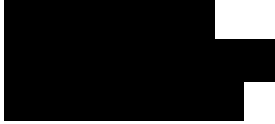


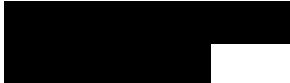
Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed in part; Denied in part	Appeal Number:	2419336
Decision Date:	04/04/2025	Hearing Date:	01/24/2025
Hearing Officer:	Thomas Doyle	Record Open to:	02/14/2025

Appearance for Appellant:




Appearance for MassHealth:

Nelisette Rodriguez, RN



*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 in part; Denied in part	Issue:	Prior Authorization – Home Health Services
Decision Date:	04/04/2025	Hearing Date:	01/24/2025
MassHealth's Rep.:	Nelisette Rodriguez, RN	Appellant's Rep.:	
Hearing Location:	Remote (phone)	Aid Pending:	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 December 12, 2024, MassHealth denied the appellant's prior authorization request (PA) for an increase on the current home health services PA to 11 medication administration visits (MAVs). MassHealth denied the PA request due to duplication of services with PCA services. (Ex. 1). The appellant filed this appeal in a timely manner on January 7, 2025. (Ex. 2). Denial of assistance is valid grounds for appeal. (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied appellant's PA request for an increase on his current home health services PA to include 11 MAVs.

Issue

The appeal issue is whether MassHealth was correct to deny appellant's PA request to increase his current home health services PA to include 11 MAVs.

Summary of Evidence

The appeal representatives and the MassHealth representative all appeared via phone and were sworn. The MassHealth representative stated the following: Appellant is a male in his [REDACTED] who lives in congregate housing and has a guardianship and Rogers in place. His diagnosis includes schizoaffective disorder. MassHealth received a PA request for home health services on December 12, 2024 from appellant's provider, Able Home Care, LLC., requesting an increase on the current PA to include 11 MAVs. MassHealth denied the PA request due to duplication of services with PCA services. The MassHealth representative stated appellant is approved currently for 15 hours and 30 minutes a week for PCA services, which includes approved time for the ADL of assistance with medications 2 times a day. (Testimony). The MassHealth representative noted the regulation regarding discharge procedures which state a member shall be discharged by the home health agency provider if the member selects another MassHealth service that is duplicative of the home health the member is receiving, including MassHealth services that provide assistance with personal care. (130 CMR 403.422 (A)(1)(d)). The MassHealth representative also cited to Guidelines for Medical Necessity Determination for Home Health Service, which states MassHealth does not consider home health services to be medically necessary under circumstances such as "the service replicates concurrent services provided in a different setting with similar treatment goals, plans and therapeutic modalities." (Testimony; Ex. 4, p. 71). The MassHealth representative stated appellant is currently approved for 1 skilled nursing visit per week, 4 as needed visits and 0 MAVs from December 15, 2024 to March 14, 2025. (Testimony). She stated if appellant submitted an adjustment for his PCA hours to remove the ADL of assistance with medications, MassHealth could approve time for the MAVs. She stated MassHealth cannot approve time for MAVs while PCA time for assistance with medications is active. (Testimony).

The appeal representatives requested the record be left open to attempt to obtain an adjustment on appellant's PCA services to remove the ADL assistance with medications. (Ex. 9). A request to extend the record open was allowed. (Ex. 10).

On February 6, 2025, the MassHealth representative contacted me and the appeal representatives indicating that she received an email from the PCA reviewer that the adjustment was completed. She wrote the adjustment will be effective from February 20, 2025. She explained when making an adjustment to a PCA prior authorization, it is PCA policy to make the effective day of adjustment 2 weeks after date of submission. She wrote that the approval for MAVs will be from February 20, 2025 to March 14, 2025. (Ex. 11). I asked the MassHealth representative what authority she had to not backdate the adjustment to December 15, 2024, the start of the PA period. She submitted an email citing her reasoning for not back dating the coverage to December 15, 2024. (Ex. 12). The MassHealth representative stated they were not able to backdate the prior authorization due to duplication with PCA services. (Ex 12, p. 1). She stated the PCA prior authorization had allotted time for assistance with medication and MassHealth was billed for those services. As authority, the MassHealth representative cited 130 CMR 403.410 (A)(1), prior authorization; 403.422 (A)(1)(d), discharge planning due to duplicative services and 403.409 (D), availability of other caregivers and (E) Least costly form of care. (Ex. 12, p. 2).

Findings of Fact

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

1. Appellant is a male in his [REDACTED] who lives in congregate housing and has a guardianship and Rogers in place. His diagnoses include schizoaffective disorder. (Testimony).
2. MassHealth received a PA request on December 12, 2024 from appellant's provider, Able Home Care, LLC., requesting an increase on the current home health services PA to include 11 medication administration visits. (Testimony).
3. MassHealth denied the PA request due to duplication of services with PCA services. Appellant is approved currently for 15 hours and 30 minutes a week for PCA services, which includes approved time for the ADL of assistance with medications 2 times a day. (Testimony).
4. Appellant is currently approved for 1 skilled nursing visit per week, 4 as needed visits and 0 MAVs from December 15, 2024 to March 14, 2025. (Testimony).
5. During the record-open period, the appellant's PCA authorization was adjusted to remove the time previously approved for assistance with medications. On this basis, MassHealth approved the requested MAVs effective February 20, 2025, the date the PCA time was modified, through March 14, 2025 (Ex. 11).

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007). Moreover, "[p]roof by a preponderance of the evidence is the standard generally applicable to administrative proceedings." Craven v. State Ethics Comm'n, 390 Mass. 191, 200 (1983).

130 CMR 403.409: Clinical Eligibility Criteria for Home Health Services

...

(D) Availability of Other Caregivers. When a family member or other caregiver is providing services, including nursing services, that adequately meet the member's needs, it is not medically necessary for the home health agency to provide such services.

(E) Least Costly Form of Care. The MassHealth agency pays for home health agency services only when services are no more costly than medically comparable care in an appropriate institution and the least costly form of comparable care available in the community.

130 CMR 403.410: Prior Authorization Requirements

(A) General Terms. (1) Prior authorization must be obtained from the MassHealth agency or its designee as a prerequisite to payment after certain limits are reached, as described in 130 CMR 403.410. Without such prior authorization, the MassHealth agency will not pay providers for these services.

130 CMR 403.422: Transfers and Discharge Planning

(A) Discharge Procedures.

(1) A member shall be discharged by the home health agency provider under the following conditions:

...

(d) if the member selects another MassHealth service that is duplicative of the home health the member is receiving, including MassHealth services that provide assistance with personal care.

The issue in this case was MassHealth's denial of appellant's request to adjust his existing home health services authorization to add 11 medication administration visits per week. MassHealth's denial was based on a duplication with PCA services, which covered assistance with medications. During the record-open period, appellant removed from his PCA prior authorization time for the ADL of assistance with medications. MassHealth then agreed that action removed the duplication aspect of appellant's PA request for 11 MAVs a week and approved appellant's PA request. Therefore, this part of the appeal is dismissed.

The remaining issue is MassHealth's denial to back date appellant's PA request to the beginning of his dates of service, December 15, 2024. MassHealth states they have already paid for assistance with medications included in appellant's PCA time and that occurred until the adjustment went into effect on February 20, 2025. I find MassHealth's position correct. The regulations state MassHealth must only pay for the least costly form of comparable care available in the community. Additionally, if other caregivers are providing services that adequately meet the member's needs, it is not medically necessary for the home health agency to provide such services. Appellant was receiving, and MassHealth paid for, PCA services that included assistance with medications up to February 20, 2025. Since MassHealth already paid for services that included assistance with medications in appellant's PCA hours, there was no error in MassHealth denying the request to backdate the adjusted PA to December 15, 2024. This part of the appeal is denied.

Order for MassHealth

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.

Thomas Doyle
Hearing Officer
Board of Hearings



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