

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied in part Approved in part;	<b>Appeal Number:</b>	2501141
<b>Decision Date:</b>	04/11/2025	<b>Hearing Date:</b>	02/21/2025
<b>Hearing Officer:</b>	Scott Bernard		

**Appearance for Appellant:**



**Appearance for MassHealth:**


Kelly Rayen RN (Optum) via telephone

**Interpreter:**



*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>	Approved in part; Denied in part	<b>Issue:</b>	Prior Authorization/Personal Care Attendant
<b>Decision Date:</b>	04/11/2025	<b>Hearing Date:</b>	02/21/2025
<b>MassHealth's Rep.:</b>	Kelly Rayen RN	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Quincy Harbor South	<b>Aid Pending:</b>	N/A

### 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 11, 2024, MassHealth approved the appellant's PA request for PCA services with modifications. (See 130 CMR 422.410(A)(3), B(1)(2); 450.204(A)(1); Exhibit (Ex.) 1; and Ex. 5, pp. 3-5). The appellant filed this appeal in a timely manner on January 16, 2025. (See 130 CMR 610.015(B) and Ex. 2). Modification of a PA request for PCA services is valid grounds for appeal. (See 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth approved the appellant's request for PCA services with modifications.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 422.410(A)(3),B(1),(2); and 450.204(A)(1) in modifying the request for PCA services.

## Summary of Evidence

MassHealth was represented by a registered nurse working as a clinical appeals reviewer for Optum, MassHealth's agent overseeing the Personal Care Attendant (PCA) program. With the assistance of an interpreter, the appellant spoke on her own behalf, and was accompanied by her PCA. All parties attended the hearing by telephone.

The MassHealth representative testified to the following. According to documentation submitted to MassHealth for review, the appellant is under the age of 65 years old with a primary diagnosis of chronic bilateral hand pain, status post-surgery to both wrists three years ago. (Testimony; Ex. 5, pp. 10-12). The appellant wears braces on both wrists and takes ibuprofen as needed for pain. (Id.). The appellant has a past medical history of depression, short term memory loss, osteoarthritis and sciatica. (Id.). She lives alone in a first floor apartment. (Id.).

The Occupational Therapist assessment documents that the appellant is independent with mobility, transfers on and off the toilet, toileting associated tasks, feeding herself, and oral hygiene. (Testimony; Ex. 5, pp. 7-9). The occupational therapist documented the appellant requires minimal assistance with bathing transfers in and out of the tub, transfers in and out of bed, grooming, dressing, medication management, and all instrumental activities of daily living (IADLs). (Testimony; Ex. 5, pp. 7-9). The appellant has a cane and the occupational therapist documented she would benefit from a shower chair. (Testimony; Ex. 5, pp. 7-9).

A prior authorization request for personal care attendant initial evaluation was submitted to MassHealth on December 9, 2024 by Northeast ILP (the PCM agency), requesting 12 hours per week for one year. (Testimony; Ex. 5, pp. 46-49). MassHealth modified the request on December 11, 2024 to nine hours and forty-five minutes per week. (Testimony; Ex. 1; Ex. 5, pp. 3-5). The effective dates of service begin on December 11, 2024 and end on December 10, 2025. (Id.). There were six modifications made based on MassHealth Regulation 130 CMR 450.204: Medical Necessity and regulation 130 CMR 422.410: Activities of Daily Living and Instrumental Activities of Daily Living. (Id.).

### 1. Grooming/Hair

The MassHealth representative stated that the PCM agency requested five minutes of hair combing per day, seven days a week. (Testimony; Ex. 5, p. 20). MassHealth modified this to two minutes per day, seven days a week, stating that the requested time for combing hair was longer than necessary for someone with your physical needs. (Testimony; Ex. 1; Ex. 5, pp. 3-5). In the OT report, it was noted that the appellant requires minimal assistance with grooming, suggesting that two minutes should be sufficient to manage her hair. (Testimony; Ex. 5, p. 7).

The appellant stated that she needed more time to comb her hair. (Testimony). The appellant's PCA explained that due to the appellant's mood, she does not always allow anyone to touch her hair, requiring patience and gentleness. (Testimony). He clarified that combing her hair takes

longer than five minutes due to the need for frequent breaks. (Testimony). He combs for about one minute, then gives her a break, and repeats this process. (Testimony). Excluding the breaks, the actual time for combing her hair totals about 25 minutes. (Testimony).

## **2. Grooming/Other**

The MassHealth representative stated that the PCM agency requested five minutes per day, seven days a week for applying lotion to the lower body. (Testimony; Ex. 5, p. 20). MassHealth modified this request to two minutes per day, seven days a week, stating that the time requested was longer than typically needed for someone with the appellant's physical requirements. (Testimony; Ex. 1; Ex. 5, pp. 3-5). The MassHealth representative again emphasized that the OT report states that the appellant requires minimal assistance with grooming. (Testimony; Ex. 5, p. 7). The modification only accounts for the application of lotion to the lower extremities and it is for one minute per leg. (Testimony). The appellant's PCA testified that the appellant was very sensitive to touch, so he has to take breaks during the application process to avoid causing her discomfort. (Testimony). The PCA also confirmed that it was the breaks between applications that made the process take longer. (Testimony).

## **3. Laundry**

The PCM agency requested 60 minutes per week for assistance with laundry. (Testimony; Ex. 5, p. 31). MassHealth modified this to 15 minutes per week, stating that the time requested was longer than typically required for someone with the appellant's physical needs. (Testimony; Ex. 1; Ex. 5, pp. 3-5). According to the OT report, the appellant required a minimal level of assistance for laundry. (Testimony; Ex. 5, p. 7). The MassHealth representative stated that the time allotted covers tasks such as putting laundry in the washer, transferring it to the dryer, and folding the clothes—not the time the washer or dryer takes to complete the cycle. (Testimony). There was no documentation to support excessive laundry, so the time is allocated for hands-on assistance with the laundry needs. (Testimony). The MassHealth representative stated that based on the documentation, the appellant should be able to participate by sitting and sorting and folding smaller items. (Testimony).

The appellant and her PCA testified that the laundry is located in the hallway outside the home, and due to the appellant's frequent incontinence—about three times per week—she requires full clothing and bedding changes during both the day and night. (Testimony). The PCA stated that he performs all laundry tasks himself, as the appellant is unable to assist in any way, and this results in approximately two loads of laundry per week. (Testimony). After hearing the testimony about the appellant's condition and needs, the MassHealth representative acknowledged the increased need and stated she would be inclined to offer 30 minutes per week for laundry. (Testimony). The appellant did not indicate that she was willing to accept this offer. (Testimony).

#### **4. Housekeeping**

The PCM agency requested 45 minutes per week of housekeeping assistance. (Testimony; Ex. 5, p. 32). MassHealth modified this to 15 minutes per week because the appellant was assessed as needing only minimal help with housekeeping. (Testimony; Ex. 1; Ex. 5, pp. 3-5, 7). The MassHealth representative emphasized that the time allocated was strictly for light housekeeping—such as sweeping, dusting, or vacuuming in the appellant’s personal living space—and did not include tasks like cleaning the kitchen after meals. (Testimony). She explained that, based on the appellant’s assessed level of need, 15 minutes was considered sufficient for such light duties. (Testimony). The representative also questioned the extent of the appellant’s physical limitations, particularly asking whether she could participate in tasks like dusting, given that her surgery impacted her wrists but not her fingers. (Testimony).

In response, the PCA explained that the appellant’s home is a standard 900-square-foot apartment and that cleaning needs are intensified by the daily visits from her young grandchildren, who create frequent messes with food and toys. (Testimony). The PCA said the appellant cannot assist with cleaning due to chronic pain in her wrists, worsened by a failed surgery, and compounded by depression that often leaves her unwilling or unable to engage in any housekeeping tasks. (Testimony). He added that while the appellant completed physical therapy, her mood sometimes prevents her from continuing treatment or taking prescribed medication. (Testimony). When asked about mental health care, the PCA confirmed the appellant sees a therapist via monthly telehealth appointments. (Testimony). Although the PCA acknowledged that the grandchildren’s messes are technically the responsibility of their parents, he stressed that the parents do not stay long enough to clean up, and he is left to manage it. (Testimony). The MassHealth representative reaffirmed that the PCA’s time is designated solely for the appellant’s needs and not for cleaning up after others. (Testimony).

#### **5. Shopping**

The PCM agency requested 45 minutes per week for shopping assistance. (Testimony; Ex. 5, p. 32). MassHealth modified this to 30 minutes, as the requested time exceeded what is typically considered necessary. (Testimony; Ex. 1; Ex. 5, pp. 3-5). The MassHealth representative also noted that there was no supporting documentation indicating that the appellant is physically unable to go to the store. (Testimony). The PCA acknowledged that while the appellant is unable to shop effectively, there is no formal documentation to support this claim. (Testimony). The MassHealth representative sought clarification, asking whether the appellant’s limitations were due to physical inability or a personal preference not to shop. (Testimony). In response, the PCA explained that while the appellant is physically capable of going to the store, she has difficulty carrying groceries and strongly dislikes shopping. Additionally, she is very particular about her food, often requiring visits to more than one supermarket to find specific items. (Testimony). The MassHealth representative clarified that the approved time already includes assistance with tasks such as retrieving items from shelves, transporting groceries, and putting them away at home. (Testimony). The PCA confirmed that although the appellant sometimes prefers to go to the store

herself, she consistently struggles with the physical demands of carrying her purchases, indicating that the current allocation may not fully account for her needs. (Testimony).

## **6. Medical Transportation**

The PCM agency requested three minutes per week for assistance with medical transportation. (Testimony; Ex. 5, p. 33). MassHealth reduced this zero minutes because the appellant's clinical records indicated she has sufficient physical ability to handle transportation-related tasks on her own. (Testimony; Ex. 1; Ex. 5, pp. 3-5). The MassHealth representative stated that there was no documented need for assistance with entering or exiting her home or the doctor's office, and MassHealth provides a PT-1 service that covers transportation to and from medical appointments for individuals who do not require physical help with transfers. (Testimony). Furthermore, the doctor's office is located only two-tenths of a mile from the appellant's home, and the time requested was specifically for driving, not assistance with physical transfers. (Testimony). In response, the PCA clarified that although the appellant does not have mobility issues, her depression significantly impacts her ability to leave the house. (Testimony). He explained that she often needs encouragement just to walk out the door for appointments, as her mood and motivation are deeply affected. (Testimony).

## **Findings of Fact**

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

1. According to documentation submitted to MassHealth for review the appellant is under the age of 65 years old with a primary diagnosis of chronic bilateral hand pain, status post-surgery to both wrists three years ago. (Testimony; Ex. 5, pp. 10-12).
2. The appellant wears braces on both wrists and takes ibuprofen as needed for pain. (Id.). The appellant has a past medical history of depression, short term memory loss, osteoarthritis and sciatica. (Id.).
3. The appellant lives alone in a first floor apartment. (Id.).
4. The Occupational Therapist assessment documents that the appellant is independent with mobility, transfers on and off the toilet, toileting associated tasks, feeding herself, and oral hygiene. (Testimony; Ex. 5, pp. 7-9).
5. The occupational therapist documented the appellant requires minimal assistance with bathing transfers in and out of the tub, transfers in and out of bed, grooming, dressing, medication management, and all instrumental activities of daily living (IADLs). (Testimony; Ex. 5, pp. 7-9).
6. The appellant has a cane and the occupational therapist documented she would benefit

from a shower chair. (Testimony; Ex. 5, pp. 7-9).

7. A prior authorization request for personal care attendant initial evaluation was submitted to MassHealth on December 9, 2024 by the PCM agency, requesting 12 hours per week for one year. (Testimony; Ex. 5, pp. 46-49).
8. MassHealth modified the request on December 11, 2024 to nine hours and forty five minutes per week. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
9. The effective dates of service begin on December 11, 2024 and end on December 10, 2025. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
10. MassHealth made modifications to two ADLs and four IADLs based on MassHealth Regulation 130 CMR 450.204: Medical Necessity and regulation 130 CMR 422.410: Activities of Daily Living and Instrumental Activities of Daily Living. (Testimony; Ex. 1; Ex. 5, pp. 3-5).

**a. Grooming/Hair**

1. The PCM agency requested five minutes of hair combing per day, seven days a week. (Testimony; Ex. 5, p. 20).
2. MassHealth modified this to two minutes per day, seven days a week, stating that the requested time for combing hair was longer than necessary for someone with your physical needs. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
3. In the OT report, it was noted that the appellant requires minimal assistance with grooming. (Testimony; Ex. 5, p. 7).

**b. Grooming/Other**

1. The PCM agency requested five minutes per day, seven days a week for applying lotion to the lower body. (Testimony; Ex. 5, p. 20).
2. MassHealth modified this request to two minutes per day, seven days a week, stating that the time requested was longer than typically needed for someone with the appellant's physical requirements. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
3. The OT report states that the appellant requires minimal assistance with grooming. (Testimony; Ex. 5, p. 7).
4. The modification only accounts for the application of lotion to the lower extremities and it is for one minute per leg. (Testimony).

**c. Laundry**

1. The PCM agency requested 60 minutes per week for assistance with laundry. (Testimony; Ex. 5, p. 31).
2. MassHealth modified this to 15 minutes per week, stating that the time requested was longer than typically required for someone with the appellant's physical needs. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
3. According to the OT report, the appellant required a minimal level of assistance for laundry. (Testimony; Ex. 5, p. 7).
4. The time allotted for laundry covers tasks such as putting laundry in the washer, transferring it to the dryer, and folding the clothes—not the time the washer or dryer takes to complete the cycle. (Testimony).
5. The appellant has three episodes of incontinence per week requiring full clothing and bedding changes during both the day and night. (Testimony).
6. The PCA performs all laundry tasks himself, as the appellant is unable to assist in any way, and this results in approximately two loads of laundry per week. (Testimony).
7. Based on the testimony concerning increased need, the MassHealth representative offered to increase the time for laundry to 30 minutes per week. (Testimony).

**d. Housekeeping**

1. The PCM agency requested 45 minutes per week of housekeeping assistance. (Testimony; Ex. 5, p. 32).
2. MassHealth modified this to 15 minutes per week because the appellant was assessed as needing only minimal help with housekeeping. (Testimony; Ex. 1; Ex. 5, pp. 3-5, 7).
3. The time allocated for housekeeping was strictly for light housekeeping—such as sweeping, dusting, or vacuuming in the appellant's personal living space—and did not include tasks like cleaning the kitchen after meals. (Testimony).
4. Based on the appellant's assessed level of need, MassHealth considered 15 minutes per week sufficient for such light duties. (Testimony).
5. The appellant's apartment requires increased cleaning due to daily visits from her young grandchildren, who frequently create messes but the PCA's time is



designated solely for the appellant's needs, not for cleaning up after others. (Testimony).

**e. Shopping**

1. The PCM agency requested 45 minutes per week for shopping assistance. (Testimony; Ex. 5, p. 32).
2. MassHealth modified this to 30 minutes per week, as the requested time exceeded what is typically considered necessary. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
3. No supporting documentation was submitted indicating that the appellant is physically unable to go to the store. (Testimony).
4. Although the appellant has difficulty with the physical demands of shopping, the approved time includes assistance with tasks such as retrieving items from shelves, transporting groceries, and putting them away at home. (Testimony).

**f. Medical Transportation**

1. The PCM agency requested three minutes per week for assistance with medical transportation. (Testimony; Ex. 5, p. 33).
2. MassHealth reduced this to zero minutes because the appellant's clinical records indicated she has sufficient physical ability to handle transportation-related tasks on her own. (Testimony; Ex. 1; Ex. 5, pp. 3-5).
3. There was no need documented for assistance with entering or exiting her home or the doctor's office, and MassHealth provides a PT-1 service that covers transportation to and from medical appointments for individuals who do not require physical help with transfers. (Testimony).
4. Furthermore, the appellant's doctor's office is located only two-tenths of a mile from the appellant's home, and the time requested was specifically for driving, not assistance with physical transfers. (Testimony).

## **Analysis and Conclusions of Law**

The PCM agency must request prior authorization from the MassHealth agency as a prerequisite to payment for PCA services. (130 CMR 422.416(A)). Prior authorization determines only the medical necessity of the authorized service. (*Id.*). MassHealth covers activity time performed by a PCA in aiding with ADLs and Instrumental ADLs (IADLs). (130 CMR 422.411(A)). ADLs encompass essential tasks for an individual's self-care, including physically assisting a member with bathing, personal hygiene, or grooming. (130 CMR 422.410(A)(3)). IADLs are those specific activities that

are instrumental but incidental to the care of the member's health and are performed by a PCA, including laundry, housekeeping, shopping, and accompanying the member to medical providers. (130 CMR 422.402; 422.410(B)(1),(3)). MassHealth does not pay a provider for services that are not medically necessary and may impose sanctions on a provider for prescribing a service where such service is not medically necessary. (130 CMR 450.204). A service is medically necessary if, amongst other things, 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. (130 CMR 450.204(A)(1)).

The preponderance of the evidence does not support the medical necessity of the time requested for the two grooming ADLs. The PCA agency requested five minutes per day, seven days a week, for both hair combing and applying lotion to the lower body. However, the OT report in the record indicates that the appellant requires only minimal assistance with these grooming activities. The appellant's PCA cited the need for frequent breaks as the reason for requesting additional time. Nonetheless, MassHealth only covers the "activity time" or the active portion of assistance, and does not provide coverage for any breaks taken during these tasks. Given these circumstances, MassHealth's decision to reduce the time for both grooming activities to two minutes each is well-supported by the evidence.

The evidence does not support the time requested by the PCA agency for housekeeping, shopping, and medical transportation. MassHealth reduced or denied the requested times for these IADLs, as they exceeded the typical duration required for someone with the appellant's physical condition. The appellant's PCA explained that the increased time for housekeeping was needed to clean up after the messes left by the appellant's grandchildren, rather than solely assisting the appellant with light housekeeping tasks. Neither the appellant nor her PCA provided sufficient justification for additional time for shopping. The physical tasks involved in shopping—such as carrying, reaching, and stretching—are within the scope of assistance the PCA can provide, and there was no evidence that the appellant was unable to plan the shopping (e.g., by making a list) or accompany the PCA during the activity. Lastly, there was no evidence supporting the need for medical transportation time. The appellant does not have physical limitations in ambulation or other movement-based ADLs, and her medical appointments are located less than two-tenths of a mile from her apartment. As such, there is insufficient evidence to overturn MassHealth's decisions regarding these IADLs.

The record does not fully support the time requested by the PCA agency for assistance with laundry, although it does support the partial increase proposed by the MassHealth representative during the hearing. The PCA agency requested 60 minutes per week for laundry assistance, but MassHealth modified this to 15 minutes per week, citing that the requested time exceeded what is typically required for someone with the appellant's physical needs. This decision was partially based on the OT report, which indicated that the appellant only required minimal assistance with laundry tasks. However, the appellant's PCA credibly reported that the appellant experiences an

average of three episodes of incontinence per week, necessitating full clothing and bedding changes both during the day and night. This previously unreported issue with incontinence led the MassHealth representative to propose increasing the laundry time to 30 minutes per week. Given this new information, the proposed increase in time is supported by the evidence and should be implemented.

For the above stated reasons, the appeal is DENIED IN PART with regard to grooming (both hair and other/lotion application), housekeeping, shopping, and medical transportation. The appeal is APPROVED IN PART with regard to laundry.

## **Order for MassHealth**

Approve 30 minutes per week for laundry effective from December 11, 2024.

## **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.

## **Implementation of this Decision**

If this decision is not implemented within 30 days after the date 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.

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Scott Bernard  
Hearing Officer  
Board of Hearings

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