

II. FACTUAL BACKGROUND

On January 3, 2015, the Petitioner went to the emergency room at the [REDACTED] Regional Medical Center where she received treatment. The amount charged for this care was \$287.00 for the facility and \$234.00 for the physician. BCBSM denied coverage ruling that the Petitioner did not meet its criteria for treatment in the emergency room, leaving the Petitioner responsible for \$499.76 (the charged amount less the BCBSM discount of \$21.24).

The Petitioner appealed BCBSM's denial through its internal grievance process. BCBSM held a managerial-level conference and issued a final adverse determination dated March 18, 2015, affirming its position. The Petitioner now seeks a review of that adverse determination from the Director.

III. ISSUE

Did BCBSM correctly deny coverage for the Petitioner's emergency treatment?

IV. ANALYSIS

BCBSM's Argument

In its final adverse determination, BCBSM wrote:

You are covered by *Simply Blue Group Benefits Certificate ASC*, **Section 3: What BCBSM Pays For**, Page 38, explains that BCBSM pays for services to treat medical emergencies and accidental injuries. **Section 7: Definitions**, Page 147, goes on to explain that a medical emergency is when symptoms come about suddenly and are of such severity that one is at risk for loss of life or could result in serious bodily harm unless urgent medical care is provided.

Under the terms of your *Certificate*, procedure code Y4500 is a covered benefit. However, limitations apply. The *Benefit Package Report*, which is an online tool used by BCBSM to house procedure specific benefit conditions, explains that this procedure code is not payable for nonemergent conditions. For this service, your provider submitted diagnosis code 30781 (tension headache), which is classified as a nonemergent condition.

In order to ensure a thorough review, a board-certified M.D. in Internal Medicine reviewed your claim, your appeal, and your health care plan benefits for Blue Cross Blue Shield of Michigan and concluded that, as documented, your situation does not meet BCBSM's medical criteria for emergent evaluation. Our consultant concluded:

All documentation was reviewed. Member presented to the emergency room complaining of "weird feeling, tingling", along the left side of her head.

Symptoms have been present for several weeks and member has seen her primary care physician and had labs, and x-rays done. There is no report of head injury, trauma or fall. No fever, chills, or signs of infection. No visual disturbance, weakness or stroke-like symptoms present. Symptoms are worse around exam time at school. Per patients' health plan criteria for emergency care, this situation, as documented, does not meet criteria for emergent evaluation....

Petitioner's Argument

On the external review request form the Petitioner wrote:

I would like to see Blue Cross cover my ER visit since there was no other medical facility available at the time. At the time I did not have a diagnosis so it isn't unreasonable to seek medical help without knowing how severe the problem is. How do you know if you don't go in to be checked? It could be an emergency.

In a February 9, 2015 letter to BCBSM, the Petitioner wrote:

I have recently been diagnosed with tension headaches, but at the time did not know that is what it was. I was experiencing a severe headache and muscle spasms, as well as dizziness that makes me feel like I am going to pass out. This occurred on the weekend and at around 1:00 a.m. in the morning. I live in a rural area and have no urgent care facility available so had no other choice but to go to the Emergency Room.

Director's Review

The Petitioner's *Simply Blue* certificate provides coverage for treatment of medical emergencies. The certificate, on page 147, defines an emergency medical condition as:

a medical condition that manifests itself by acute symptoms of sufficient severity (including severe pain) which could cause a prudent layperson with average knowledge of health and medicine to reasonably expect that the absence of immediate medical attention would result in:

- The health of the patient...to be in serious jeopardy, or
- Serious impairment to bodily functions, or
- Serious dysfunction of any bodily organ or part...

The certificate, on page 153, defines "medical emergency":

A condition that occurs suddenly and unexpectedly. This condition could result in serious bodily harm or threaten life unless treated immediately. This is not a condition caused by an accidental injury.

The question to be resolved in this review is whether the Petitioner was experiencing a medical emergency when she went to the [REDACTED] Regional Medical Center on January 3, 2015.

The emergency room physician recorded the Petitioner's complaint and wrote that she "has been having unusual sensation in the left side of her head." She stated that "these symptoms have been coming off and on for a while now for several weeks." The records submitted for this review reveal that the Petitioner had sought medical attention in the recent past for such symptoms.

The Petitioner's description of her condition at the time does not meet the standards for emergency care as set forth in the *Simply Blue* certificate: The symptoms did not occur suddenly or unexpectedly but rather had been occurring for some time. Further, the symptoms had not, in the past, caused any serious bodily harm. The Petitioner herself states that she only went to the emergency room because no lesser level of care was available at the time.

The director finds that the Petitioner did not exhibit the signs of a person who had an emergency medical condition as that term is defined in the *Simply Blue* certificate of coverage.

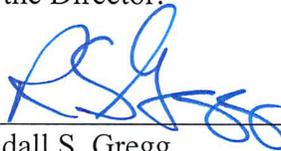
V. ORDER

The Director upholds BCBSM's final adverse determination of March 18, 2015.

This is a final decision of an administrative agency. Under MCL 550.1915, any person aggrieved by this order may seek judicial review no later than sixty days from the date of this order in the circuit court for the Michigan county where the covered person resides or in the circuit court of Ingham County. A copy of the petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of General Counsel, Post Office Box 30220, Lansing, MI 48909-7720.

Annette E. Flood
Director

For the Director:



Randall S. Gregg
Special Deputy Director