

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON REFERRAL  
BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES**

In the Matter of	)	
	)	
M M N	)	OAH No. 16-1451-MDX
_____	)	Agency No.

**DECISION**

**I. Introduction**

M M N receives Medicaid benefits. She was in Anchorage on a pre-authorized trip for a medical appointment and missed her flight home. Her health care provider requested additional travel to cover her return. The Division of Health Care Services denied the request. Ms. N appeals.

Because Ms. N was not forced to change travel plans for reasons beyond her control, the division’s decision is affirmed.

**II. Facts**

Ms. N’s health care provider requested pre-authorization for Ms. N to travel from No Name to Anchorage for a medical appointment. The division authorized the travel. Ms. N was scheduled to fly to Anchorage on November 15, 2016, go to her appointment, and return to No Name the same day. The ticket purchased for Ms. N was nonrefundable.<sup>1</sup> On the day of travel, Ms. N was taking three medications. She was taking Flexeril (cyclobenzaprine) for muscle spasms in her back. She was also taking Percocet (oxycodone and acetaminophen) for pain. Finally, she was taking Alprazolam for flight-related anxiety.<sup>2</sup>

The morning of her trip, Ms. N took a cab to the airport, flew to Anchorage, and went to her appointment.<sup>3</sup> After her appointment, she went to the airport for her return flight to No Name. She cleared security and went to the gate.<sup>4</sup> At the gate, she felt dizzy, sat down, and “conked out.”<sup>5</sup> As a result, she missed her scheduled flight. She stayed in Anchorage overnight in a hotel.<sup>6</sup> She went back to her health care provider’s office in Anchorage and explained her situation, and the provider requested pre-authorization for

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<sup>1</sup> Testimony of Pokorny.  
<sup>2</sup> Testimony of N. *See also* Exhibit C at 3, 5 - 6. The trade name for Alprazolam is Xanax.  
<sup>3</sup> Exhibit C at 16; Testimony of N.  
<sup>4</sup> Exhibit E at 1.  
<sup>5</sup> Testimony of N.  
<sup>6</sup> Exhibit C at 14 - 15.

additional travel so that Ms. N could book a new flight home.<sup>7</sup> The division denied the request.<sup>8</sup> Ms. N paid for the hotel and bought her own ticket for a flight home the next day.<sup>9</sup>

Ms. N appealed the division's denial of authorization for additional travel. A telephonic hearing was held on January 3, 2017. Ms. N represented herself. Division Hearing Representative Terri Gagne represented the division. Maria Pokorny, Transportation Manager for the division, testified for the division.

### **III. Discussion**

In addition to paying for certain compensable medical expenses, under appropriate circumstances, Medicaid will pay costs for transportation to a medical appointment, including accommodations and meals.<sup>10</sup> The regulations, however, impose strict requirements on what Medicaid will pay. Medicaid requires prior authorization for reimbursement of nonemergency transportation services. The regulations provide an exception to that rule in cases where "a recipient is forced to change authorized travel plans for reasons beyond the recipient's control, including the cancellation of an airline flight due to weather conditions or the closing of an airport for security reasons."<sup>11</sup> The division denied Ms. N's request for additional travel on the grounds that she missed her flight for reasons that were within her control, and therefore did not meet the criteria for this exception.

Ms. N argued that losing consciousness at the airport was a medical issue beyond her control. Ms. N argued that the combination of medications she took caused an unexpected reaction. She has taken the combination of medications before, and fallen asleep on the airplane. She argued that medications do not always affect a person the same way, and that the dizziness and strong sedative effect she experienced while waiting at the airport to board her return flight were unanticipated. However, she also testified that when she took the same combination of medicines in September, they made her dizzy and drowsy.

Drowsiness is the first side effect listed on the drug information sheet for Alprazolam. Dizziness is the second.<sup>12</sup> Drowsiness is also the first side effect listed on the patient information leaflet for cyclobenzaprine, and dizziness is the second.<sup>13</sup> Drowsiness is also a possible side

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<sup>7</sup> Testimony of N; Exhibit D at 1.

<sup>8</sup> Exhibit E at 1; Exhibit D at 1.

<sup>9</sup> Testimony of N, Exhibit C at 14 - 16.

<sup>10</sup> See, e.g., 7 AAC 120.405.

<sup>11</sup> 7 AAC 120.410(d).

<sup>12</sup> Exhibit C at 6.

<sup>13</sup> Exhibit C at 9.

effect of Oxycodone, albeit only the sixth side effect listed in the patient information leaflet, preceded by dizziness.<sup>14</sup>

Ms. N argued that the dizziness and inability to stay awake that she experienced at the airport was the result of the combination of drugs she was taking, and that it was a medical issue that took her by surprise. She testified that she had no idea that “my anxiety medication mixed with the other two would make me so dizzy.” Ms. N offered a letter from No Name Medical Clinic stating that if Percocet, Flexeril, and alprazolam were taken together, “sedation and drowsiness may occur.”<sup>15</sup> Because drowsiness and dizziness are stated potential side effects of each of the three drugs, it should not have been a surprise that they would produce drowsiness and dizziness when taken together.

Ms. N argued that the labels on the medication bottles warned that the medications might cause drowsiness when mixed with alcohol, suggesting that she was not aware they might cause drowsiness in the absence of alcohol. At the hearing, she read from the label “may cause drowsiness, alcohol may intensify this effect.”<sup>16</sup> It is clear not only from the patient instructions but from the label on the bottle Ms. N read that the medication may cause drowsiness.

At the hearing, Ms. N acknowledged that when she takes the anxiety medication, she falls asleep on the plane, and that falling asleep is the effect of that medication. This time, she fell asleep before she got on the plane. Alprazolam was prescribed for Ms. N in April, 2016, and again in September, 2016.<sup>17</sup> The cyclobenzaprine and oxycodone-acetaminophen were prescribed for Ms. N in September, 2016. Ms. N had prior experience with the medications she was taking, and was aware of the effect of the Alprazolam.

The division did not dispute that the medications Ms. N was taking may have caused her to fall asleep at the airport, nor did the division question the necessity of those medications. The division denied the request for additional travel because Ms. N missed her flight for reasons that were within her control. Ms. N was aware from past experience that the Alprazolam was likely to make her fall asleep. Ms. N could have taken steps to ensure

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<sup>14</sup> Exhibit C at 10.

<sup>15</sup> Letter from T O, MS PA-C dated December 30, 2016.

<sup>16</sup> N Testimony. Indeed, the patients instructions for all three medications caution the user to avoid alcohol. Exhibit C at 6, 9, 11.

<sup>17</sup> Exhibit E at 28 - 29.

that she was awake to board her flight, including timing her medications differently, setting an alarm, or asking for help from the gate agent.

The fact that Ms. N fell asleep at the airport is understandable, not only because she was on medications that are apt to make a person drowsy, but because she had woken up early that morning to catch the flight from No Name to Anchorage, and then had a full day. But, it is also important to this analysis that the division had already paid for Ms. N's ticket home, and the ticket was nonrefundable.<sup>18</sup> Ms. Gagne testified that the state would have incurred additional costs to book Ms. N on a later flight. This distinguishes Ms. N's case from a previous case where the division was ordered to reimburse travel costs for a missed return flight.<sup>19</sup>

The weight of the evidence supports the division's conclusion that Ms. N was not forced to change plans for reasons beyond her control.

#### **IV. Conclusion**

The division's decision to deny authorization for additional travel is upheld.

Dated: January 27, 2017.

*Signed* \_\_\_\_\_  
Kathryn L. Kurtz  
Administrative Law Judge

#### **Adoption**

The undersigned by delegation from the Commissioner of Health and Social Services, adopts this decision as final under the authority of AS 44.64.060(e)(1).

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with AS 44.62.560 and Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 28<sup>th</sup> day of February 2017.

By: *Signed* \_\_\_\_\_  
Signature  
Douglas Jones \_\_\_\_\_  
Name  
Medicaid Program Integrity Manager  
Title

[This document has been modified to conform to the technical standards for publication.]

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<sup>18</sup> Testimony of Gagne and Pokorny.

<sup>19</sup> *In re N.V.*, OAH No. 12-0407-MDS at 4.