

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:

[REDACTED]
[REDACTED]

Appeal Decision:	Denied	Appeal Number:	2508220
Decision Date:	8/15/2025	Hearing Date:	June 30, 2025
Hearing Officer:	Brook Padgett		

Appellant Representative:

Pro se

MassHealth Representative:

Robin Brown, R.N.



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

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Prior Authorization PCA Services 130 CMR 450.204
Decision Date:	8/15/2025	Hearing Date:	June 30, 2025
MassHealth Rep.:	R. Brown, R.N.	Appellant Rep.:	Pro se
Hearing Location:	Quincy	Aid Pending:	Yes

Authority

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

Jurisdiction

The appellant received a notice dated May 08, 2025 stating: Your request for prior authorization for personal care attendant (PCA) services has been modified. (Exhibit 1). The appellant filed this appeal timely on May 23, 2025 and has continued to receive aid pending the outcome of this appeal. (130 CMR 610.015(B); Exhibit 2). Modification of a prior authorization request is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth modified the appellant's request for PCA services from 95 hours per week to 87 hours and 30 minutes per week.

Issue

The appeal issue is whether MassHealth correctly modified the appellant's request for PCA services.

Summary of Evidence

The MassHealth representative testified that a PCA evaluation was performed by a registered nurse with the appellant's provider agency, Boston Center for Independent Living (BCIL), on April 05, 2025. The provider indicated the appellant is a ■-year-old male with a medical history of C4 level cervical spinal cord injury. At the time of the evaluation, the appellant appeared alert and oriented x 3 with no reported falls or hospitalizations in the past 12 months. The appellant requires assistance with his ADLs/IADLs due to poor trunk flexion, non-use of extremities, severe spasticity in trunk and lower extremities, chronic pain, and bilateral contracted hands. On May 07, 2025, BCIL requested 95 hours per week of PCA services. On May 08, 2025 MassHealth modified that request to 87 hours and 30 minutes per week. The MassHealth representative stated that the time authorized is determined by the individual's functional ability, severity of symptoms, environmental factors, height and weight, additional medical equipment (e.g., G-tube, urological equipment, colostomy, respiratory equipment,) level of assistance needed for transfers, and level of member's cooperation.

MassHealth testified that all the appellant's PCA requests were approved in full except for the following modifications:

Repositioning Night Time: The appellant requested and was authorized for 4 minutes x 6 times a day x 7 days a week, or 168 minutes per week during the day (6am to midnight). The appellant also requested 4 minutes x 6 times a night x 7 days a week, or 168 minutes per week at night (midnight to 6am). MassHealth modified the night time request to 4 minutes x 3 times a day x 7 days a week, or 84 minutes per week. MassHealth argues that repositioning an individual in the appellant's condition 6 times (every two hours) during the night when he or she should be sleeping does not meet the medical standard of care for an individual in his condition.

The appellant responded that he has been paralyzed for 36 years and his buttocks are so scarred due to the number of bed sores he has had to endure. The appellant argued that everyone is different and has different sleeping patterns and he needs this extra repositioning time so he does not get more bed sores.

Passive Range of Motion (PROM) Night Time: The appellant requested and was authorized for 10 minutes x 2 times a day x 7 days a week, or 140 minutes per week for PROM for Upper Extremities Left (UL), Upper Extremities Right (UR), Lower Extremities Left (LL), and Lower Extremities Right (LR) during the day. (6am to midnight). The appellant also requested 5 minutes x 1 time a night or 5 minutes for UL, UR, LL, and LR per night (midnight to 6am). MassHealth modified the night time request to 0 minutes. MassHealth maintains performing PROM on an individual in the appellant's condition during the night when they should be sleeping does not meet the medical standard of care for an individual in his condition.

The appellant responded that nothing has changed in his life so he doesn't understand why MassHealth is taking away his time. The appellant stated he has a catheter and is often covered

with urine so he needs to be moved and changed in the night. The appellant stated he has broken legs which requires PROM exercises.

MassHealth responded that a PCA performs PROM to increase circulation, decrease muscle spasms and pain, and that performing this activity during the night when the appellant should be sleeping is not the standard of care. MassHealth stated if the appellant requires a clothing change during the night he will be getting some repositioning and stretching when the changing occurs.

Grooming/Other: The appellant requested 7 minutes x 2 times a day x 7 days a week for applying lotion and skin checks. MassHealth modified the request to 5 minutes x 2 times a day x 7 days a week for applying lotion only, as the assessing the appellant's skin is a nursing task and not a PCA activity.

The appellant responded that he has had many bouts of rashes and irritations all over his body due to his incontinence and his inability to reposition. The appellant stated his condition last year is no indication of his condition this year, and he needs to have his skin checked regularly to make sure his skin is not degrading. The appellant maintains that without constant skin assessments, he will get bed sores which will require more care.

MassHealth responded that the PCA does not have the medical training to perform skin checks. The PCA is responsible to look at the appellant's skin when assisting with other tasks such as toileting, dressing, and applying lotion; however, the PCA should only make note of any changes which will then be assessed by the nurse.

Eating - Night Time Snack: The appellant requested and was authorized for 70 minutes x 1 time a day x 7 days a week, or 490 minutes per week during the day (6am to midnight) for eating. The appellant also requested 5 minutes x 4 times a night or 20 minutes per night (midnight to 6am) for a snack. MassHealth modified the time for eating a snack to 5 minutes x 3 times a night or 15 minutes per night. MassHealth maintained the appellant requires no more than 15 minutes a night to be given a drink and snack if needed.

The appellant responded that he sometimes requires 45 minutes for activities at night and sometimes 10 minutes, but he is unable to say exactly how much time is needed.

Findings of Fact

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

1. The appellant is a ■■■-year-old male with a medical history of C4 level cervical spinal cord injury. (Exhibit 4 and testimony).
2. On April 05, 2025, a PCA evaluation was performed by a registered nurse with the appellant's provider agency; the evaluator determined that the appellant requires assistance with

ADLs/IADLs due to poor trunk flexion, non-use of extremities, severe spasticity in trunk and lower extremities, chronic pain, and bilateral contracted hands and requested 95 hours per week of PCA services. (Exhibit 4 and testimony).

3. On May 08, 2025, MassHealth modified the appellant's request to 87 hours and 30 minutes per week. (Exhibit 4 and testimony).
4. Time requested for assistance with activities was approved in full with the exception of time requested for Repositioning Night Time, PROM Night Time, Grooming - Other, and Eating Night Time Snack. (Exhibit 4 and testimony).
5. The appellant requested 4 minutes x 7 times a day x 7 days a week for night time repositioning; MassHealth modified this request to 4 minutes x 3 times a day x 7 days a week on the basis that repositioning an individual in the appellant's condition every two hours when he or she should be sleeping does not meet the medical standard of care for an individual in his condition. (Exhibit 4, pgs. 11-12).
6. The appellant requested 5 minutes x 1 time a day x 7 days a week for night time PROM for both the upper and lower left and upper and lower right extremities; MassHealth modified this request to 0 on the basis that performing PROM on an individual in the appellant's condition when he should be sleeping does not meet the medical standard of care for an individual in his condition. (Exhibit 4, pg. 13).
7. The appellant requested 7 minutes x 2 times day x 7 days a week for grooming which entails applying lotion and skin checks; MassHealth modified this request to 5 minutes x 2 times a day x 7 days a week as 7 days a week for applying lotion only, arguing that assessing the appellant's skin is a nursing task. (Exhibit 4, pg. 16).
8. The appellant requested 5 minutes x 4 times a night or 20 minutes per night for a snack; MassHealth modified this request to 5 minutes x 3 times a night or 15 minutes per night, arguing that this activity can be performed within a 15-minute time frame. (Exhibit 4, pg. 19).

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 (ADLs) (130 CMR 422.410(A)).

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

The requested services must also be medically necessary for prior authorization to be approved. MassHealth 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 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 the 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

MassHealth approved or the appellant agreed to the time requested for assistance with all activities with the exception of time requested for assistance with Repositioning Night Time, PROM Night Time, Grooming - Other, and Eating Night Time Snack. MassHealth modified or denied these requests, arguing that the time requested for assistance is not the standard of care for someone in the appellant's condition or the time requested was longer than ordinarily required.

Repositioning Night Time: The appellant requested 4 minutes x 7 times a day x 7 days a week for night time repositioning; MassHealth modified the request to 4 minutes x 3 times a day x 7 days

a week. MassHealth argues that repositioning an individual in the appellant's condition every two hours when he or she should be sleeping does not meet the medical standard of care. The appellant maintains he needs repositioning at night in an effort to prevent bed sores.

The appellant has not demonstrated that additional time for repositioning assistance at night is medically necessary. MassHealth persuasively argued that repositioning every two hours during the night time when the appellant should be sleeping is detrimental to the appellant's overall health and not within the standards of care. The appellant's argument – that more frequent repositioning may help to lessen the chance of bed sores – is speculative and not supported by the record. While repositioning every two hours has been a widely accepted standard, this schedule is adjusted during night-time hours to minimize sleep disruptions. The appellant's request fails to meet the medical necessity criteria for the requested time and therefore the MassHealth modification is upheld.

Passive Range of Motion (PROM) Night Time: The appellant requested 5 minutes x 1 time a day x 7 days a week for night time PROM for both UR, UL and LL, LR extremities; MassHealth modified the request to 0 minutes a week. MassHealth denied the appellant's request for time with PROM as the request is not appropriate during the night time when the appellant should be sleeping and not within the medical standard of care. The appellant maintains he needs PROM in the night time as he often needs to be changed during the night.

PROM exercises are performed to increase circulation, decrease muscle spasms and pain. This activity is not to be performed during the night when the appellant should be sleeping. If the appellant is experiencing an increase in the need to be changed at night due to issues with his catheter, he should request more time for that activity. The appellant's request fails to meet the medical necessity criteria for the requested time and therefore the MassHealth modification is upheld.

Grooming/Other: The appellant requested 7 minutes x 2 times a day x 7 days a week for applying lotion and skin checks; MassHealth modified the request to 5 minutes x 2 times a day x 7 days a week for applying lotion only. MassHealth denied the appellant's request for time for skin checks as this activity is not a PCA task and needs to be performed by a nurse. The appellant maintains he needs these skin assessments in an effort to lessen the chances of bed sores.

The appellant has not demonstrated that time should be authorized for the PCA to perform the skilled task of assessing the appellant's skin. Structured skin checks require clinical judgment and must be performed by a nurse. PCAs should observe and report skin concerns during assistance with other ADLs, but this is incidental and included with the time for other tasks, not a separate billable activity. PCAs can be authorized to assist with ADLs and IADLs – skin checks do not fall within either category. Thus, request does not meet the requirements under 130 CMR 422.000 for additional time; therefore, the MassHealth modification is upheld.

Eating - Night Time Snack: The appellant requested 5 minutes x 4 times a night x 7 days a week or 20 minutes per night for a snack; MassHealth modified the request to 5 minutes x 3 times a night x 7 days a week, or 15 minutes per night, arguing that this is sufficient amount of time to assist with a snack and a drink during the night. The Time for Task guidelines allow 5 minutes per episode for a providing a snack. There was insufficient evidence provided to establish that the appellant requires more than 5 minutes x 3 times a night for a snack or that the request meets the medical necessity criteria for the requested time. Therefore, this MassHealth modification is upheld.

The MassHealth modifications to the appellant's requested time with Repositioning Night Time, PROM Night Time, Grooming - Other, and Eating Night Time Snack are all upheld and this appeal is DENIED.

Order for MassHealth

None, other than to remove "aid pending."

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.

Brook Padgett
Hearing Officer
Board of Hearings

cc: MassHealth Representative: PA Unit