



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

Division of Medical Assistance and Health Services

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Assistant Commissioner

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES

L.N.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE :

AND HEALTH SERVICES AND :

WELLPOINT, :

RESPONDENTS. :

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 19895-25

As Assistant Commissioner for the Division of Medical Assistance and Health Services (DMAHS), I have reviewed the record in this case, including the OAL case file, the documents in evidence, and the Initial Decision. Neither party filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision is April 13, 2026, pursuant to N.J.S.A. 52:14B-10, which

requires the Agency Head to adopt, reject, or modify the Initial Decision within 45 days of the agency's receipt.

This matter arises from Wellpoint's June 24, 2025 denial of Petitioner's request for a specialty bed. The issue presented is whether Wellpoint properly denied the request in accordance with N.J.A.C. 10:59-1.4(a) and the applicable Clinical Utilization Management (UM) guidelines.

Petitioner is a three-year-old child diagnosed with Williams syndrome. (R-1.) As a result of this condition, Petitioner experiences significant sleep difficulties and frequently climbs out of their crib. Ibid. Petitioner has also escaped from a commercial crib tent, rolled off a mattress placed on the floor outside the crib, and broken through safety rails and gates installed for childproofing purposes. Ibid. Additionally, Petitioner places objects in their mouth and has sustained injuries from contact with crib rails. Ibid. Due to these safety concerns, Petitioner's parents requested preauthorization on June 24, 2025, for a safety bed from National Seating and Mobility to provide a safer sleep environment and reduce the risk of injury. Ibid.

The requested bed is fully enclosed with a mesh canopy and includes mesh-and-fabric doors. Ibid. The bed features a visible exterior zipper that allows supervised access and a concealed interior zipper designed to prevent unsupervised exits. Ibid. The bed also included a padded metal frame and a gel foam mattress intended to distribute pressure and regulate temperature. Ibid. The bed does not include a mechanism to raise or lower its height. Ibid.

On July 2, 2025, Wellpoint denied the request, determining that the safety bed was neither safe nor effective for treating Petitioner's condition. (R-2.)

Petitioner filed an internal appeal on July 31, 2025. (R-3.) After reviewing the appeal and Petitioner's medical record, Wellpoint upheld the denial on August 29, 2025. (R-4.) On October 15, 2025, the New Jersey Department of Banking and Insurance Independent Utilization Review Organization (IURO) also affirmed Wellpoint's determination. ID at 2.

Judith Glaser, D.O. (Dr. Glaser), Medical Director of Medicaid Clinical Operations at Elevance Health, reviews requests for durable medical equipment (DME) for children to determine medical necessity. ID at 3. After reviewing the request, Dr. Glaser concluded that the proposed safety bed would not treat Petitioner's Williams syndrome, as that condition does not require bed confinement. Ibid. Specifically, Petitioner does not experience seizures, disorientation, vertigo, or other neurological conditions, such as autism, that would necessitate such a restriction. Ibid. Rather, Petitioner's needs are consistent with those of any other child who simply requires a safe sleeping environment. Ibid. Dr. Glaser further noted that less restrictive and commercially available alternatives, including safety locks, monitoring devices, floor beds with railings, behavioral therapy, and over-bed tent enclosures, exist and have not yet been attempted. Ibid. Accordingly, Dr. Glaser determined that the requested safety bed exceeds Petitioner's medical needs. Ibid.

On October 21, 2025, Petitioner requested a fair hearing. ID at 2. The hearing was conducted, and the record closed on February 3, 2026. Ibid.

The Administrative Law Judge (ALJ) upheld Wellpoint's determination, finding that in denying the request, Dr. Glaser relied on the Clinical UM Guideline for Hospital Beds and Accessories, which provides that a safety bed is medically necessary only when an individual must be restrained to remain in bed and less restrictive interventions have been attempted without success. ID at 4. The guideline further provides that enclosed beds

may be appropriate for individuals with conditions such as seizures, disorientation, vertigo, or neurological disorders, including autism, when clinical documentation shows that alternatives, such as bed rails, rail protectors, or environmental modifications, have been tried and failed.

The ALJ determined that Petitioner's parents presented no evidence demonstrating that Petitioner requires restraint in bed or that less restrictive alternatives had been attempted unsuccessfully. Ibid. The ALJ further found that the requested safety bed would not address Petitioner's primary issue, their inability to sleep through the night. Ibid. Accordingly, the ALJ concluded that Petitioner does not meet the criteria for a safety bed. Ibid. I concur with this determination.

Based on the applicable regulations and the evidence in the record, Petitioner has not met the burden of demonstrating that the requested safety bed is medically necessary under New Jersey Medicaid standards. The Clinical UM Guidelines require documentation establishing that the individual must be restrained to bed and that less restrictive interventions have been attempted and proven unsuccessful. The record contains no credible evidence demonstrating that Petitioner requires restraint for the treatment of their condition, nor does it establish that less restrictive measures have been attempted and failed.

Moreover, the evidence indicates that the requested safety bed would not address Petitioner's primary condition, difficulty sleeping through the night. Therefore, it cannot be considered a safe, effective, or medically necessary intervention for their condition, and does not satisfy the conditions of N.J.A.C. 10:59-1.4 (a).

Accordingly, the denial of the requested safety bed was appropriate and consistent with applicable Medicaid regulations.

THEREFORE, it is on this 10th day of APRIL 2026,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Gregory Woods

Gregory Woods, Assistant Commissioner
Division of Medical Assistance and Health Services