# Office of Medicaid BOARD OF HEARINGS

#### **Appellant Name and Address:**



Appeal Decision: Dismissed Appeal Number: 2309303

**Decision Date:** 12/28/2023 **Hearing Date:** 10/30/2023

Hearing Officer: Kimberly Scanlon

Appearance for Appellant:

Via telephone

Appearance for MassHealth:

Via telephone Donna Burns, R.N.



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

Appeal Decision: Dismissed Issue: PCA Services

Decision Date: 12/28/2023 Hearing Date: 10/30/2023

MassHealth's Rep.: Donna Burns, R.N. Appellant's Rep.:

Hearing Location: Quincy Harbor South Aid Pending: No

4 (Remote)

## **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 18, 2023, MassHealth denied the Appellant's prior authorization (PA) request for an adjustment of his personal care attendant (PCA) services. (Exhibit 1). The prior authorization request made was for an additional 7 hours and 15 minutes per week. MassHealth denied the request because the clinical documentation submitted did not demonstrate that all requested services and treatment are needed for the Appellant. The Appellant filed this appeal in a timely manner on September 29, 2023. (See, 130 CMR 610.015(B); Exhibit 2). At the hearing, the MassHealth representative testified that additional information was requested from the Appellant's Personal Care Management (PCM) agency and made inquiry as to the Appellant's current health conditions. After hearing testimony from the Appellant's representative, the MassHealth representative approved the requested adjustment of an additional 7 hours and 15 minutes per week.

Because the parties reached an agreement, there are no longer any issues in dispute. Therefore, this appeal is dismissed. (130 CMR 610.051(B)).

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## **Order for MassHealth**

If MassHealth has not already done so, make the adjustments agreed to at the hearing, as described above.

## Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Kimberly Scanlon Hearing Officer Board of Hearings

cc:

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

Appellant's Representative:

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