

**Department of Insurance and Financial Services
Patient's Right to Independent Review Act Orders
December 2019**

Case Number	Date of Order	Company Name	Case Type	Outcome	Brief Description
180497	12/2/2019	HAP Midwest Health Plan	Medical	Upheld	Home Health Care
180804	12/2/2019	BCBSM	Contractual	Upheld	Out-of-Network Provider
180542	12/2/2019	MedImpact Healthcare Systems	Medical	Reversed	Prescription Drug
180979	12/2/2019	Upper Peninsula Health Plan	Contractual	Upheld	Dental Services
180633	12/2/2019	Guardian	Medical	Reversed	Dental Crown
180761	12/3/2019	Meridian Health Plan	Contractual	Upheld	Prescription Drug
181001	12/3/2019	HAP	Medical	Upheld	Prescription Drug
181201	12/5/2019	BCBSM	Contractual	Upheld	Out-of-Network Provider
180257	12/5/2019	BCBSM	Medical	Reversed	Surgical Procedure
180892	12/6/2019	Meridian Health Plan	Medical	Upheld	Prescription Drug
180861	12/6/2019	Meridian Health Plan	Medical	Reversed	Prescription Drug
180873	12/6/2019	HAP	Medical	Reversed	Prescription Drug
180914	12/9/2019	Meridian Health Plan	Medical	Reversed	Prescription Drug
180952	12/9/2019	BCBSM	Medical	Upheld	Prescription Drug
181318	12/9/2019	McLaren Health Plan Community	Contractual	Upheld	Cost Sharing
180608	12/11/2019	UnitedHealthcare Ins. Co.	Medical	Upheld	Medical Device
181933	12/11/2019	Priority Health Choice	Medical	Reversed	Medical Equipment
180649	12/13/2019	BCBSM	Medical	Upheld	Medical Testing

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181105	12/13/2019	BCBSM	Medical	Upheld	Prescription Drug
182090	12/16/2019	BCBSM	Medical	Upheld	Medical Treatment
181180	12/18/2019	Guardian	Medical	Reversed	Dental Crown
172175	12/18/2019	Golden Rule	Medical	Upheld	Medical Device
181167	12/18/2019	BCBSM	Medical	Upheld	Prescription Drug
181183	12/18/2019	BCBSM	Medical	Reversed	Medical Device
181184	12/18/2019	BCBSM	Medical	Upheld	Medical Testing
181227	12/18/2019	Alliance Health and Life	Medical	Upheld	Prescription Drug
181456	12/18/2019	Meridian Health Plan	Contractual	Upheld	Cost Sharing
181469	12/18/2019	BCBSM	Contractual	Upheld	Out-of-Network Provider
181319	12/19/2019	BCBSM	Medical	Upheld	Medical Testing
181238	12/19/2019	Meridian Health Plan	Medical	Upheld	Prescription Drug
181544	12/19/2019	BCBSM	Contractual	Reversed	Cost Sharing
181622	12/20/2019	Priority Health (HMO)	Contractual	Upheld	Out-of-Network Provider
181634	12/20/2019	BCBSM	Contractual	Upheld	Mental Health Services
181477	12/23/2019	Guardian	Medical	Upheld	Dental Crown
181455	12/23/2019	Meridian Health Plan	Medical	Upheld	Medical Device
181729	12/23/2019	BCBSM	Contractual	Upheld	Dental Services

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181493	12/23/2019	BCBSM	Medical	Upheld	Medical Testing
182030	12/30/2019	UnitedHealthcare Ins. Co.	Contractual	Upheld	Medical Testing
181605	12/30/2019	Meridian Health Plan	Medical	Upheld	Prescription Drug