### BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON REFERRAL BY THE COMMISSIONER OF HEALTH AND SOCIAL SERVICES

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In the Matter of

ХD

OAH No. 21-0407-MDX Agency No.

# DECISION

### I. Introduction

X D receives Medicaid benefits. She requested prior authorization for a manual wheelchair with a joystick operated power assist. The Division of Health Care Services (Division) approved most of the request but denied authorization of the joystick component. Ms. D appealed that denial.

A telephonic hearing was held May 3, 2021, and June 7, 2021. Ms. D appeared on her own behalf. Laura Baldwin served as the Division's lay representative.

Based on the information in the record, the Division's denial of authorization is upheld.

# II. Facts

Ms. D has Ehlers Danlos syndrome (EDS);<sup>1</sup> postural orthostatic tachycardia syndrome (POTS);<sup>2</sup> and small fiber neuropathy. Until 2019 Ms. D could walk without assistance or with limited assistance from a cane. Her mobility has significantly decreased since 2019. Even with use of the cane, Ms. D now falls multiple times a day.<sup>3</sup>

Based on her decreased locomotion, Ms. D was assessed for a wheelchair by National Seating and Mobility (National) in December 2020.<sup>4</sup> During the evaluation process Ms. D tested several wheelchairs. A manual chair was light enough to be easily moved from a car up or down the stairs to her apartment, load into a car, and use for a brief period. However, the manual wheelchair did not meet Ms. D's medical needs because she did not have sufficient strength in

<sup>&</sup>lt;sup>1</sup> The Ehlers-Danlos syndromes (EDS) are a group of hereditary disorders of connective tissue. The underlying concern is abnormal structure or function of collagen and allied connective tissues. EDS are generally characterized by joint hypermobility, joint instability, and dislocations. Scoliosis, and other joint deformities, skin hyperextensibility, abnormal scarring, and structural weakness such as hernias and organ prolapse through the pelvic floor are common. In the rarer types of EDS, there is also weakness of specific tissues that can lead, for example, to major gum and dental disease, eye disease, cardiac valve and aortic root disorders, and life-threatening abdominal organ, uterine, or blood vessel rupture. https://www.ehlers-danlos.com/what-is-eds/.

<sup>&</sup>lt;sup>2</sup> Postural orthostatic tachycardia syndrome (POTS) is a condition that affects blood flow. POTS causes lightheadness, fainting, and an uncomfortable, rapid increase in heartbeat.

https://www.levelanclinic.org/health/disease/16560 postural orthostatic tachycardia syndrome -pots <sup>3</sup> Testimony of W. D; Ex. E, pp. 6-14.

Ex. E.

her shoulders, arms, and hands to reliably start, push, turn, and stop the chair for more than a few minutes.<sup>5</sup>

A standard power wheelchair permitted Ms. D to easily start, locomote, turn, and stop with use of one finger. Ms. D testified the power wheelchair met her medical needs. However, the standard power wheelchair was too heavy for her to carry to and from her home or load in a car.<sup>6</sup>

A "power assist" component exists for manual wheelchairs. A power assist wheelchair supplements the user's manual strength during operation, although the user must still use her arms and hands to start, push, turn, and stop the wheelchair. A power assist wheelchair is lighter than a full power wheelchair. The power assist component can be removed making it easier to carry and load. Ms. D testified that she was able to adequately move and lift the power assist wheelchair making it practical for use. However, Ms. D's health issues created the same barriers for use of the power-assist wheelchair as with the standard manual wheelchair.<sup>7</sup>

National sought to resolve the tension between Ms. D's medical and practical needs by submitting a request for preauthorization for a manual wheelchair with power assist operated by a joystick component. The joystick component would allow Ms. D to operate the power-assist wheelchair in the same manner as a full power wheelchair. The billing code for the joystick was E0983. The request was submitted December 17, 2020.<sup>8</sup>

On February 17, 2020, the Division approved the request except for the joystick component.<sup>9</sup>

Ms. D appealed that determination. The hearing in her case took place on May 3, 2020 and June 7, 2021. Ms. D represented herself. The Division was represented by Laura Baldwin who called one witness, Karen Benson, who reviewed the authorization request. Tracy Stephens also attended the hearings on behalf of the Division.

Ms. Benson testified the Alaska Medicaid program follows the Center for Medicare and Medicaid Services (CMS) billing codes as well as CMS national and local coverage determinations (LCD). The joystick billing code, E0983, is not one covered by Alaska

<sup>&</sup>lt;sup>5</sup> Testimony of W. D; Ex. E.

<sup>&</sup>lt;sup>6</sup> *Id.* 

<sup>&</sup>lt;sup>7</sup> Id. <sup>8</sup> Id.

<sup>&</sup>lt;sup>8</sup> Id.

<sup>&</sup>lt;sup>9</sup> Ex. D.

Medicaid. It is not considered "reasonable and necessary" under the guidelines. The Division therefore cannot authorize a power-assist wheelchair with a joystick component. Instead, once a joystick is added to a power-assist wheelchair, the Division considers it to be a *de facto* power wheelchair and it must be authorized and billed as such.<sup>10</sup>

Ms. D agreed that once the joystick component is added to the power assist wheelchair it is the functional equivalent of a lightweight power wheelchair. National did not submit a request for a standard power wheelchair at her direction because Ms. D concluded the model that she tested was too heavy to meet her overall lifestyle needs.<sup>11</sup>

Based on the medical records submitted during the hearing process, Ms. Benson concluded that Ms. D's health needs could justify authorization of a power wheelchair without the normal one-year trial period of a manual wheelchair if a request was made. Ms. Benson testified she understood Ms. D's dilemma: Ms. D desired a wheelchair that was light enough to be handled during transfers, but also provided power to meet her limited physical capabilities. According to Ms. Benson, the Division has authorized purchase of lightweight powered wheelchairs in the past. One such model is the Pride Mobility Jazzy wheelchair.<sup>12</sup>

National is not the local supplier for Pride Mobility medical devices, however. Ms. Benson's investigation concluded that National does not routinely carry a lightweight power-wheelchair. Ms. Benson did not know if National could special order one from its suppliers.<sup>13</sup>

At the hearing, Ms. D declined to convert her request to a standard power wheelchair which the Division would authorize. She also declined a continuance to investigate whether National could submit a special order for a lightweight power wheelchair. Lastly, she declined a continuance to investigate whether another local durable medical equipment supplier which carried Pride Mobility products could submit an updated request for the Jazzy lightweight or a similar model for pre-authorization on her behalf.<sup>14</sup>

#### III. Discussion

Ms. D has the burden of proving, by a preponderance of the evidence, that the Division's denial of authorization for the joystick component was incorrect.<sup>15</sup>

<sup>&</sup>lt;sup>10</sup> Testimony of K. Benson; Ex. B.

<sup>&</sup>lt;sup>11</sup> Testimony of W. D.

<sup>&</sup>lt;sup>12</sup> Testimony of K. Benson.

<sup>&</sup>lt;sup>13</sup> *Id.* 

<sup>&</sup>lt;sup>14</sup> Testimony of W. D.

<sup>&</sup>lt;sup>15</sup> 7 AAC 49.135.

The Alaska Medicaid program requires prior authorization for wheelchairs and their components.<sup>16</sup> The Division pays for durable medical equipment (DME) such as wheelchairs and components if they are medically necessary as determined by criteria established under 7 AAC 120.200-7 AAC 120-399.<sup>17</sup> In addition, to be authorized by Medicaid, an item or service must fall within one or more benefit categories, and not otherwise be excluded from coverage.

The United Sates Department of Health and Human Services, Center for Medicare and Medicaid Services (CMS), Healthcare Common Procedure Coding System (HCPCS) governs billing approval by the Division.<sup>18</sup> Karen Benson, testifying on behalf of the Division, stated that the joystick component at issue here is not on the list of approved billing items. Ms. Benson further testified that the National Coverage Determinations (NCD) Manual, *Mobility Assistive Equipment* (MAE), a Local Coverage Determination (LCD), and a Local Coverage Article (LCA), also prohibit authorization of the joystick as an attachment to a power-assist wheelchair.<sup>19</sup> The joystick attachment for a manual wheelchair with power assist is not considered "reasonable and necessary." If it is medically necessary for the benefit recipient to use power for locomotion, then a power wheelchair rather than a modification of a manual chair should be requested and authorized.<sup>20</sup> Thus, the joystick requested by Ms. D is an item excluded from coverage.<sup>21</sup>

The Division authorized a manual wheelchair with power assist per the December 17, 2020 authorization request. At the hearing, after review of additional medical records, the Division additionally agreed that a full power wheelchair appeared medically necessary for Ms. D. The Division further indicated at the hearing that it would consider authorization of a lightweight power wheelchair were a request submitted. But the Division did not and could not agree to authorize a power wheelchair by adding a component not covered by Medicaid to a manual wheelchair with power assist.<sup>22</sup>

<sup>22</sup> Id.

<sup>&</sup>lt;sup>16</sup> 7 AAC 105.130(4); 7 AAC 120.210(b)(9).

<sup>&</sup>lt;sup>17</sup> Durable medical equipment means "equipment that (A) can withstand repeated use; (B) is primarily and customarily used to serve a medical purpose; (C) generally is not useful to an individual in the absence of an illness or injury; and (D) is appropriate for use in the home, school, or community." 7 AAC 105.399(4). Wheelchairs are listed as durable medical equipment. 42 U.S.C. § 1861(n). Medical purposes include those "necessary for the diagnosis and treatment of an illness or injury, or for the correction of an organic system." 7 AAC 105.110. <sup>18</sup> 7 AAC 160.900(a)(2).

<sup>&</sup>lt;sup>19</sup> Testimony of K. Benson. The applicable LCD and LCA were submitted in Ex. B.

<sup>&</sup>lt;sup>20</sup> *Id.* 

<sup>&</sup>lt;sup>21</sup> Id.

Ms. D desired a lightweight power wheelchair. The DME provider she selected does not routinely carry such a product. Ms. D, therefore, sought to have the Division authorize payment for a non-covered design substitute. Ms. D presented no legal authority for them to do so, however.

Given this record, Ms. D has failed to meet her burden of proof that the Division erred in the denial of authorization for the joystick component.

Ms. D may elect not to obtain the manual wheelchair with power assist and instead submit a request for authorization of a standard or lightweight power wheelchair. The present referral does not encompass that issue, and this decision does not decide it for or against Ms. D.

#### IV. Conclusion

The Division's determination is upheld.

Dated: June 10, 2021

<u>Signed</u> Carmen E. Clark Administrative Law Judge

#### Adoption

The undersigned, by delegation from the Commissioner of Health and Social Services, adopts this Decision, under the authority of AS 44.64.060(e)(1), as the final administrative determination in this matter.

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 23<sup>rd</sup> day of June, 2021.

By: <u>Signed</u>

Name: Carmen Clark Title: Administrative Law Judge

[This document has been modified to conform to the technical standards for publication. Names may have been changed to protect privacy.]