

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Dismissed in part; Approved in part	<b>Appeal Number:</b>	2505066
<b>Decision Date:</b>	5/15/2025	<b>Hearing Date:</b>	05/08/2025
<b>Hearing Officer:</b>	Sharon Dehmand		

**Appearance for Appellant:**

Pro se

**Appearance for MassHealth:**

Kelly Rayen, R.N., Clinical Reviewer, Optum  
Heather Adams, Optum Observer



*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>	Dismissed in part; Approved in part	<b>Issue:</b>	Prior Authorization; Personal Care Attendant (PCA) Services
<b>Decision Date:</b>	5/15/2025	<b>Hearing Date:</b>	05/08/2025
<b>MassHealth's Rep.:</b>	Kelly Rayen, R.N. Heather Adams	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Remote	<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 March 20, 2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services. See 130 CMR 450.204; 130 CMR 450.303; 130 CMR 422.410; and Exhibit 1. The appellant filed a timely appeal on March 28, 2025. See 130 CMR 610.015(B) and Exhibit 2. A decision regarding the scope or amount of assistance is valid ground for appeal before the Board of Hearings. See 130 CMR 610.032(A)(3).

### Action Taken by MassHealth

MassHealth modified the appellant's prior authorization request for PCA services.

### Issue

Whether MassHealth was correct in modifying the appellant's request for PCA services pursuant to 130 CMR 422.410.

## Summary of Evidence

All parties participated telephonically. MassHealth was represented by a registered nurse and clinical appeals reviewer. The appellant appeared pro se and verified his identity. The following is a summary of the testimony and evidence provided at the hearing:

The MassHealth representative testified that the documentation submitted shows that the appellant is an adult who has diagnoses of rheumatoid arthritis, osteoarthritis, degenerative joint disease, lymphedema, right total hip replacement, right foot deformity, right foot wound, and PTSD. On March 19, 2025, the appellant's personal care management (PCM) agency, [REDACTED], submitted a prior authorization request to increase the appellant's PCA service hours temporarily because the appellant developed a right foot wound with infection.

The appellant was approved for 20 hours and 15 minutes per week and requested an additional 5 hours and 30 minutes each week for a total of 25 hours and 45 minutes per week from March 19, 2025 to June 16, 2025. On March 20, 2025, MassHealth modified this request to 21 hours and 30 minutes per week. MassHealth made three (3) modifications related to PCA assistance, namely: mobility; transfers; and bathing. See generally Exhibit 5.

The appellant testified that his condition is continually worsening and that his PCM agency should have requested for increased hours for all his PCA service hours. He added that his main issue is with the PCA service hours during his transport time to and from his doctor's appointments.

The MassHealth representative explained the process of requesting additional PCA service hours in detail. She stated that the request for increased PCA service hours in this case was limited to 3 tasks based on the appellant's physician's request for a period of three months. She added that the PCM agency must submit a prior authorization request for any other increases the appellant may need.

The appellant stated that he agreed with MassHealth's denial of additional time requested for PCA assistance with transfers and bathing because his right foot wound did not result in a need for increased PCA service hours for those tasks. See id. at 2.

The only modification remaining is dispute during the hearing was for the PCA service hours for mobility. The appellant requested 10 minutes, 4 times per day, 7 days per week. MassHealth modified this request and approved 5 minutes, 4 times per day, 7 days per week because it determined that the time requested is longer than ordinarily required for someone with the appellant's physical needs.

The appellant testified that he has been wearing a boot since his ankle surgery over two years ago. He uses crutches to move around his home, but due to degenerative joint disease, he experiences

significant shoulder pain, making the use of crutches very difficult. Additionally, the wound infection exacerbated his balance issues, leading to frequent falls. He stated that with the help of his PCA, it takes him between 10 to 12 minutes to ambulate within his home given his circumstance.

## Findings of Fact

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

1. The appellant is an adult who has diagnoses of rheumatoid arthritis, osteoarthritis, degenerative joint disease, lymphedema, total hip replacement, right foot deformity, right foot wound, and PTSD. (Testimony and Exhibit 5).
2. On March 19, 2025, MassHealth received a prior authorization request to increase the appellant's PCA service hours temporarily because the appellant developed a right foot wound with infection. (Testimony and Exhibit 5).
3. The appellant requested an additional 5 hours and 30 minutes each week for a total of 25 hours and 45 minutes per week from March 19, 2025 to June 16, 2025. (Testimony and Exhibit 5).
4. On March 20, 2025, MassHealth modified this request to 21 hours and 30 minutes per week. (Testimony and Exhibit 1).
5. MassHealth made three (3) modifications related to PCA assistance, namely: mobility; transfers; and bathing. (Testimony and Exhibit 1).
6. At the hearing, the appellant agreed with MassHealth's denial of additional time requested for PCA assistance with transfers and bathing. (Testimony).
7. The appellant requested 10 minutes, 4 times per day, 7 days per week for PCA assistance with mobility. (Testimony and Exhibit 5).
  - a. The appellant's wound infection has exacerbated his balance issues, leading to frequent falls. Thus, it takes him between 10 to 12 minutes with the help of his PCA to ambulate within his home. (Testimony).
8. MassHealth modified this request and approved 5 minutes, 4 times per day, 7 days per week because it determined that the time requested is longer than ordinarily required for someone with the appellant's physical needs. (Testimony and Exhibit 5).

9. The appellant filed a timely appeal on March 28, 2025. (Exhibit 2).

## Analysis and Conclusions of Law

Regulations concerning personal care attendant (PCA) services are found at 130 CMR 422.000, et seq. PCA is defined as a person who is hired by the member or surrogate to provide PCA services. See 130 CMR 422.402. PCA services are physical assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs), as described in 130 CMR 422.410. Id.

MassHealth covers personal care services provided to eligible MassHealth members who can be appropriately cared for in the home when all of the following conditions are met:

- (1) The PCA services are authorized for the member in accordance with 130 CMR 422.416.
- (2) The member's disability is permanent or chronic in nature and impairs the member's functional ability to perform ADLs and IADLs without physical assistance.
- (3) The member, as determined by the PCM agency, requires physical assistance with two or more of the ADLs as defined in 130 CMR 422.410(A).
- (4) The MassHealth agency has determined that the PCA services are medically necessary.<sup>1</sup>

See 130 CMR 422.403(C).

The regulation concerning ADLs in 130 CMR 422.410 is as follows:

(A) Activities of Daily Living (ADLs). Activities of daily living include the following categories of activities. Any number of activities within one category of activity is counted as one ADL:

- (1) mobility: physically assisting a member who has a mobility impairment that

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<sup>1</sup> 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. Services that are less costly to MassHealth include, but are not limited to, health care reasonably known by the provider, or identified by MassHealth pursuant to a prior authorization request, to be available to the member through sources described in 130 CMR 450.317(C), 503.007, or 517.007. See 130 CMR 450.204(A).

- 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 prescribed by a physician that otherwise would be self administered;
  - (3) bathing or grooming: physically assisting a member with bathing, personal hygiene, or grooming;
  - (4) dressing: 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. This can include assistance with tube feeding and special nutritional and dietary needs; and
  - (7) toileting: physically assisting a member with bowel or bladder needs.

Here, there is no dispute that the appellant meets all the requirements to qualify for PCA services. The issue is whether MassHealth allowed sufficient time in accordance with the program regulations.

MassHealth will approve “activity time performed by a PCA in providing assistance.” See 130 CMR 422.411. “Activity time” is defined as the “actual amount of time spent by a PCA physically assisting the member” with his ADLs/IADLs. See 130 CMR 422.402.

At issue in this appeal were modifications of time requested for PCA assistance for the appellant with ADLs. The following ADLs were the subject of modifications: mobility; transfers; and bathing.

At the hearing, the appellant agreed with MassHealth’s denial of additional time requested for PCA assistance with transfers and bathing because his right foot wound did not result in a need for increased PCA service hours for those tasks. See *id.* at 2. Since the parties reached a resolution regarding these issues, these portions of the appeal are DISMISSED in accordance with 130 CMR 610.035(A)(8).

One modification regarding the requested time for mobility remained in dispute. MassHealth modified the requested time for PCA service hours for mobility to 5 minutes, 4 times per day, 7 days per week because it determined that the time requested is longer than ordinarily required for someone with the appellant’s physical needs. The appellant testified that he uses crutches to move around his home, but due to degenerative joint disease, he experiences significant shoulder pain, making the use of crutches very difficult. Additionally, he stated that the wound infection exacerbated his balance issues, leading to frequent falls. He testified that with the help of his PCA, it takes him between 10 to 12 minutes to ambulate within his home.

I find in this circumstance that the time requested is appropriate given the appellant’s physical

limitations. See 130 CMR 422.411(A)(MassHealth's PCA program specifically includes mobility transfers as a covered task). The appellant credibly testified that his wound infection has led to decreased balance and increased risk of falls while ambulating within his home. As such, this task has become more time-consuming. Given the appellant's credible testimony which has support in the record, he has demonstrated by a preponderance of the evidence that the requested 10 minutes, 4 times per day, 7 days per week of assistance with this task is warranted. See Craven v. State Ethics Comm'n, 390 Mass. 191, 200 (1983)("proof by a preponderance of the evidence is the standard generally applicable to administrative proceedings").

Accordingly, the appellant's request for additional time for this task is APPROVED.

## Order for MassHealth

For the PA period beginning on March 19, 2025 ending on June 16, 2025 approve the following increase in PCA service hours:

- Mobility: 10 minutes, 4 times per day, 7 days per week.

## 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.

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Sharon Dehmand, Esq.  
Hearing Officer  
Board of Hearings

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