



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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Acting Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

R.W.R.,

PETITIONER,

v.

UNITED HEALTHCARE,

RESPONDENT.

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ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 05921-2021

As Assistant Commissioner for the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision and the Office of Administrative Law (OAL) case file. No exceptions were filed in this matter. Procedurally, the time period for the Agency Head to render a Final Agency Decision is March 4, 2021 in accordance with an Order of Extension.

This matter arises from United Healthcare’s (United) denial of Petitioner’s April 7, 2021 request for Durable Medical Equipment (DME),¹ specifically a K-3 prosthetic leg with a computerized knee and foot. Based upon my review of the record, I hereby ADOPT the findings and conclusions of the Administrative Law Judge (ALJ).

¹ DME is an item or apparatus that is primarily or customarily prescribed to serve a medical purpose and is medically necessary for the beneficiary for whom requested; is generally not useful to a beneficiary in the absence of a disease, illness, injury, or disability; and is capable of withstanding repeated use (durable) and is nonexpendable. N.J.A.C. 10:59-1.2.

In May 2020, Petitioner underwent an above the knee, left leg amputation and began utilizing a temporary K-2 prosthetic limb, which no longer fits her. ID at 6. Petitioner requested a K-3 prosthetic limb with a computerized knee and foot, but United denied the request as not being medically necessary, pursuant to United's policy number CS104NJ.L, "Prosthetic Devices, Specialized, Microprocessor or Myoelectric Limbs" (Policy). Id. at 2 and R-6.

Petitioner is a Medicaid Managed Long-Term Services and Supports member and has an aide who assists Petitioner with bathing and other needs. Id. at 2-3. During Petitioner's previous request for a stairlift, she self-reported that her capabilities were "totally dependent for ambulation/mobility needs." Id. at 3. (citing R-10). United determined that Petitioner's total dependence for ambulation and mobility needs is incompatible with United's definition of a K-3 user, which is defined in the Policy as an individual that "[h]as the ability or potential for ambulation with variable cadence. . . . which is [t]ypical of the community ambulator who has the ability to traverse most environmental barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion." Id. at 3. And R-6,

The Initial Decision found that United correctly determined that Petitioner did not qualify for a K-3 prosthesis but did qualify for a K-2 prosthetic limb, which is used, per United's Policy, by an individual that "[h]as the potential for ambulation with the ability to transverse low level environmental barriers such as curbs, stairs or uneven surfaces. . . . which is [t]ypical of the limited community ambulator." Ibid. I concur. Petitioner has failed to show that she has "the ability or potential for ambulation with variable cadence" and that she can "traverse most environmental barriers," required for a K-3 prosthesis in United's Policy. Dr. Amy Aronsky, Medical Director of United, testified that a "variable

cadence” means that Petitioner had the ability to change the pace of locomotion, such as from a walk to a jog. Id. at 4. Petitioner testified that she does not jog, run, go for long walks, and does not use a bicycle. Id. at 5. Moreover, Petitioner walks with a “slow cadence” and she testified that her ambulation abilities are limited since her amputation. Id. at 5 and R-4. As Petitioner is a “limited community ambulator” who is able to “transverse low level environmental barriers,” Petitioner’s needs can be satisfied through the use of a permanent K-2 prosthetic limb, which has not yet been attempted.

Additionally, Petitioner has not shown that a K-3 prosthesis is medically necessary. United’s Policy provides that medical necessity is shown when the DME is clinically appropriate; not mainly used for the member’s or member’s doctor’s convenience; and not more costly than an alternative drug, service, site, or supply that is likely to produce equivalent therapeutic or diagnostic results. R-6. Moreover, the Policy states that computerized prosthetic limbs are a covered healthcare service only when specific criteria are met, including that the records from Petitioner’s healthcare provider “document the patient’s current functional capabilities and his/her expected functional rehabilitation potential, including an explanation for the difference, if that is the case” and that Petitioner must demonstrate that she is “able to physically function at a level necessary for a computerized prosthetic or microprocessor, e.g. hand, leg, or foot.” Ibid. The record does not support a finding that these criteria have been met. Specifically, Petitioner has not demonstrated that she has experience with an advanced knee. The record shows that Petitioner has only had experience with using a temporary K-2 prosthetic limb. Moreover, the records supplied by Petitioner do not explain why a prosthetic limb without a computerized knee will not meet her current or expected activity level. While Petitioner states that her temporary K-2 limb is uncomfortable and does not fit well, she has failed

to provide any documentation showing that a K-3 prosthetic limb is medically necessary over the K-2 prosthetic, which United approved.

Thus, for the reasons set forth in the Initial Decision and set forth above, I hereby ADOPT the Initial Decision in this matter and FIND that Petitioner has failed to demonstrate that the K-3 prosthetic limb is medically necessary and therefore, United properly denied Petitioner's request for the K-3 prosthetic limb.

THEREFORE, it is on this 3rd day of MARCH 2022,

ORDERED:

That the Initial Decision is hereby ADOPTED.



Jennifer Langer Jacobs, Assistant Commissioner
Division of Medical Assistance and Health Services