

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2507918
Decision Date:	8/11/2025	Hearing Date:	06/26/2025
Hearing Officer:	Marc Tonaszuck		

Appearance for Appellant:



Appearance for MassHealth:

Donna Burns, RN, Optum



*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:	Denied	Issue:	Prior Authorization – Personal Care Attendant (PCA) Services
Decision Date:	8/11/2025	Hearing Date:	06/26/2025
MassHealth's Rep.:	Donna Burns, RN, Optum	Appellant's Rep.:	Mother
Hearing Location:	Quincy Harbor South	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 05/09/2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services from a requested 24 hours and 30 minutes (24:30) hours per week to 6.00 hours per week for the dates of service from 06/02/2025 to 06/01/2026 (130 CMR 422.410; Exhibit 1). On 05/22/2025 a timely appeal was filed by the appellant (130 CMR 610.015(B); Exhibit 2). Individual MassHealth agency determinations regarding scope and amount of assistance (including, but not limited to, level-of-care determinations) are valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth modified the appellant's prior authorization request for personal care attendant services.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 422.410 and 450.204, in modifying appellant's prior authorization request for personal care attendant services.

Summary of Evidence

Both the appellant's representative and the MassHealth representative appeared telephonically. Exhibits were admitted into evidence (1-4).

The MassHealth representative testified that she is a licensed registered nurse who works for Optum, the MassHealth contractor that makes the personal care attendant (PCA) decisions. She testified that on 05/05/2025 a prior authorization request (PA) for PCA services was received on appellant's behalf from his PCA agency (PCM), [REDACTED] for the dates of service of 06/02/2025 to 06/01/2026. In the PA request for PCA services (Exhibit 4), the provider requested 24:30 hours per week of PCA assistance. The appellant is a minor child, who lives with his family in the community. He has diagnoses that include autism with anxiety, depression, bi-polar Disorder, ADHD, sleep disturbance disorder, sensory processing disorder (Exhibit 4).

The Optum representative testified that on 05/09/2025 MassHealth modified the PCA request to 6:00 hours per week. Modifications were made to the PA request in the activities of daily living (ADL) tasks of mobility, transfers, grooming (nails), bladder care, bowel care, and overnight toileting.

Mobility

The appellant's PCM requested 1 minute, 6 times per day, 7 days per week (1 X 6 X 7) for assistance with mobility. The provider noted that the PCA time is needed to assist the appellant in/out home to school transport vehicle, consumer distracts easily, has a history of bolting and no safety awareness. He is independent with mobility and transfers within home, no DME required (Exhibit 4).

MassHealth modified the request for assistance with mobility to 3 X 2 X 5. The MassHealth representative testified that the modified time is what the appellant received last year. The time requested for mobility is to assist the appellant in and out of the school bus/van. The MassHealth representative testified that the appellant does not need assistance moving from room to room inside the home. Any time to supervise, cue or redirect the appellant is not a covered service.

The appellant's mother testified that the appellant needs to be redirected constantly. It takes the PCA "way longer" than 3 minutes to assist the appellant on and off the school bus. He takes approximately 15 minutes to get onto the school bus, which must wait for him.

Transfers

The appellant's PCM requested 1 X 6 X 7 for assistance with transfers in and out of bed. The provider noted that the appellant is independent with transfers inside the home. MassHealth denied the time requested for assistance with transfers. The MassHealth representative testified that the documentation included with the PCA request indicates that the appellant does not need assistance in this area. He is able to independently transfer in and out of bed.

The appellant's mother had nothing to say about this modification.

Grooming (Nail Care)

The appellant's PCM requested 5 X 1 X 7 for assistance with grooming (nail care). The provider noted that the time was requested for assistance cutting and filing his nails.

MassHealth modified the time for assistance with nail care to 5 X 1 X 1. The MassHealth representative testified that most children require nail care once a week, not every day.

The appellant's mother responded that the appellant is a "nail biter," who is "obsessive with biting his nails and biting the skin."

Toileting

The appellant's PCM requested 6 X 4 X 5 for assistance with bladder care, 6 X 6 X 2 for assistance with bowel care, and 10 X 2 X 7 for overnight assistance with toileting. The provider noted that the appellant is independent with bladder and bowel activity, is able to wipe and provide self-hygiene, needs reminders for hand hygiene. The appellant wears pull-ups at night and continues with incontinence at night.

MassHealth denied all time for toileting. The MassHealth representative testified that according to the documentation included with the PCA request, the appellant does not need assistance with toileting during the day, and he wears pull-ups at night.

The appellant's mother testified that the appellant "wets the bed a couple times a night." She also testified that the appellant is not independent with toileting because he sometimes waits too long to go to the bathroom and he has accidents.

The MassHealth representative testified that MassHealth sent a "deferral request" to the PCM requesting additional information regarding the appellant's toileting needs. The PCM responded to MassHealth that the appellant "is able to complete tasks but needs cueing and prompting and supervision to complete tasks." The MassHealth representative testified that the assistance

required by the appellant for toileting is a non-covered service, since it does not involve the need for “hands-on assistance.”

Findings of Fact

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

1. On 05/05/2025, MassHealth received a prior authorization (PA) request for PCA services on appellant’s behalf from the PCA provider, [REDACTED] for the dates of service of 06/02/2025 to 06/01/2026 (Testimony; Exhibit 4).
2. In the PA request for PCA services, the provider requested 24:30 hours per week of PCA assistance (Testimony; Exhibit 4).
3. The appellant is a minor child who lives in the community with his family. He has diagnoses that include autism with anxiety, depression, bi-polar disorder, ADHD, sleep disturbance disorder, sensory processing disorder (Testimony; Exhibit 4).
4. On 05/09/2025, MassHealth modified the PCA request to 6:00 hours per week. Modifications were made in the activities of daily living (ADL) tasks of mobility, transfers, grooming (nails), bladder care, bowel care, and overnight toileting (Testimony; Exhibits 1 and 4).
5. The appellant filed his timely request for a fair hearing with the Board of Hearings on 05/22/2025. A fair hearing was held on 06/26/2025 (Exhibits 2 and 3).
6. The appellant’s PCM requested 1 minute, 6 times per day, 7 days per week (1 X 6 X 7) for assistance with mobility. The provider noted that the PCA time is needed to assist the appellant in/out home to school transport vehicle, consumer distracts easily, has a history of bolting and no safety awareness. He is independent with mobility and transfers within home, no DME required (Exhibit 4).
7. MassHealth modified the request for assistance with mobility to 3 X 2 X 5.
8. The appellant is able to walk from room to room inside the home without assistance.
9. The appellant’s mother testified that the time requested for assistance with mobility is to “redirect” the appellant.
10. The appellant’s PCM requested 1 X 6 X 7 for assistance with transfers in and out of bed. The provider noted that the appellant is independent with transfers inside the home.

11. MassHealth denied the time requested for assistance with transfers.
12. The appellant's PCM requested 5 X 1 X 7 for assistance with grooming (nail care). The provider noted that the time was requested for assistance cutting and filing his nails.
13. MassHealth modified the request for assistance with nail care to 5 X 1 X 1.
14. The MassHealth representative testified that nail care is generally approved for once a week assistance.
15. The appellant's PCM requested 6 X 4 X 5 for assistance with bladder care, 6 X 6 X 2 for assistance with bowel care, and 10 X 2 X 7 for overnight assistance with toileting. The provider noted that the appellant is independent with bladder and bowel activity, is able to wipe and provide self-hygiene, needs reminders for hand hygiene. The appellant wears pull-ups at night and continues with incontinence at night.
16. MassHealth denied the time requested for assistance with all toileting.
17. When MassHealth reached out to the provider with questions regarding the PCA request, the PCM responded that the appellant "is able to complete tasks but needs cueing and prompting and supervision to complete tasks."
18. The appellant wears pull-ups absorbency diapers at night.

Analysis and Conclusions of Law

Regulations at 130 CMR 450.204 described medical necessity, as follows:

The MassHealth agency will not pay a provider for services that are not medically necessary and may impose sanctions on a provider for providing or prescribing a service or for admitting a member to an inpatient facility where such service or admission is not 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 (emphasis added).

Regulations at 130 CMR 422.412 describe non-covered PCA services:

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.

(Emphasis added.)

To qualify for services under the PCA program, the member must meet the conditions defined at 130 CMR 422.403, below:

(C) 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 personal care services are prescribed by a physician or a nurse practitioner who is responsible for the oversight of the member's health care.
- (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 personal care agency, requires physical assistance with two or more of the following ADLs as defined in 130 CMR 422.410(A):

- (a) mobility, including transfers;
- (b) medications,
- (c) bathing/grooming;
- (d) dressing or undressing;
- (e) range-of-motion exercises;
- (f) eating; and
- (g) toileting

(4) The MassHealth agency has determined that the PCA services are medically necessary and has granted a prior authorization for PCA services.

The type of PCA services available are described in 130 CMR 422.410 below:

(A) Activities of Daily Living (ADLs). 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 prescribed by a physician that otherwise would be self-administered;
- (3) bathing/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.

(B) Instrumental Activities of Daily Living (IADLs). Instrumental activities of daily living include the following:

- (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.

(C) Determining the Number of Hours of Physical Assistance. In determining the number of hours of physical assistance that a member requires under 130 CMR 422.410(B) for IADLs, the personal care agency must assume the following.

(1) When a member is living with family members, the family members will provide assistance with most IADLs. For example, routine laundry, housekeeping, shopping, and meal preparation and clean-up should include those needs of the member.

(2) When a member is living with one or more other members who are authorized for MassHealth personal care services, PCA time for homemaking tasks (such as shopping, housekeeping, laundry, and meal preparation and clean-up) must be calculated on a shared basis.

(3) The MassHealth agency will consider individual circumstances when determining the number of hours of physical assistance that a member requires for IADLs.

The appellant has the burden "to demonstrate the invalidity of the administrative determination." See *Andrews vs. Division of Medical Assistance*, 68 Mass. App. Ct. 228. Moreover, the burden is on the appealing party to demonstrate the invalidity of the administrative determination. See *Fisch v. Board of Registration in Med.*, 437 Mass. 128, 131 (2002); *Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn.*, 11 Mass. App. Ct. 333, 334 (1981); *Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance*, 45 Mass. App. Ct. 386, 390 (1998).

MassHealth modified the appellant's request for PCA services in the activities of daily living (ADL) tasks of mobility, transfers, grooming (nails), bladder care, bowel care, and overnight toileting.

Mobility

The appellant's PCM requested 1 minute, 6 times per day, 7 days per week (1 X 6 X 7) for assistance with mobility. The provider noted that the PCA time is needed to assist the appellant in/out home to school transport vehicle, consumer distracts easily, has a history of bolting and no safety awareness. He is "independent with mobility and transfers within the home, no DME required." MassHealth modified the request for assistance with mobility to 3 X 2 X 5, based on documentation received from the PCM that the "the appellant is able to walk from room to room inside the home without assistance." The appellant's mother testified that the appellant needs assistance getting on and off the school bus/van because he "bolts," and "constantly needs redirection." MassHealth's modification in this area is supported by the regulations and the facts in the hearing record. Time cannot be approved for cueing, prompting, or supervision. Accordingly, this portion of the appeal is denied.

Transfers

The appellant's PCM requested 1 X 6 X 7 for assistance with transfers in and out of bed. The provider noted that the appellant is independent with transfers inside the home. MassHealth denied the

time requested for assistance with transfers, based on documentation from the PCM that the appellant The MassHealth representative testified that the documentation included with the PCA request indicates that the appellant does not need assistance in this area. He is able to independently transfer in and out of bed. The appellant's mother had nothing to say about this modification. MassHealth's modification is supported by the regulations and the facts in the hearing record. This portion of the appeal is therefore denied.

Grooming (Nail Care)

The appellant's PCM requested 5 X 1 X 7 for assistance with grooming (nail care). The provider noted that the time was requested for assistance cutting and filing his nails. MassHealth modified the request for assistance with nail care to 5 X 1 X 1. The MassHealth representative testified that nail care is generally approved for once a week assistance. The appellant's mother stated that the appellant "bites his nails," and needs additional time for assistance with nail care. She did not explain how much time was necessary for assistance with this task. The appellant has not met his burden of showing MassHealth's modification in this area is incorrect or not otherwise supported by the regulations or facts in the hearing record. Thus, this portion of the appeal is denied.

Toileting

The appellant's PCM requested 6 X 4 X 5 for assistance with bladder care, 6 X 6 X 2 for assistance with bowel care, and 10 X 2 X 7 for overnight assistance with toileting. The provider noted that the appellant is independent with bladder and bowel activity, is able to wipe and provide self-hygiene, needs reminders for hand hygiene. The appellant wears pull-ups at night and continues with incontinence at night. MassHealth denied the time requested for assistance with all toileting. When MassHealth reached out to the provider with questions regarding the PCA request, the PCM responded that the appellant "is able to complete tasks but needs cueing and prompting and supervision to complete tasks."

The appellant's mother responded that he needs PCA time for toileting because he has accidents "a couple of times a night," and he cannot independently toilet himself. The documentation states otherwise. All notes from the provider state that the appellant is independent with toileting and uses incontinence pull ups at nighttime. MassHealth's denial of assistance with toileting is supported by the regulations and the facts in the hearing record. This portion of the appeal is denied.

For the foregoing reasons, this 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

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