

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part; Dismissed in part	Appeal Number:	2505333
Decision Date:	07/18/2025	Hearing Date:	06/12/2025
Hearing Officer:	Alexandra Shube		

Appearances for Appellant:



Appearances for MassHealth:

Via telephone:

Cassandra Horne, Appeal & Grievances Mgr.
Jeremiah Mancuso, Clinical RN Appeals &
Grievance Mgr.



*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:	Approved in part; Denied in part; Dismissed in part	Issue:	ICO; Denial of Internal Appeal; Prior Authorization – PCA Services
Decision Date:	07/18/2025	Hearing Date:	06/12/2025
MassHealth's Reps.:	Cassandra Horne; Jeremiah Mancuso	Appellant's Reps.:	
Hearing Location:	Quincy Harbor South, Remote	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 Denial of Level 1 Appeal dated March 20, 2025, Commonwealth Care Alliance (“CCA”) denied the appellant’s internal appeal regarding personal care attendant (PCA) services because it determined the requested level of services was not medically necessary. Exhibit 1. The appellant filed this appeal in a timely manner on April 3, 2025. Exhibit 2; 130 CMR 610.015(B). An integrated care organization’s decision to deny or provide limited authorization of a requested service is grounds for appeal. 130 CMR 610.032(B).

Action Taken by Commonwealth Care Alliance

CCA reduced the number of PCA hours it authorized for the appellant from the requested 41.5 hours per week down to 17.25 hours per week.

Issue

The appeal issue is whether CCA was correct, pursuant to 130 CMR 422.000 and 450.204, in determining that the appellant required fewer hours of PCA assistance than he had requested.

Summary of Evidence

CCA was represented at hearing by the appeals and grievances manager and the clinical nurse appeals and grievances manager. The appellant appeared at hearing with his long-time partner who is also his PCA. All parties appeared via telephone. Through testimony and documentation, CCA provided the following: the appellant is an adult under the age of 65 who has been enrolled in CCA One Care, an integrated care organization (ICO), since June 1, 2022. He resides with his partner and children. He has primary diagnoses of unspecified fracture of right calcaneus; initial encounter for closed fracture; unspecified fracture of left calcaneus; anxiety; osteoarthritis; congenital deformity of spine; and spondylosis of lumbosacral joint. Ex. 5 at 6. The appellant has ankle pain, back pain, back spasm, difficulty standing for long periods of time, and ankle swelling after walking. *Id.* On January 13, 2025, CCA received a prior authorization request from the appellant's personal care management (PCM) agency, Tempus Unlimited, requesting 41.5 hours per week of PCA assistance, based on a December 12, 2024 re-evaluation. *Id.* at 1.

On January 26, 2025, CCA modified the request and approve the appellant for 17.25 hours of PCA assistance. *Id.* at 1. Previously, the appellant had been receiving 14.25 hours per week of PCA services. *Id.* at 1. CCA modified the request because it determined the amount of time requested was not medically necessary based on the most recent assessment on December 12, 2024. *Id.* There was no clinical information provided to support the necessity for an increase in hours. *Id.* The appellant has had no Emergency Department visits, inpatient hospitalizations, physical therapy, or occupational therapy. *Id.* Nurse notes within Functional Assessment dated December 12, 2024 state that the appellant's medical condition which causes him to require PCA services has been "stable for more than 5 years." *Id.* Both the appellant's most recent LTSC evaluation and MDS assessment support that member is independent with toileting. *Id.* The October 3, 2024 LTSC notes state that the appellant is independent with eating and reports no assistance needed with toileting. *Id.* MDS nursing notes on July 14, 2024 state that he needs supervision with bed mobility and eating; limited assistance with transfers, ambulation, dressing/undressing, personal hygiene, and bathing; and he is independent with toilet use. *Id.* A physical therapy evaluation back on November 10, 2023 noted that the appellant "demonstrated independent functional mobility in home with transfers, bed mobility, and independent ambulation with functional strength and endurance." *Id.*

After an internal Level 1 appeal, CCA notified the appellant on March 20, 2025 that he was approved for 17.25 hours of PCA assistance per week. Exhibit 1 at 2. This is the notice under appeal.

CCA made modifications to the following activities of daily living (ADLs) and instrumental activities of daily living (IADLs): oral care, dressing, undressing, medication assistance, bladder care, bowel care, meal preparation – dinner, laundry, housekeeping, shopping, and nighttime hours. At hearing, parties were able to resolve the disputes related to oral care, medication assistance, bladder care, bowel care, nighttime hours, meal preparation, and laundry.¹

Dressing/Undressing

The appellant requested 15 minutes, 1 time per day, 7 days per week for dressing and 10 minutes, 1 time per day, 7 days per week for undressing. CCA modified the request to 10 minutes, 1 time per day, 7 days per week for dressing and 5 minutes, 1 time per day, 7 days per week for undressing. CCA explained that this was the same amount of time he received for those ADLs last year and documentation indicates that the medical condition causing him to require a PCA has been stable for more than five years.²

The appellant testified that he has arthritis in his wrists and back spasms. He cannot move his top half well. It gets worse at times and at least three times per week, it takes longer to perform these tasks. If there is a bad back spasm, he can barely move and it takes at least an extra five minutes on those days. His girlfriend estimated it takes at least 20 minutes to dress him on a good day. He is getting older, not younger, and nothing in his condition has improved.

Housekeeping

The appellant requested 60 minutes per week for housekeeping. CCA modified the request to 30 minutes per week because it is a shared space. The appellant lives with his children and partner, who is his PCA. The PCA is only paid for cleaning his personal spaces. Last year, the appellant received 20 minutes per week for housekeeping.

The appellant felt that 60 minutes was fair. 30 minutes is not much time per week. The house is pretty big and the appellant uses all areas of the house.

¹ Parties agreed to the following: oral care 1 minute, 2 times per day, 7 days per week; medication assistance 2 minutes, 2 times per day, 7 days per week; bladder care 3 minutes, 6 times per day, 7 days per week; bowel care 3 minutes, 3 times per day, 7 days per week; nighttime hours 14 hours per week; meal preparation – dinner 20 minutes per day; and laundry 60 minutes per week.

² According to documentation submitted by CCA, the most recent evaluation from December 12, 2024 shows that the appellant requires moderate assistance with dressing and undressing. Exhibit 5 at 73. Last year, he required minimum assistance with dressing and undressing. The time per task tool recommends 15 minutes for dressing and 10 minutes for undressing for someone who requires moderate assistance. *Id.* at 48.

Shopping

The appellant requested 60 minutes per week for shopping. CCA modified the request to 30 minutes per week because it is a shared task with other members of the household. The appellant lives with his children and partner, who is his PCA. According to the time per task tool, shopping includes the preparation of the list, purchasing and putting away of groceries and medications, including personal hygiene items. Last year, the appellant also received 30 minutes per week for shopping.

The appellant testified that he has his own things he wants separate from the household. He likes something fresh from the bakery daily and the PCA also goes to the pharmacy once per week for him.

Findings of Fact

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

1. The appellant is under the age of 65 and has been enrolled in CCA's One Care, an ICO, since June 1, 2022.
2. The appellant's primary diagnoses include unspecified fracture of right calcaneus; initial encounter for closed fracture; unspecified fracture of left calcaneus; anxiety; osteoarthritis; congenital deformity of spine; and spondylosis of lumbosacral joint. He has ankle pain, back pain, back spasm, difficulty standing for long periods of time, and ankle swelling after walking.
3. On January 13, 2025, CCA received a prior authorization request from the appellant PCM agency, Tempus Unlimited, requesting 41.5 hours per week of PCA assistance, based on a December 12, 2024 re-evaluation.
4. On January 26, 2025, CCA modified the request and approve the appellant for 17.25 hours of PCA assistance.
5. The appellant lives with his children and long-time partner who is his PCA.
6. After an internal Level 1 appeal, CCA notified the appellant on March 20, 2025 that he was approved for 17.25 hours of PCA assistance per week.
7. On April 3, 2025, the appellant timely appealed the March 20, 2025 notice.

8. At hearing, parties were able to resolve the disputes related to oral care, medication assistance, bladder care, bowel care, nighttime hours, meal preparation, and laundry.
9. The appellant requested 15 minutes, 1 time per day, 7 days per week for dressing and 10 minutes, 1 time per day, 7 days per week for undressing.
10. CCA modified the request to 10 minutes, 1 time per day, 7 days per week for dressing and 5 minutes, 1 time per day, 7 days per week for undressing, which was the same amount of time he received for those ADLs last year.
11. The December 12, 2024 evaluation indicates that the appellant requires moderate assistance with dressing and undressing.
12. The appellant requested 60 minutes per week for housekeeping.
13. CCA modified the request to 30 minutes per week because it is a shared space and the PCA is only responsible for cleaning his personal spaces.
14. The appellant requested 60 minutes per week for shopping.
15. CCA modified the request to 30 minutes per week because it is a shared task with other members of the household.

Analysis and Conclusions of Law

As a MassHealth ICO, Commonwealth Care Alliance One Care

will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports.

(130 CMR 508.007(C)).

CCA is “responsible for providing enrolled members with the full continuum of Medicare- and MassHealth covered services.” (130 CMR 450.105(A)(7); 130 CMR 450.105(E)(6)). Those services include PCA services, which are governed by the regulations at 130 CMR 420.000. (See 130 CMR 450.105). Whenever an ICO makes a coverage decision, it must provide notice to the affected member. 130 CMR 508.011. An ICO has 30 days to resolve any internal appeals, and the member

then has 120 days to request a fair hearing from the Board of Hearings. See 130 CMR 508.012; 130 CMR 610.015(B)(7).

MassHealth is required to cover all services and treatments that are “medically necessary”:

(A) 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 the MassHealth agency. Services that are less costly to the MassHealth agency include, but are not limited to, health care reasonably known by the provider, or identified by the MassHealth agency 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.

130 CMR 450.204(A).

MassHealth generally covers PCA services provided to eligible MassHealth members with a permanent or chronic disability that impairs their functional ability to perform activities of daily living (“ADLs”) and instrumental activities of daily living (“IADLs”), but who can be appropriately cared for in the home.

ADLs include:

- (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 prescribed by a physician 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. This can include assistance with tube-feeding and special nutritional and dietary needs; and

(7) toileting: physically assisting a member with bowel and bladder needs.

130 CMR 422.410(A).

IADLs include:

- (1) household services: physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping;
- (2) meal preparation and clean-up: physically assisting a member to prepare meals;
- (3) transportation: accompanying the member to medical providers; and
- (4) special needs: assisting the member with:
 - (a) the care and maintenance of wheelchairs and adaptive devices;
 - (b) completing the paperwork required for receiving personal care services; and
 - (c) other special needs approved by the MassHealth agency as being instrumental to the health care of the member.

130 CMR 422.410(B).

MassHealth **does not cover** any of the following as part of the PCA program or the transitional living program:

- (A) social services, including, but not limited to, babysitting, respite care, vocational rehabilitation, sheltered workshop, educational services, recreational services, advocacy, and liaison services with other agencies;
- (B) medical services available from other MassHealth providers, such as physician, pharmacy, or community health center services;
- (C) assistance provided in the form of cueing, prompting, supervision, guiding, or coaching;
- (D) PCA services provided to a member while the member is a resident of a nursing facility or other inpatient facility;
- (E) PCA services provided to a member during the time a member is participating in a community program funded by MassHealth including, but not limited to, day habilitation, adult day health, adult foster care, or group adult foster care;
- (F) services provided by family members, as defined in 130 CMR 422.402; or
- (G) surrogates, as defined in 130 CMR 422.402.

See 130 CMR 422.412 (emphasis added).

As an ICO, however, CCA can provide more to members than MassHealth allows, but not less. According to the CCA medical necessity guidelines, CCA will provide PCA assistance provided in the form of cueing and/or supervision, in addition to hands-on physical assistance. See Exhibit 5 at 56-57. A PCA may not be provided for the benefit of non-disabled household members; for example, cleaning common areas or laundry for other persons living in the home. *Id.*

The appeal is dismissed as to oral care, medication assistance, bladder care, bowel care, nighttime hours, meal preparation, and laundry because at hearing, parties were able to resolve those disputes. Parties agreed to the following: oral care 1 minute, 2 times per day, 7 days per week; medication assistance 2 minutes, 2 times per day, 7 days per week; bladder care 3 minutes, 6 times per day, 7 days per week; bowel care 3 minutes, 3 times per day, 7 days per week; nighttime hours 14 hours per week; meal preparation – dinner 20 minutes per day; and laundry 60 minutes per week.

As to the request for 15 minutes, 1 time per day, 7 days per week for dressing and 10 minutes, 1 time per day, 7 days per week for undressing, the appeal is approved. CCA testified that there was no change in the appellant's condition and approved the appellant for the same amount of time he received for dressing and undressing in the previous year; however, the most recent evaluation from December 12, 2024 shows that the appellant requires moderate assistance with dressing and undressing. Last year, he required minimum assistance with dressing and undressing. The time per task tool recommends 15 minutes for dressing and 10 minutes for undressing for someone who requires moderate assistance. For these reasons, the appellant is approved for 15 minutes, 1 time per day, 7 days per week for dressing and 10 minutes, 1 time per day, 7 days per week for undressing, as requested.

It is the appellant's burden to show that CCA's determination was in error and he has not done so here for the IADLs of housekeeping and shopping. The appellant has not demonstrated that additional PCA assistance with housekeeping and shopping takes longer than the time approved. While his long-time partner does not fall under the definition of a family member who is expected to provide assistance with most IADLs, the PCA is only responsible for the appellant's personal spaces, not housekeeping for the entire household. Additionally, shopping is primarily shared for the household as well. Even if the appellant needs some of his own personal items, the PCA may not be provided for the benefit of non-disabled household members. For these reasons, the appeal is denied as to the request for additional time with housekeeping and shopping.

For these reasons, the appeal is approved in part, denied in part, and dismissed in part.

Order for MassHealth

Approve 15 minutes, 1 time per day, 7 days per week for dressing; approve 10 minutes, 1 time per day, 7 days per week for undressing; and implement agreements made at hearing for oral care, medication assistance, bladder care, bowel care, nighttime hours, meal preparation, and laundry.


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 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.

Alexandra Shube
Hearing Officer
Board of Hearings


MassHealth Representative: ICO Commonwealth Care Alliance, Attn: Nayelis Guerrero, 30 Winter Street, Boston, MA 02108