

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2506503
<b>Decision Date:</b>	7/22/2025	<b>Hearing Date:</b>	06/05/2025
<b>Hearing Officer:</b>	Alexandra Shube		

**Appearance for Appellant:**

*Via telephone:*



**Appearance for MassHealth:**

*Via telephone:*

Sara Pedone, PT, Clinical Reviewer



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Prior Authorization – DME
<b>Decision Date:</b>	7/22/2025	<b>Hearing Date:</b>	06/05/2025
<b>MassHealth's Rep.:</b>	Sara Pedone, PT	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Quincy Harbor South, Remote	<b>Aid Pending:</b>	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 April 8, 2025, MassHealth denied the appellant's prior authorization request for a P Pod seat (Exhibit 1). The appellant filed this appeal in a timely manner on April 24, 2025 (see 130 CMR 610.015(B) and Exhibit 2). Denial of a request for durable medical equipment is a valid basis for appeal (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied the appellant's prior authorization request for a P Pod seat.

### Issue

The appeal issue is whether MassHealth was correct in denying the appellant's prior authorization request for a P Pod seat.

## Summary of Evidence

MassHealth was represented at hearing by the clinical appeal reviewer who is a physical therapist. The appellant was represented by her mother who is her legal guardian. Both parties appeared at hearing via telephone.

The MassHealth representative offered the following information through testimonial and documentary evidence: the appellant is an adult between the ages of 21 and 65 with a primary diagnosis of cerebral palsy. Exhibit 5 at 2. She lives at home with her mother and sister in a one-story home with a ramp to enter, but there are two stairs within the home. *Id.* at 10. She is non-ambulatory and wheelchair dependent on all mobility. *Id.* She has a history of hip surgery, back surgery, g-tube, and tendon lengthening in her elbows and hamstrings. *Id.* She has significant postural deviations including pelvic obliquity with right hip elevated, right lower extremity externally rotated with right foot crossing midline and on left foot plate. *Id.* According to her physical therapist, the appellant spends time between her stroller and the couch; however, the couch is unsafe for her to sit in for long periods of time as it does not provide proper support. *Id.*

On April 7, 2025, MassHealth received a prior authorization request for a P Pod seat. *Id.* at 2. According to a letter provided by the appellant's physical therapist, the P Pod would give the appellant a safe and supportive alternative to her stroller or couch. *Id.* at 10. The physical therapist stated that the stroller does not provide proper support and positioning and the couch is unsafe because it provides no trunk support. *Id.* Her physical therapist also stated that she is unable to use her tilt-in-space wheelchair in the house due to its size and difficulty for her family members to maneuver. *Id.*

On April 8, 2025, MassHealth denied the request because it does not meet the definition of durable medical equipment (DME). Exhibit 1. Pursuant to 130 CMR 409.402, DME must be used primarily and customarily to serve a medical purpose and it is generally not useful in the absence of disability, illness or injury. Exhibit 5 at 17. The P Pod seat, which is a bean bag chair, is not used primarily to serve a medical purpose and it can be used in the absence of a disability. Under 130 CMR 409.414(L), MassHealth does not pay for products that are not DME. *Id.* at 16.

Furthermore, MassHealth does not pay for equipment that serves the same purpose as DME already in use. *Id.* In November 2024, MassHealth approved a tilt-in-space wheelchair with customized molded seat and back cushions specifically designed for pressure relief and pressure reduction. Exhibit 6 at 1. In May 2022, MassHealth also approved a Convaid stroller. *Id.* at 5. Both of these serve positioning and mobility purposes in the home and in the community. MassHealth also approved a Sleep Safe medical bed for alternative supine and side-lying positioning in the home. These items are all DME and have been approved for positioning and mobility with the specific design, customization, and purpose of allowing for changes in position during the appellant's day.

The appellant's mother testified that the P Pod would be an alternative seating position for the appellant so she is not in her bed or wheelchair all day. She has had hip and back surgery, so sitting on the sofa or in her Convaid is not the most comfortable for her. She cannot stay in her wheelchair for twelve hours per day. The tilt-in-space wheelchair is big and can't get to every room in their house, so she would be limited to one part of the house if she stayed in her wheelchair. Being strapped in the tilt-in-space would not improve her quality of life. She has an ulcer on her buttocks. They're looking for an alternative, more comfortable seating option to improve her quality of life. Additionally, the appellant's mother is [REDACTED] and the P Pod is something she could safely transfer the appellant in and out of without over-extending herself.

## Findings of Fact

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

1. The appellant is an adult between the ages of 21 and 65 with a primary diagnosis of cerebral palsy.
2. On April 7, 2025, MassHealth received a prior authorization request for a P Pod seat, which is a bean bag chair.
3. On April 8, 2025, MassHealth denied the request because it does not meet the definition of DME and it serves the same purpose as DME already in use by the appellant.
4. MassHealth has approved the appellant for a tilt-in-space wheelchair, Convaid stroller, and Sleep Safe medical bed. These items are all DME and have been approved for positioning and mobility with the specific design, customization, and purpose of allowing for changes in position during the appellant's day.
5. The appellant is seeking the P Pod seat as an alternative, more comfortable seating option to improve her quality of life.

## Analysis and Conclusions of Law

The regulations pertaining to MassHealth's coverage of durable medical equipment (DME) services are found at 130 CMR 409.000 et seq. **MassHealth does not pay for products that are not considered DME.** 130 CMR 409.414(L). DME is defined at 130 CMR 409.402 as:

equipment that (1) is used primarily and customarily to serve a medical purpose; (2) is generally not useful in the absence of disability, illness or injury; (3) can withstand repeated use over an extended period; and (4) is appropriate for use in any setting in

which normal life activities take place, other than a hospital, nursing facility, ICF/IID, or any setting in which payment is or could be made under Medicaid inpatient services that includes room and board, except as allowed pursuant to 130 CMR 409.415 and 130 CMR 409.419(C).

Additionally, pursuant to 130 CMR 409.414, MassHealth does not pay for the following:

(B) DME that is determined by the MassHealth agency 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 reasonably be expected to make a meaningful contribution to the treatment of a member's illness or injury;
- (2) are more costly than 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).  
(Emphasis added).

In this case, MassHealth denied the appellant's request for the P Pod seat because it determined that it did not meet the definition of DME and it serves the same purpose as DME already in use by the appellant. The P Pod is a bean bag chair. As the MassHealth representative contended, a bean bag chair is not primarily used for medical purposes and is frequently used in the absence of disability, illness, or injury. Additionally, MassHealth has approved the appellant for a tilt-in-space wheelchair, Convaid stroller, and Sleep Safe medical bed. These items are all DME and have been approved for positioning and mobility with the specific design, customization, and purpose of allowing for changes in position during the appellant's day.

For the reasons set forth above, the P Pod seat does not meet the regulatory definition of DME and it is therefore not a covered service under MassHealth regulations. Additionally, even if it were considered DME, it serves the same purpose as DME already in use by the appellant and would not be covered under MassHealth regulations.

For these reasons, 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.

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Alexandra Shube  
Hearing Officer  
Board of Hearings

MassHealth Representative: Optum MassHealth LTSS, P.O. Box 159108, Boston, MA 02215