

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2208362
<b>Decision Date:</b>	1/3/2023	<b>Hearing Date:</b>	December 08, 2022
<b>Hearing Officer:</b>	Brook Padgett		

**Appellant Representative:**



**MassHealth Representatives:**

Linda Phillips, RN, BSN, LNC-CSp.  
Angela Grip, PT  
Virdany Ruis, B.S., RRT



*Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Office of Medicaid  
Board of Hearings  
100 Hancock Street, 6<sup>th</sup> floor  
Quincy, MA 02171*

# APPEAL DECISION

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	130 CMR 409.414
<b>Decision Date:</b>	1/3/2023	<b>Hearing Date:</b>	December 08, 2022
<b>MassHealth Rep.:</b>	L. Phillips	<b>Appellant Rep.:</b>	Mother
<b>Hearing Location:</b>	Quincy		

## Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

## Jurisdiction

The appellant received a notice dated October 03, 2022 stating: Your request for prior authorization for a Convaid Cruiser stroller has been denied. MassHealth will not pay for durable medical equipment or medical/surgical supplies that are not both necessary and reasonable for the treatment of a member's medical condition or that serve essentially the same purpose as equipment already available to the member. (Exhibit 1).

The appellant filed this appeal on November 09, 2022. (130 CMR 610.015(B); Exhibit 2).

Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

## Action Taken by MassHealth

MassHealth denied the appellant's request for a Convaid Cruiser stroller.

## Issue

Is a Convaid Cruiser stroller medically necessary or are there appropriate and feasible alternative pieces of equipment already available to the recipient?

## Summary of Evidence

The MassHealth consultant testified that MassHealth/CCM provides authorization and coordination of MassHealth Long Term Services and Supports (LTSS), which includes Durable Medical Equipment (DME), to a defined population of MassHealth eligible, medically complex members. The consultant stated the appellant is 13 years old and has been enrolled with MassHealth/CCM since 2008. The appellant's primary diagnosis is Chromosome 18p Deletion (chromosome abnormality). Currently, the appellant is authorized for 46 hours/week of CSN services per week, in addition to 48.50 hours/week of PCA services out of school and 31.50 hours/week of PCA services in-school. The appellant's primary insurance is Blue Cross and Blue Shield of MA and MassHealth is his secondary insurance and payor of last resort.

MassHealth stated that on September 28, 2022, MassHealth/CCM received a prior authorization (PA) request from the appellant's provider (NuMotion) for a Convaid Cruiser stroller with accessories. On October 3, 2022, the request was denied as the Convaid Cruiser stroller was deemed to be not medically necessary and a duplication to the appellant's Quickie Iris wheelchair approved in 2021, (the representative indicated the appellant also has a Rifton activity chair approved in 2020 due to COVID). The representative stated that although the record indicates the appellant has had more than one stroller in the past, documentation at the time did not specify the family owned a wheelchair van and therefore, an additional stroller was required to transport the appellant in the community. MassHealth understands the appellant currently has a wheelchair van and therefore the Quickie Iris wheelchair meets the appellant's transportation needs at home and the community. MassHealth determined that the requested Convaid Cruiser stroller is a duplication to the Quickie Iris wheelchair as the appellant's adaptive van can support the Quickie Iris wheelchair for community transport and denied the request. MassHealth based its decision on regulations 130 CMR: 409.414 Noncovered Services (B) and 130 CMR 450.204: Medical Necessity (A), and an extensive review of all submitted documentation and review with the MassHealth/CCM Allied Health Interdisciplinary Team. MassHealth submitted into evidence: MassHealth regulations, appellant's CCM record, PA request, Quickie Iris Tilt-in-Space Wheelchair Image and Convaid Cruiser Stroller Image (Exhibit 4, pp1-67).

The appellant's representative (mother) testified the appellant requires the additional wheelchair as his current wheelchair limits where he can go. She stated that even though they have a wheelchair van no one other than herself and her husband are insured to drive the van. As a result the appellant requires a stroller so he can go out into the community with other people. Additionally the Quickie Iris wheelchair is constantly needing repair and they often have to wait months for parts, it also cannot be used on unpaved surfaces further limiting the appellant's activities.

## Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. The appellant is 13 years old, with a primary diagnosis of Chromosome 18p Deletion. (Exhibit 4 and Testimony).
2. On October 21, 2021, MassHealth approved a Quickie Iris manual tilt in space wheelchair to meet the appellant's needs in the home and the community. (Exhibit 4 and Testimony).
3. On September 28, 2022, MassHealth received a PA request from the appellant's provider for a Convaid Cruiser stroller with accessories. (Exhibit 4 and Testimony).
4. In 2020 the appellant was approved for a Rifton activity chair. (Testimony).
5. The appellant's Quickie Iris wheelchair, Rifton activity chair and wheelchair van owned by the family are all in good working order. (Testimony).

## Analysis and Conclusions of Law

MassHealth approved a Quickie Iris manual tilt in space wheelchair for the appellant on October 21, 2021. On September 28, 2022, the appellant requested a Convaid Cruiser stroller arguing as the Quickie Iris wheelchair requires an adaptive wheelchair van for transportation. Because the Quickie Iris wheelchair can only fit in the family wheelchair van and no one other than the appellant's mother and father are insured to drive the adaptive vehicle the appellant requires the Convaid Cruiser stroller so he may move about the community.

To meet the medical necessity regulations at 130 CMR 450.204<sup>1</sup> or 130 CMR 409.414<sup>2</sup> the appellant must demonstrate the requested durable medical equipment is both necessary and reasonable for the treatment of the appellant's medical condition and cannot serve the same

---

<sup>1</sup> 130 CMR 450.204: Medical Necessity: The MassHealth will not pay a provider for services that are not medically necessary; and may impose sanctions on a provider for providing or prescribing a service or for admitting a member to an inpatient facility where such service or admission is not medically necessary. (A) A service is "medically necessary" if: (1) It is reasonably calculated to prevent, diagnose, prevent the worsening of, alleviate, correct, or cure conditions in the member that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or to aggravate a handicap, or result in illness or infirmity; and (2) there is no other medical service or site of service, comparable in effect, available, and suitable for the member requesting the service, that is more conservative or less costly to the MassHealth. ...

<sup>2</sup> 130 CMR: 409.414 Noncovered Services (B) MassHealth does not pay for Durable Medical Equipment (DME) that is determined by MassHealth not to be medically necessary pursuant to 130 CMR 409.000, and 130 CMR 450.204: This includes, but is not limited to items that: (1) cannot be reasonably expected to make a meaningful contribution to the treatment of a member's illness or injury; (2) are more costly than a medically appropriate and feasible alternative pieces of equipment; or (3) serve the same purpose as DME already in use by the member with the exception of the devices described in 130 CMR 409.413(D).

purpose as equipment already in use by the appellant.

There was no medical evidence or testimony presented that the current Quickie Iris wheelchair does not meet the appellant's medical needs. The representative's argument is that because her current motor vehicle insurance will not cover anyone else driving the family's adaptive wheelchair van the appellant requires additional medical equipment to access other vehicles. The appellant's representative maintains that without the Convaid Cruiser stroller the appellant will be unable to participate in a number of community activities because of the lack of transport. While this limitation is unfortunate, the medical necessity regulations concern the medical need of the appellant and do not take into consideration the decision of the caregiver's whether or not to add supplementary individuals to their vehicle insurance. Based on the testimony presented it is the decision to restrict the adaptive wheelchair van's insurance coverage that is limiting the appellant's ability to be transported within the community and not the Quickie Iris wheelchair.

MassHealth properly denied the appellant's PA request as the appellant has failed to establish the medical necessity for the Convaid Cruiser pediatric medical stroller as it serves the same purpose as the Quickie Iris wheelchair already in use. As a result this appeal must be DENIED.

## **Order for MassHealth**

None.

## **Notification of Your Right to Appeal to Court**

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

---

Brook Padgett  
Hearing Officer  
Board of Hearings

cc: MassHealth Representative: PA Unit