

STATE OF VERMONT

HUMAN SERVICES BOARD

In re) Fair Hearing No. R-12/16-1046
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Appeal of)
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INTRODUCTION

The petitioner appeals a decision by the Department of Vermont Health Access (DVHA) denying Medicaid coverage for transportation to certain medical appointments. The following findings of fact are based on representations and documents submitted by the parties pursuant to hearings held on January 6 and February 7, 2017.

FINDINGS OF FACT

1. The petitioner is disabled and a recipient of Medicaid. His medical conditions include gastro-intestinal problems. He lives in Rutland, Vermont. He is currently being treated by doctors in Rutland for progressive amputations of one of his lower extremities.

2. The petitioner requested a fair hearing on December 12, 2016 after the Department denied his requests for approval of Medicaid coverage for transportation services to see a gastroenterologist in Bennington, Vermont. The basis

of the Department's decision was that the petitioner had not demonstrated that the service he was seeking was necessary and not available to him from a provider closer to his home. The petitioner alleged that his need for the appointment was urgent and that he couldn't obtain a timely appointment from a provider closer to his home.

3. At the hearing held on January 6, 2017, the petitioner stated that following the Department's decision in December he was able to obtain a ride to the provider in Bennington free-of-charge from another agency that provides medical transportation services. He stated that he wished to pursue the hearing to force the Department to reimburse the other agency for this ride, and because he would need other rides to this provider in Bennington in the future. The hearing officer advised the petitioner to submit verification that he was or will be billed for the ride to Bennington in December. The petitioner was also directed to provide medical documentation either that the need to visit the gastroenterologist in Bennington in December was medically necessary, or that any future visits to this provider will be required.

4. At the hearing on February 7, 2017 the petitioner stated that any gastroenterology treatment he might receive

has been placed "on hold" by his doctors due to ongoing treatment of infections related to his foot surgeries. He did not allege that he has been billed for the transportation services he received to go to his appointment in Bennington in December.

5. The petitioner did not dispute that he is receiving Medicaid transportation services for all his scheduled appointments in Rutland. The hearing officer advised the petitioner (and the Department agreed) that he could reapply for transportation services to Bennington if and when such services are scheduled and the petitioner can provide medical evidence (from any provider) that travelling to the gastroenterologist in Bennington (or anywhere else) is medically necessary.¹

ORDER

The petitioner's appeal is dismissed as moot.

REASONS

Transportation is a covered Medicaid service, and the regulations provide for *necessary* transportation for

¹The hearing officer denied the petitioner's request to subpoena his doctors to a hearing.

recipients to access their medical providers. Department of Vermont Health Access Rule § 7408 provides:

Transportation

Transportation to and from necessary medical services is covered and available to eligible Medicaid recipients on a statewide basis.

The following limitations on coverage shall apply:

- A. Prior authorization is required. (Exceptions may be granted in a case of a medical emergency.)
- B. Transportation is not otherwise available to the Medicaid recipient.
- C. Transportation is to and from necessary medical services.
- D. The medical service is generally available to and used by other members of the community or locality in which the recipient is located. A recipient's freedom of access to health care does not require Medicaid to cover transportation at unusual or exceptional cost in order to meet a recipient's personal choice of provider.
- E. Payment is made for the least expensive means of transportation and suitable to the medical needs of the recipient.
- F. Reimbursement for the service is limited to enrolled transportation providers.
- G. Reimbursement is subject to utilization control and review in accordance with the requirements of Title XIX.
- H. Any Medicaid-eligible recipient who believes that his or her request for transportation has been improperly denied may request a fair hearing. For an explanation, see the "Fair

Hearing Rules" listed in the Table of Contents.

The original issue in this case was whether the petitioner showed that he did not have necessary and appropriate medical services available to him closer to his home. To date, the petitioner has provided no medical documentation supporting the claim that his appointment with the gastroenterologist in Bennington was medically necessary. But even if it was, the petitioner was able to obtain transportation to that appointment from another source, at no claimed or demonstrated cost to himself. The agency that provided that service has made no claim for payment from either the petitioner or the Department. Moreover, there is no evidence at this time that any future treatment in Bennington will either be prescribed or necessary. If it is, the petitioner is free to reapply for transportation to such an appointment.

For now, his claims are moot, and his appeal must be dismissed. 3 V.S.A. § 3091(d), Fair Hearing Rule No. 1000.4D.

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