [REDACTED] Exhibit D-1 indicates that reimbursement was denied for a trip to the [REDACTED] because the Claimant reportedly failed to provide her Medicaid card and only Medicare was billed. It should be noted, however, that a request for payment could not be found in the evidence.
- 6) With the exception of exhibit D-4b (Claimant was reimbursed for trips to Dr. [REDACTED] the denied NEMT requests included in Exhibit D-4 are from Dr. [REDACTED] and [REDACTED] [REDACTED] It should be noted that NEMT reimbursement was paid when the Claimant received medical services/treatment from a Medicaid provider.
- 7) The Claimant testified that she was not told that the medical services/treatment had to be billable and billed to the Medicaid Program in order to get reimbursement.
- 8) West Virginia Income Maintenance Manual, Chapter 19.3, A & B, states that Non-Emergency Medical Transportation (NEMT) is a reimbursement program for recipients of Medicaid and Children with Special Health Care Needs (CSHCN) for the cost of transportation and other expenses associated with receiving medical services. Medicaid recipients are eligible for NEMT beginning the first day of the month for which Medicaid is approved. Applicants awaiting approval must be instructed to apply for NEMT within the 60-day time limit.
- 9) West Virginia Income Maintenance Manual, Chapter 19.3, B, 5 states that services provided under this program include reimbursement for transportation and certain related expenses necessary to secure medical services normally covered by Medicaid [emphasis added].

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 [emphasis added] for which he was approved;
- Receive scheduled Medicaid-covered services [emphasis added] at a clinic, hospital or doctor's office;
- Receive pre-authorization as necessary; and
- Comply with the 60-day application submittal deadline.

VIII. CONCLUSIONS OF LAW:

- 1) Policy provides that Non-Emergency Medical Transportation (NEMT) is a reimbursement program for recipients of Medicaid and Children with Special Health Care Needs (CSHCN) for the cost of transportation and other expenses associated with receiving Medicaid covered services.
- 2) The Department reviewed all of the Claimant's denied requests for NEMT reimbursement and verified that each request was denied as a result of the service or treatment not billable or billed to Medicaid. Based on the evidence, the Department was correct in denying the Claimant's request for NEMT reimbursement when the medical services and treatment were not billable or billed to the Medicaid Program.

IX. DECISION:

After reviewing the information presented during the hearing, and the applicable policy and regulations, I am ruling to **uphold** the action of the Department in denying your application(s) for NEMT reimbursement when medical treatment and services were not billable or billed to Medicaid.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 7th Day of July, 2006.

**Thomas E. Arnett
State Hearing Officer**