

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed in part; Approved in part	Appeal Number:	2503334
Decision Date:	06/13/2025	Hearing Date:	April 04, 2025
Hearing Officer:	Brook Padgett		

Appellant Representatives:



MassHealth Representative:

Kelley Rayen, R.N.



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, 6th floor
Quincy, MA 02171

APPEAL DECISION

Appeal Decision:	Dismissed in part; Approved in part	Issue:	Personal Care Attendant Services 130 CMR 422.410
Decision Date:	06/13/2025	Hearing Date:	April 04, 2025
MassHealth's Rep.:	K. Rayen, RN	Appellant Reps.:	Mother, Father
Hearing Location:	Quincy		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

The appellant received a notice dated February 20, 2025 stating: MassHealth has modified your request for prior authorization for personal care attendant services because the time requested for services is longer than ordinarily required for someone with your physical needs. (Exhibit 1).

The appellant filed this appeal timely on February 27 2025 and has continued to receive aid pending the outcome of this appeal. (130 CMR 610.015(B); Exhibit 2).

Denial of prior approval is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

The appellant's request for weekly personal care attended (PCA) services was modified from 79.30 hours per week to 67.45 hours per week.

Issue

Did MassHealth correctly determine the time requested for PCA assistance?

Summary of Evidence

MassHealth testified telephonically, stating the appellant is a [REDACTED] with a primary diagnosis of [REDACTED]. A request for PCA services was submitted by the appellant's provider, [REDACTED] on February 19, 2025. The request states that the surrogate reports that the appellant has the cognitive level of and [REDACTED]

[REDACTED] The appellant has had decline in condition, increased weakness, decreased balance, unsteady gait, history of falls, incontinence, new swallowing issues, and is at risk for aspiration. The request indicates the appellant has behavioral and medical issues that require more care, and it takes longer than it ordinarily requires for someone with her physical needs; specifically, the requested 79.30 hours of PCA assistance per week. MassHealth modified this request to 67.45 hours of PCA assistance per week.

MassHealth testified to the following PCA modifications: Mobility 2 minutes x 10 times a day x 7 days a week, modified to 1 minute x 9 times a day x 7 days a week. Transfers 1 minute x 10 times a day x 7 days a week, modified to 1 minute x 9 times a day x 7 days a week. Passive Range of Motion (PROM) 8 minutes x 3 times a day x 7 days a week, modified to 8 minutes x 2 times a day x 7 days a week. Bladder 5 minutes x 20 times a day x 7 days a week, modified to 5 minutes x 8 times a day x 7 days a week. Transportation 343 minutes per week, modified to 259 minutes per week. After discussion MassHealth reversed its decision regarding the modifications made to the request for PCA assistance with Transfers and Transportation and the appellant's representatives agreed to the modifications made regarding the request for PCA assistance with Mobility and PROM. (Exhibit 4). The only remaining issue concerns the time requested under Bladder Care.

MassHealth testified that the appellant's request for assistance with bladder care was modified from 5 minutes x 20 times per day x 7 days a week to 5 minutes x 8 times per day x 7 days a week because the appellant wears Pull Ups and has an additional 5 minutes x 3 times per day x 7 days a week for bowel care which when added to bladder care equals 11 times per day for bladder care.

The appellant's representatives responded that the appellant has had a decline in condition and has increased incontinence. The appellant does wear Pull Ups; however, the appellant has OCD and has the need for frequent urination of at least 20 times per day. She needs assistance with ambulation to and from the bathroom, assist with transfer on and off the toilet, maximum assist with changing Pull Ups, and with wiping and hygiene. The appellant often has "accidents" and soaks through her clothes requiring a complete clothing change. The representative stated that in

[REDACTED]

addition, the appellant has been unsteady and subject to falls, so she requires assistance with mobility to and from the bathroom, assists on and off toilet, as well as assistance with hygiene.

The record remained open for the appellant's representatives to submit documentation from the appellant's care team to support medical necessity for the increase in PCA assistance with bladder care. (Exhibit 5).

The appellant submitted within the required time limit a letter dated April 15, 2025, from [REDACTED] CNP from Brigham Health Harbor Medical Scituate. The letter states that the appellant requires maximum assistance with toileting and has frequent urination up to 20 times a day and during the night, and that she requires complete clothing and bed changes every 2-3 hours. She has had multiple normal urine cultures and kidney function tests. The appellant takes Lithium medication with side effects that include polyurea. (Exhibit 6). The appellant also submitted a letter dated April 16, 2025, written by [REDACTED] MD, Adult, Child and Adolescent Psychiatrist at MGH Lurie Center. [REDACTED] manages the appellant's psychiatric care and medication management. The letter indicates the appellant has been prescribed Lithium which can increase urinary frequency and can warrant a need to more frequent bathroom trips. (Exhibit 7).

MassHealth responded by restating that the appellant's toileting request from [REDACTED] was 5 minutes, x 20 episodes per day for bladder care, and 3 episodes of bowel care per day, x 7 days per week for a total of 23 toileting episodes per day between the hours of 6 am to midnight (18 hours), the equivalent of a toileting episode every 45 minutes during the day/evening hours. Tempus and the appellant's representative also requested 10 minutes, 3 episodes per night for toileting between the hours of midnight and 6 am, the equivalent of every 2 hours at night. MassHealth modified the bladder care frequency from 20 episodes to 8 episodes and did not modify the requested 3 bowel episodes. MassHealth argued that the appellant has a total of 11 toileting episodes between the hours of 6 am to midnight (18 hours), the equivalent of a toileting episode every 90 minutes during the day/evening hours. MassHealth noted that the additional documentation submitted confirms that the appellant has normal kidney function and no urinary tract infections. The appellant has not been evaluated by a bladder function specialist such as a urogynecologist or urologist who is trained specifically in the field of pelvic and bladder function/dysfunction. The prior authorization request indicates that the appellant has silent aspiration and swallowing difficulties and there is no evidence of high fluid intake. MassHealth concluded that after reviewing the additional documents, it stands by the modification of PCA assist with bladder care, to 5 minutes, 8 episodes per day, 7 days per week. The appellant voids every 2 hours at night; it seems reasonable that she could toilet every 90 minutes during the day/evening hours. (Exhibit 8).

Findings of Fact

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

1. At the time of the review, the appellant was a [REDACTED] female whose primary diagnosis

is [REDACTED] Exhibit 4).

2. MassHealth reversed its decision regarding the modifications made to the request for PCA assistance with Transfers and Transportation. (Testimony).
3. The appellant's representatives agreed on the modifications made to the request for PCA assistance with Mobility and PROM. (Testimony).
4. The appellant's request for assistance with bladder care was modified by MassHealth from 5 minutes x 20 times per day x 7 days a week to 5 minutes x 8 times per day x 7 days a week. (Exhibit 4).
5. The appellant wears Pull Ups. (Exhibit 4).
6. The appellant has been authorized to receive PCA assistance with Bowel Care as follows: 5 minutes x 3 times per day x 7 days a week. (Exhibit 4).
7. A letter from Brigham Health Harbor Medical Scituate, dated April 15, 2025, states that the appellant requires maximum assistance with toileting and has frequent urination up to 20 times a day. She has had multiple normal urine cultures and kidney function tests. The appellant takes Lithium medication with side effects that include polyurea. (Exhibit 6).
8. A letter from the appellant's psychiatrist at MGH Lurie Center dated April 16, 2025 states that the appellant has been prescribed Lithium which can increase urinary frequency and can warrant a need for more frequent bathroom trips. (Exhibit 7).
9. The appellant has silent aspiration and swallowing difficulties and no evidence of high fluid intake. (Exhibit 8).

Analysis and Conclusions of Law

MassHealth will pay for PCA services provided to MassHealth members who can be appropriately cared for in the home (130 CMR 422.401 et seq.). The member must require physical assistance. The personal care agency determines the extent of the personal care services provided by a paid PCA (130 CMR 422.403). Personal care services consist of physical assistance with activities of daily living (ADL'S) (130 CMR 422.410(A)).

130 CMR 422.410: Activities of Daily Living and Instrumental Activities of Daily Living

(A) Daily Living Activities. Activities of daily living include the following:

- (1) mobility: physically assisting a member who has a mobility impairment that prevents unassisted transferring, walking, or use of prescribed durable medical equipment;
- (2) assistance with medications or other health-related needs: physically assisting a

- member to take medications that otherwise would be self-administered;
- (3) bathing or grooming: physically assisting a member with basic care such as bathing, personal hygiene, and grooming skills;
- (4) dressing or undressing: physically assisting a member to dress or undress;
- (5) passive range-of-motion exercises: physically assisting a member to perform range-of-motion exercises;
- (6) eating: physically assisting a member to eat; and
- (7) toileting: physically assisting a member with bowel and bladder needs.

Prior to the closing of the hearing, MassHealth reversed its decision regarding the modifications made to the request for PCA assistance with Transfers and Transportation and the appellant's representatives agreed on the modifications made to the request for PCA assistance with Mobility and PROM. Therefore, these issues are dismissed. The only issue left unresolved is the appellant's request for PCA assistance with bladder care which was modified by MassHealth from 5 minutes x 20 times per day x 7 days a week, to 5 minutes x 8 times per day x 7 days a week.

During the record-open period, the appellant's representatives submitted medical documentation indicating the appellant is prescribed Lithium which can increase urinary frequency and can warrant a need to more frequent bathroom trips up to 20 times a day.

While MassHealth PCA determination defines day/evening and nighttime hours as two separate time periods (6 am to midnight and midnight to 6 am), the medical documentation does not make such a distinction. Therefore, for the purpose of this medical evidence a "day" is deemed as within a 24-hour period. Currently, the appellant is approved for a total of 14² bladder episodes within a 24-hour period. The appellant's team has provided medical documentation that the appellant requires PCA bladder care assistance for 20 episodes per 24-hour time period, which would necessitate an additional 6 PCA assisted bathroom trips to meet that requirement.

Based on the submitted medical evidence, the appellant is approved for an additional 6 episodes of bladder care per 24-hour period.

Order for the MassHealth

Implement the agreed upon times regarding Transfers, Transportation, Mobility, and PROM and authorize the time regarding Bladder Care consistent with the above (increase day/evening frequency from 8 to 14 times per day).

² Total of 14 events = 8 approved bladder care episodes per day/evening (6 am to midnight) + 3 approved bowel care episodes per day/evening which includes the activity of urination + 3 approved bladder episodes per nighttime (midnight to 6 am).

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 contact Optum. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, MassHealth of Medical Assistance, at the address on the first page of this decision.

Brook Padgett
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: PA Unit

[REDACTED]