

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2302681
Decision Date:	6/12/2023	Hearing Date:	05/05/2023
Hearing Officer:	Thomas Doyle	Record Open to:	

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Cassandra Horne, Appeals and Grievances
Manager; Jeremiah Mancuso, Clinical R.N.
Appeals and Grievance Manager; Kaley Emery,
Appeals Supervisor; Dr. David Mello

Interpreter:



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Medical Necessity - Request for Power Seat Lift Chair
Decision Date:	6/12/2023	Hearing Date:	05/05/2023
MassHealth's Rep.:	Cassandra Horne; Jeremiah Mancuso, R.N; Kaley Emery; Dr. David Mello	Appellant's Rep.:	Pro se
Hearing Location:	Remote (phone)	Aid Pending:	No

Authority

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

Jurisdiction

Through a notice dated March 17, 2023, Commonwealth Care Alliance Senior Care Options Program (CCA), a managed care contractor acting on MassHealth's behalf, denied the appellant's request for a power seat lift chair. (Ex. 1). The appellant filed this appeal in a timely manner on March 30, 2023. (130 CMR 610.015(B); Ex. 2). A managed care contractor's decision to deny or provide limited authorization of a requested service is grounds for appeal. (130 CMR 610.032(B)).

Action Taken by Commonwealth Care Alliance

CCA denied appellant's request for a power seat lift chair.

Issue

The appeal issue is whether CCA was correct in denying appellant's request for a power seat lift chair due to their determination there was a lack of medical necessity.

Summary of Evidence

Appellant is a female over 65 who appeared at hearing pro se. CCA was represented by Cassandra Horne, Appeals Manager; Jeremiah Mancuso, R.N.; Kaley Emery, Appeals Supervisor and Dr. David Mello. All parties appeared at hearing via telephone. Appellant requested CCA provide her with a power electric seat lift chair. After this request was made, a CCA physical therapist evaluated appellant in her home on [REDACTED] 2023. After reviewing appellant's request and the physical therapist's report, (Ex. 4, p. 9), CCA denied the request for the power lift chair on February 16, 2023. On February 24, 2023, appellant filed an appeal of that denial. The appeal was reviewed by Dr. Mellow and this internal appeal was denied on March 13, 2023. A written copy of that denial was issued on March 17, 2023. (Testimony; Ex. 1). Appellant then filed a Fair Hearing Request Form on March 30, 2023 with the Board of Hearings. (Ex. 2).

Dr. Mello testified the physical therapist's report showed appellant is independent with transfers and with her daily activities and she ambulates in her home with the assistance of a cane. (Testimony; Ex. 4, p. 10). The physical therapist offered alternatives to the power seat lift chair, including a hospital bed, a commode next to the recliner, wearing incontinence briefs or a wedge for her traditional, queen size bed. Appellant was not open to any of these suggestions. (Testimony; Ex. 4, p. 10). The physical therapist noted appellant ascends and descends stairs, when necessary, slowly with modified approach. Appellant estimates her maximum walking distance is from her home to the HA office in the center of the complex, which the therapist estimated to be at least 200-250 feet. Appellant goes shopping with friends and neighbors and carries her own groceries to her apartment herself. Appellant suffers from shortness of breath. The therapist noted appellant's current recliner is operational via a manual lever. The therapist noted appellant does not meet medically necessary guidelines for a power electric chair. (Ex. 4, pp. 10-11).

Appellant has a medical history of hypothyroidism, hypertension, hyperlipidemia, overactive bladder, type II diabetes, emphysema, osteoarthritis and squamous cell carcinoma of right lung. (Ex. 4, p. 10, 108). Appellant told the PT evaluator she needs an electric recliner because she has difficulty getting out of the reclined position at night to use the toilet. (Ex. 4, p. 9). At hearing, appellant stated that she unsure how the ability to walk through her house with a cane had anything to do with a power chair. She stated she needs to put down her current manual chair with her legs but she has had knee replacement surgery. She testified that she does not need to wear diapers and that CCA was trying to make it look like she was older than her current age. She stated all she wanted was for CCA to pay her bills and she did not need CCA to come to her house. She stated she did not need the CCA chair and that she would buy it herself somehow. (Testimony). Appellant then became unresponsive on the phone line. This hearing officer called her again but dialed the wrong number. This hearing officer called the appellant's correct phone number again and after ringing several times, appellant terminated the call. Since both parties had testified, the

hearing officer proceeded to decision.

Findings of Fact

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

1. Appellant is a female in her late sixties. (Ex. 4, p. 3).
2. Appellant has diagnoses of emphysema, osteoarthritis, type 2 diabetes, gait difficulty, shortness of breath, falls and squamous cell carcinoma of right lung. (Ex. 4, pp. 10, 13).
3. Appellant requested CCA provide her with a power seat lift chair. (Testimony).
4. A CCA physical therapist conducted an in-home evaluation of appellant on [REDACTED] 2023. (Testimony; Ex. 4, p. 9).
5. CCA denied her request for the power lift chair on February 16, 2023. (Ex. 4, p. 24; Testimony).
6. Appellant filed an appeal on the February 24, 2023 denial. (Testimony).
7. On March 13, 2023, CCA denied appellant's appeal and issued a written denial on March 17, 2023. (Ex. 1; Ex. 4, p. 113; Testimony).
8. Appellant filed a timely request for hearing with the Board of Hearings. (Ex. 2).
9. In her home, appellant is independent with transfers and with her daily activities and she ambulates with the assistance of a cane. (Ex. 4, p. 10).
10. Appellant ascends and descends stairs, when necessary, slowly, with modified approach. Appellant's maximum walking distance is 200-250 feet. Appellant carries her own groceries to her apartment. Appellant does incur shortness of breath on occasion. (Ex. 4, p. 10).
11. As an alternative to the electric power chair, CCA offered appellant a commode next to her recliner, a hospital bed, incontinence briefs and a wedge for her queen size bed. (Ex. 4, p. 10).
12. Appellant declined the CCA offer of a commode, hospital bed, incontinence briefs and the wedge. (Ex. 4, p. 10).

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007).

A "senior care organization" or "SCO" is a comprehensive network of medical, health care and social service providers that integrates all components of care, either directly or through subcontracts. SCOs will be responsible for providing enrollees with the full continuum of Medicare and MassHealth covered services. MGL c. 18E, § 9D(a). A MassHealth member must elect to enroll in an SCO, and once they do so, the SCO delivers the member's primary care and is in charge of authorizing, arranging, integrating, and coordinating the provision of all covered services for the member. 130 CMR 508.008(C). Whenever an SCO makes a coverage decision, it must provide notice to the affected member. 130 CMR 508.009. An SCO has 45 days to resolve any internal appeals, and the member then has 30 days to request a fair hearing from the Board of Hearings. See 130 CMR 508.010; 130 CMR 610.015.

Generally speaking, MassHealth is required to cover all services and treatments that are "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 agency. Services that are less costly to the MassHealth agency include, but are not limited to, health care reasonably known by the provider, or identified by the MassHealth agency pursuant to a prior-authorization request, to be available to the member through sources described in 130 CMR 450.317(C), 503.007, or 517.007.

130 CMR 450.204(A).

Here, CCA argues that the request for a power lift chair is not medically necessary. CCA showed there were other medical services comparable in effect, available and suitable for appellant, thereby negating the request for an electric power lift chair. CCA offered appellant a commode next to her recliner. Appellant maintains she needs an electric chair to more quickly get out of the chair to go to the bathroom. A commode would rectify this need of a quick exit from the chair. CCA offered appellant a hospital bed but appellant said she sleeps in the manual recliner. Incontinence briefs were offered to appellant and a wedge for her queen size bed, which would facilitate a quicker exit from her bed. Appellant declined all these comparable, available and

suitable services. Appellant stated she needed a power lift chair because she had knee surgery in the past and when she gets up from her manual recliner, she uses her legs to push in the bottom of the chair. However, it was noted by the occupational therapist when visiting appellant in her home in February 2023 appellant was not suffering from any pain. Appellant could ambulate in her home with a cane and with a rollator outdoors. Appellant can go up and down stairs slowly, when necessary. She carries her own groceries and bags to her apartment herself. Appellant indicated to the therapist evaluator that her maximum walking distance is approximately 200-250 feet. The therapist evaluator noted appellant is independent in transfers from sitting to standing from her recliner, toilet and other seating in her home. (Ex. 4, pp. 9-11). This evidence indicates appellant's legs are sufficiently strong enough to ambulate and transfer from a standing to sitting and sitting to standing position.

CCA has shown there are other comparable, available and suitable alternatives to appellant's request for an electric lift chair. Appellant declined those alternatives. The record shows appellant can ambulate in and out of her home. She is independent in transfers and her manual recliner is in working order. Appellant has not met her burden of medical necessity.

The appeal is 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.

Thomas Doyle
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Commonwealth Care Alliance SCO, Attn: Cassandra Horne, 30 Winter Street, Boston, MA 02108