

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2177688
<b>Decision Date:</b>	12/22/2021	<b>Hearing Date:</b>	11/19/2021
<b>Hearing Officer:</b>	Susan Burgess-Cox		

**Appearance for Appellant:**




**Appearance for MassHealth Integrated  
Care Organization (ICO):**

Cassandra Horne & Christine  
Henderson



*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
<b>Decision Date:</b>	12/22/2021	<b>Hearing Date:</b>	11/19/2021
<b>ICO's Reps.:</b>	Cassandra Horne & Christine Henderson	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	All Parties Appeared by Telephone	<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 September 10, 2021, Commonwealth Care Alliance, (CCA), a MassHealth-contracted Integrated Care Organization (ICO), notified the appellant that they denied her Level 1 Appeal regarding local laundry services through One Stop Cleaners as the services were not medically necessary. (Exhibit 1). The appellant filed this external appeal of a final decision of an ICO in a timely manner on October 6, 2021. (130 CMR 610.018; Exhibit 2). A decision of an ICO to “deny or provide limited authorization of a requested service, including the type or level of service, including determinations based on the type or level of service, requirements for medical necessity, appropriateness, setting, or effectiveness of a covered benefit” is valid grounds for appeal. (130 CMR 610.032(B)).

### Action Taken by the Integrated Care Organization

The MassHealth-contracted Integrated Care Organization (ICO), Commonwealth Care Alliance (CCA), denied the appellant's prior authorization request for local laundry services.

## **Issue**

Whether CCA was correct in denying the appellant's prior authorization request for local laundry services.

## **Summary of Evidence**

All parties to the hearing appeared by telephone. Documents from CCA were incorporated into the hearing record as Exhibit 4.

The appellant is eligible for MassHealth through a Home- and Community- Based Services (HCBS) Waiver. The appellant is enrolled in an Integrated Care Organization (ICO), Commonwealth Care Alliance (CCA). The appellant was authorized to receive one load of local laundry services through One Stop Cleaners, Inc. The appellant underwent reauthorization for laundry services and CCA denied this request as the appellant had an assessment of her care needs and it was determined that she has informal support as she lives with her spouse who is responsible for shared household tasks. The appellant filed a Level I appeal. CCA performed a second review and upheld the initial decision.

As an ICO, CCA is responsible for providing enrolled members with the full continuum of Medicare- and MassHealth covered services. CCA can provide more to members than MassHealth allows, but not less.

The appellant has a primary diagnosis of major depressive disorder and post traumatic stress disorder. The appellant also has scoliosis, asthma, restless leg syndrome, sleep apnea and morbid obesity. The appellant requires assistance with laundry and light homemaking tasks as well as limited assistance with meal preparation, shopping and transportation. As noted above, and records show, the appellant lives with her spouse who also receives services through CCA. No testimony or evidence was presented regarding the limitations of the appellant's spouse or services she receives. The CCA representative noted that the appellant was eligible, and received, other homemaking services but ended those services on her own while continuing with the weekly laundry service. Records and testimony show that the appellant worked part-time as a residential counselor.

The CCA representative testified that during the COVID emergency, CCA continued or added services to ensure members remained stable and protect them from going out into the community. As COVID restrictions began to be lifted, CCA started to re-evaluate cases. As noted above, an assessment in

March 2021 showed that the appellant was independent with Activities of Daily Living (ADLs) and most Instrumental Activities of Daily Living (IADLs). The representatives from the ICO testified that another face-to-face assessment was done in October 2021 and did not result in an adjustment to the decision denying external laundry services. In addition to residing with her spouse, the appellant lives in a building that has a washer and dryer available for use by the tenants. CCA had notes in their records that the appellant did not want to use the machines in the building due to a risk of theft. The CCA representative testified that an individual who can go to shop, work and participate in activities with her spouse should not require external laundry services.

The appellant and her spouse appeared by telephone. The appellant's spouse testified that it is not safe to do laundry in their building due to threats made by other tenants. The appellant and her spouse have contacted the local police department about incidents, and they were not aware of any action taken related to their reports. The appellant testified that she is not working because she began treatment related to binge eating. The appellant's spouse testified that the appellant ended the homemaker services as the homemakers stole from them and there were cultural barriers.<sup>1</sup> The appellant testified that she is unable to do laundry on her own because of pain in her back. The appellant testified that she spends most of her time on the couch due to the pain. The representatives from CCA responded that records do not indicate the appellant being prescribed any medications for pain and records show that the appellant is able to go to work part-time and engage in other activities outside of the home. The appellant abruptly hung up prior to the conclusion of the hearing.

The Board of Hearings received documents after the record closed. These documents were not incorporated into the hearing record as at least one was not relevant to the matter at issue and both were received after the record was closed due to the appellant abruptly ending the hearing.

## **Findings of Fact**

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

1. The appellant is eligible for MassHealth through a Home- and Community- Based Services (HCBS) Waiver.
2. The appellant is enrolled in an Integrated Care Organization (ICO), Commonwealth Care Alliance (CCA).

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<sup>1</sup> The cultural barriers noted by the appellant and her spouse involved personal aversion to the background and personality of the caretakers rather than concerns regarding the ability of the individuals to provide the necessary services safely and appropriately.

3. The appellant has a primary diagnosis of major depressive disorder and post-traumatic stress disorder.
4. The appellant has scoliosis, asthma, restless leg syndrome, sleep apnea and morbid obesity.
5. The appellant has a history of working.
6. The appellant recently stopped working to receive treatment for an eating disorder.
7. The appellant lives with her spouse.
8. The appellant's spouse receives services through CCA.
9. The appellant is independent with activities of daily living.
10. The appellant requires assistance with laundry and light homemaking tasks as well as limited assistance with meal preparation, shopping and transportation.
11. During the COVID state of emergency, CCA continued or added services to ensure members remained stable and protect them from going out into the community.
12. During the COVID state of emergency, CCA approved homemaker services for the appellant.
13. During the COVID state of emergency. CCA approved weekly laundry services through One Stop Cleaners, Inc.
14. The appellant ended homemaker services on her own.
15. The appellant continued the weekly laundry services.
16. As the state began to lift restrictions, CCA began performing assessments of member's care needs.
17. The appellant underwent a reauthorization for weekly laundry services provided by One Stop Cleaner's Inc.
18. An assessment was conducted in March 2021.

19. CCA determined that the appellant had support in the home so denied the reauthorization for weekly laundry services.
20. An assessment in October 2021 did not demonstrate that external laundry services were necessary.
21. The appellant lives in an apartment building with a washer and dryer in the building available for use by the tenants.

## **Analysis and Conclusions of Law**

In order to be eligible to enroll in an integrated care organization (ICO), a MassHealth member must meet all of the following criteria, and may not be enrolled or concurrently participate in any of the programs or plans listed in 130 CMR 508.007(F):

- (a) be 21 through 64 years of age at the time of enrollment;
- (b) be eligible for MassHealth Standard as defined in 130 CMR 450.105(A): MassHealth Standard or MassHealth CommonHealth as defined in 130 CMR 450.105(E): MassHealth CommonHealth;
- (c) be enrolled in Medicare Parts A and B, be eligible for Medicare Part D, and have no other health insurance that meets the basic-benefit level as defined in 130 CMR 501.001: Definition of Terms; and
- (d) live in a designated service area of an ICO. (130 CMR 508.007(A)(1)).

The appellant meets the requirements to enroll in an ICO. (130 CMR 508.007).

When a member is enrolled in an ICO in accordance with the requirements under 130 CMR 508.007(A), the ICO will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. (130 CMR 508.007(C)). Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports. (130 CMR 506.007(C)).

The appellant is eligible for MassHealth under the MassHealth Home and Community-based Services (HCBS) waivers. (130 CMR 519.007). All providers of services under the HCBS waivers must comply with MassHealth regulations set forth in 130 CMR 630.000 and 450.000: Administrative and Billing Regulations, and

with HCBS regulations and requirements established by the Centers for Medicare and Medicaid Services. (130 CMR 630.401).

MassHealth does not pay for HCBS waiver services furnished by legally responsible individuals as defined in 130 CMR 630.402. (130 CMR 630.408(D)). A legally responsible individual is defined as any person who has a duty under state law to care for another person and includes a legal guardian or spouse of a participant. (130 CMR 630.402).

As noted at the hearing, HCBS waiver services include homemaker services. A homemaker is defined as a person who performs light housekeeping duties (for example, cooking, cleaning, laundry, and shopping) for the purpose of maintaining a household. (130 CMR 630.402). Homemaker services are not covered when the participant or someone else in the household is capable of performing the tasks or when a relative, caregiver, landlord, community/volunteer agency, or third party payer is capable of or responsible for homemaking tasks. (130 CMR 630.416(B)).

The appellant lives with her spouse. The appellant and her spouse abruptly ended the hearing before providing substantial testimony or evidence to demonstrate that the spouse is not capable or responsible for homemaking tasks such as laundry. Instead, the appellant and her spouse spoke of the appellant's limitations and the inconvenience of doing laundry in the building. Additionally, the testimony of the appellant and her spouse regarding the appellant's limitations conflicted with information provided by the ICO based on more than one assessment done prior to the hearing. The facts and evidence presented by the ICO were more persuasive than the testimony of the appellant and her spouse.

As noted above, all providers of services under the HCBS waivers must comply with MassHealth regulations set forth in 130 CMR 630.000 and 450.000: Administrative and Billing Regulations. Pursuant to 130 CMR 450.204, MassHealth pays only for medically necessary services to eligible MassHealth members and may require that medical necessity be established through the prior authorization process. (130 CMR 420.410(A)(1)).

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 MassHealth. (130 CMR 450.204(A)).

The appellant did not demonstrate that the external laundry services were medically necessary.

The decision made by the ICO was correct.

This appeal is denied.

## **Order for MassHealth Integrated Care Organization**

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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Susan Burgess-Cox  
Hearing Officer  
Board of Hearings

cc:

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

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