

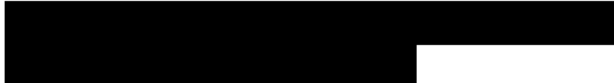
**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied; Dismissed	Appeal Number:	2509184
Decision Date:	9/02/2025	Hearing Date:	07/23/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	

Appearances for Appellant:



Appearance for MassHealth:

Kelly Rayen, 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; Dismissed	Issue:	Prior Authorization – Personal Care Attendant (PCA) Services
Decision Date:	9/02/2025	Hearing Date:	07/23/2025
MassHealth's Rep.:	Kelly Rayen, RN, Optum	Appellant's Rep.:	[REDACTED]
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 05/30/2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services from a requested 123 hours and 00 minutes (123:00) hours per week to 111:15 hours per week for the dates of service from 07/09/2025 to 07/08/2026 (130 CMR 422.410; Exhibit 1). On 06/17/2025 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

The appellant, his representative and the MassHealth representative appeared telephonically. Exhibits were admitted into evidence (1-4).

The MassHealth representative testified that she is a registered nurse who works for Optum, the MassHealth contractor that makes the personal care attendant (PCA) decisions. She testified that on 05/16/2025, a prior authorization request (PA) for PCA services was received on appellant's behalf from his PCA agency, [REDACTED] ("provider" or "PCM"), for the dates of service of 07/09/2025 to 07/08/2026. In the PA request for PCA services (Exhibit 4), the provider requested 123:00 hours per week of PCA assistance. The appellant is an adult male, who lives in the community. He has a primary diagnosis of chronic inflammatory demyelinating polyneuritis, and he had a recent extended hospital stay at the end of 2024 for pneumonia and another 1-week hospitalization in March 2025 for a urinary tract infection (Exhibit 4).

The Optum representative testified that on 05/30/2025 MassHealth modified the PCA request to 111:15 hours per week. Modifications were made to the request for PCA services that include modifications in the activities of daily living (ADL) tasks of transfers, repositioning, bathing, medication prefill, other healthcare needs (suctioning), other healthcare needs (CPAP); and other healthcare needs (massage/stretching). Modifications were made to the instrumental activities of daily living (IADL) tasks of housekeeping, and equipment maintenance.

Transfers

The appellant's PCM requested 10 minutes, 6 times per day, 7 days per week (10 X 6 X 7) and 12 X 6 X 7 for assistance with transfers. The PCM noted that

The appellant is totally dependent on his PCA. Two PCAs need to be available to provide his care - especially all aspects of mobility - 2 persons are required for all aspects of mobility - 2 persons are required for all his transfers and his turning/repos. He is not able to participate in any physical movement due to the progression of his primary diagnosis. The Hoyer lift is used for all lifting, turning and moving about - needs 2 persons for this and getting him in/out of power wheelchair - transferring in/out of shower, on/off shower chair.

(Exhibit 4, p. 16-17.)

MassHealth modified the request for transfers to 20 X 6 X 7. The MassHealth representative

testified that the time requested for assistance with this task is longer than what is ordinarily required for someone with the appellant's abilities. The MassHealth representative concluded her testimony by stating that the PCM requested 10 minutes for other transfers, like to the bathroom. She questioned why the appellant needs more time for transfers in and out of bed and into and out of the power wheelchair, than he needs for transfers in the bathroom. She also did not understand why the appellant required a total of 12 transfers per day to and from the bed and in and out of the wheelchair, not including transfers for bathing and toileting.

The appellant was represented in this hearing by his representative from the PCM and his PCA. They testified that the appellant requires two-person assistance for all transfers. The representatives acknowledged that they did not understand why the provider requested the time in this manner.

Repositioning

The appellant's PCA provider requested 5 X 10 X 7 and 2 X 10 X 7 for assistance with repositioning, totaling 8:15 hours per week for this task. The PCM noted that "2 persons usually needed for frequent turning and repositioning to prevent skin breakdown and trying to prevent respiratory issues due to inability to move himself - done days/evenings/and nights 24hrs/day" (Exhibit 4, p. 17).

MassHealth modified the request for assistance with repositioning to 5 X 8 X 7. The MassHealth representative testified that the time for this task involves moving the appellant slightly while he is sitting or in bed, to make him more comfortable. The modification was made because the time requested for this task exceeds the amount of time normally required by someone with the appellant's abilities.

The appellant's PCA testified that the appellant needs to be repositioned every 15 minutes during the day and every two hours when he is in bed. It takes 10-15 minutes each time, totaling 31.5 hours per week for this task.

Bathing – Evening Wash

The appellant's provider requested 30 X 1 X 7 for assistance with evening wash. The provider noted Physical assist w/sponge/bed bath and drying, including routine transfers (Exhibit 4, p. 19). MassHealth modified the request for assistance with evening wash to 15 X 1 X 7. The MassHealth representative testified that the time requested is longer than ordinarily necessary for someone with the appellant's abilities. The evening wash is for the PCA to assist with washing the appellant's face, underarms, and other areas.

The appellant's PCA agreed that this modification reflects the accurate time. He did not contest this modification.

Pre-Fill of Medication Box

The appellant's provider requested 25 X 1 X 2 for assistance with pre-filling the appellant's medication box. The PCM noted that the "PCA sets up med boxes 2x/wk." (Exhibit 4, p. 28). MassHealth modified the request for assistance pre-filling the medication box to 25 X 1 X 1. The MassHealth representative questioned why the medication box needs to be filled twice a week.

The appellant's PCA responded that the appellant's medication box is pre-filled one time per week.

Other Health Care Needs – Suctioning

The appellant's PCM requested 5 X 4 X 7 for assistance with oral suctioning. The provider noted that the appellant requires "oral suctioning: due to his inability to clean his throat and airways adequately, he is orally suctioned about every 4 hours, day, evening and night" (Exhibit 4, p. 29).

MassHealth modified the request for assistance with suctioning to 2 X 4 X 7. The MassHealth representative testified that the time requested is longer than ordinarily required for this task. Specifically, she testified that oral suctioning should not go behind the appellant's teeth. It should take 10-15 seconds. The time should also be limited to prevent airway trauma.

The appellant's PCA testified that he needs "a couple of minutes" for this task. The appellant is unable to clear his throat and has nasal discharge.

Other Health Care Needs – Stretching and Massage

The appellant's PCM requested 10 X 1 X 7 for assistance with stretching and massaging. The PCM noted that the PCA "provides massage and some stretching to torso - some extra attention to left side of torso. Usually, 10 minutes every day and as needed" (Exhibit 4, p. 30).

MassHealth denied the request for assistance with stretching and massaging. The MassHealth representative testified that massage is not a covered service under the PCA program.

The appellant's PCA testified that he does not perform massage, only stretching. He assists the appellant with stretching to his lower back, legs, neck and buttocks.

The MassHealth representative testified that time was approved for passive range of motion exercises (10 X 2 X 7). The stretching should be part of that task.

Other Health Care Needs – BiPap/CPAP

The appellant's PCM requested 5 X 3 X 7 for assistance with the BiPap, a machine used to assist a person to breath while he sleeps.

The provider noted that the BiPap is "used for sleep apnea: during day/evening - during rest periods, BiPap via device is applied via mask. during sleep at night - mask and device applies, checked routinely and removed around 6:00 a.m." (Exhibit 4, p. 30).

MassHealth modified the request for assistance with the BiPap to 5 X 1 X 7. The MassHealth representative testified that there is no documentation in the submission to show why the appellant needs assistance with this task three times a day. Standards of care support wearing the apparatus for 7-8 hours per night for therapy.

The appellant's PCA testified that the appellant needs the BiPap "all night long and during naps." He testified that the appellant takes one nap per day for about 1- 1 ½ hours.

Housekeeping

The appellant's PCM requested 75 minutes per week for assistance with housekeeping. The provider noted that the "PCA carries out all housekeeping tasks for him [the appellant] due to his total dependence" (Exhibit 4, p. 35).

MassHealth modified the request for assistance with housekeeping to 45 minutes per week. The MassHealth representative testified that the time requested for this task is longer than what is ordinarily required. The PCA can assist with "light housekeeping."

The appellant's PCA testified that performing the housekeeping "takes quite a while." The appellant lives in a 3-room home with a bathroom. When the hearing officer asked the PCA how much time it takes to perform this task he said he "couldn't guess."

Equipment Maintenance

The appellant's PCM requested 156 minutes per week for assistance with equipment maintenance. The provider noted that the PCA maintains the CPAP, the wheelchair and other." (Exhibit 4, p. 37).

MassHealth modified the request for assistance with equipment maintenance to 70 minutes per week. The MassHealth representative testified that the appellant has a CPAP/BiPap, a Hoyer lift, 2 wheelchairs, and a shower chair. She said she could approve 80 minutes per week for assistance with this task.

The appellant's PCA agreed that 80 minutes per week for assistance with the equipment maintenance is adequate.

Findings of Fact

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

1. On 05/16/2025, a prior authorization request (PA) for PCA services was received by MassHealth on the appellant's behalf from his PCA agency, [REDACTED] ("provider" or "PCM"), for the dates of service of 07/09/2025 to 07/08/2026. In the PA request for PCA services, the provider requested 123:00 hours per week of PCA assistance (Testimony; Exhibit 4).
2. The appellant is an adult male, who lives in the community. He has a primary diagnosis of Chronic inflammatory demyelinating polyneuritis, and he had a recent extended hospital stay at the end of 2024 for pneumonia and another 1-week hospitalization in March 2025 for a urinary tract infection (Testimony; Exhibit 4).
3. On 05/30/2025 MassHealth modified the PCA request to 111:15 hours per week. Modifications were made to the request for PCA services that include modifications in the activities of daily living (ADL) tasks of transfers, repositioning, bathing, medication prefill, other healthcare needs (suctioning), other healthcare needs (CPAP/BiPap); and other healthcare needs (massage/stretching). Modifications were made to the instrumental activities of daily living (IADL) tasks of housekeeping, and equipment maintenance (Testimony; Exhibit 4).
4. The appellant filed his timely request for a fair hearing with the Board of Hearings on 06/17/2025. A fair hearing was held on 07/23/2025 (Exhibits 2 and 3).
5. The appellant's PCM requested 10 minutes, 6 times per day, 7 days per week (10 X 6 X 7) and 12 X 6 X 7 for assistance with transfers. The PCM noted that

The appellant is totally dependent on his PCA. Two PCAs need to be available to provide his care - especially all aspects of mobility - 2 persons are required for all aspects of mobility – 2 persons are required for all his transfers and his turning/repos. He is not able to participate in any physical movement due to the progression of his primary diagnosis. The Hoyer lift is used for all lifting, turning and moving about - needs 2 persons for this and getting him in/out of power wheelchair - transferring in/out of shower, on/off shower chair.

(Testimony; Exhibit 4.)

6. MassHealth modified the request for transfers to 20 X 6 X 7.

7. The PCM requested 10 minutes for other transfers, like to the bathroom. This time was approved as requested.
8. The appellant's PCA provider requested 5 X 10 X 7 and 2 X 10 X 7 for assistance with repositioning, totaling 8:15 hours per week for this task. The PCM noted that "2 persons usually needed for frequent turning and repositioning to prevent skin breakdown and trying to prevent respiratory issues due to inability to move himself - done days/evenings/and nights 24hrs/day" (Testimony; Exhibit 4, p. 17)
9. MassHealth modified the request for assistance with repositioning to 5 X 8 X 7. The MassHealth representative testified that the time for this task involves moving the appellant slightly while he is sitting or in bed, to make him more comfortable (Testimony; Exhibit 4).
10. The appellant's provider requested 30 X 1 X 7 for assistance with evening wash. The provider noted Physical assist w/sponge/bed bath and drying, including routine transfers (Exhibit 4, p. 19).
11. MassHealth modified the request for assistance with evening wash to 15 X 1 X 7 (Testimony; Exhibit 4).
12. At the fair hearing, the appellant's PCA agreed that the time, as modified, will meet the appellant's needs (Testimony).
13. The appellant's provider requested 25 X 1 X 2 for assistance with pre-filling the appellant's medication box. The PCM noted that the "PCA sets up med boxes 2x/wk." (Testimony; Exhibit 4, p. 28).
14. MassHealth modified the request for assistance pre-filling the medication box to 25 X 1 X 1 (Testimony; Exhibits 1 and 4).
15. The appellant's PCA testified that the medication box is filled one time per week (Testimony).
16. The appellant's PCM requested 5 X 4 X 7 for assistance with oral suctioning. The provider noted that the appellant requires "oral suctioning: due to his inability to clean his throat and airways adequately, he is orally suctioned about every 4 hours, day, evening and night" (Testimony; Exhibit 4, p. 29).
17. MassHealth modified the request for assistance with suctioning to 2 X 4 X 7 (Testimony; Exhibit 4).

18. The MassHealth representative, a registered nurse, testified that that professional standards of care dictate that oral suctioning should not go behind the appellant's teeth. It should take 10-15 seconds. The time should also be limited to prevent airway trauma (Testimony; Exhibits 1 and 4).
19. The appellant's PCM requested 10 X 1 X 7 for assistance with stretching and massaging. The PCM noted that the PCA "provides massage and some stretching to torso - some extra attention to left side of torso. Usually, 10 minutes every day and as needed" (Testimony; Exhibit 4, p. 30).
20. MassHealth denied the request for assistance with stretching and massaging (Testimony; Exhibit 4).
21. PCA providing massage is not a covered service under the PCA program (Testimony; Exhibit 4).
22. MassHealth approved PCA time for passive range of motion (PROM) exercises. If stretching is necessary, it can be performed with the PROM (Testimony).
23. The appellant's PCM requested 5 X 3 X 7 for assistance with the BiPap, a machine used to assist a person to breath while he sleeps. The provider noted that the BiPap is "used for sleep apnea: during day/evening - during rest periods, BiPap via device is applied via mask. during sleep at night - mask and device applies, checked routinely and removed around 6:00 a.m." (Testimony; Exhibit 4, p. 30).
24. MassHealth modified the request for assistance with the BiPap to 5 X 1 X 7 (Testimony; Exhibit 4).
25. There is no documentation in the provider's submission to show why the appellant needs assistance with this task three times a day (Testimony).
26. The appellant's PCM requested 75 minutes per week for assistance with housekeeping. The provider noted that the "PCA carries out all housekeeping tasks for him [the appellant] due to his total dependence" (Testimony; Exhibit 4, p. 35).
27. MassHealth modified the request for assistance with housekeeping to 45 minutes per week (Testimony; Exhibit 4).
28. The appellant's PCA stated it "takes a while," but he did not know how much time it takes to perform housekeeping (Testimony).

29. The appellant's PCM requested 156 minutes per week for assistance with equipment maintenance. The provider noted that the PCA maintains the CPAP, the wheelchair and other" (Testimony; Exhibit 4, p. 37).
30. MassHealth modified the request for assistance with equipment maintenance to 70 minutes per week to maintain the CPAP/BiPap, a Hoyer lift, 2 wheelchairs, and a shower chair.
31. At the fair hearing, the MassHealth representative testified that she could approve 80 minutes per week for assistance with this task.
32. The appellant agreed that the time for equipment maintenance, as modified at 80 minutes per week, will meet the appellant's needs (Testimony).

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.

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 a request for PCA services, submitted on the appellant's behalf by his PCM, [REDACTED]. Modifications were made to the request for PCA time in the activities of daily living (ADL) tasks of transfers, repositioning, bathing, medication prefill, other healthcare needs (suctioning), other healthcare needs (CPAP/BiPap); and other healthcare needs (massage/stretching). Modifications were made to the instrumental activities of daily living (IADL) tasks of housekeeping, and equipment maintenance.

Transfers

The appellant's PCM requested 10 minutes, 6 times per day, 7 days per week (10 X 6 X 7) and 12 X 6 X 7 for assistance with transfers. The PCM noted that

The appellant is totally dependent on his PCA. Two PCAs need to be available to provide his care - especially all aspects of mobility - 2 persons are required for all aspects of mobility – 2 persons are required for all his transfers and his turning/repos. He is not able to participate in any physical movement due to the progression of his primary diagnosis. The Hoyer lift is used for all lifting, turning and moving about - needs 2 persons for this and getting him in/out of power wheelchair - transferring in/out of shower, on/off shower chair.

MassHealth modified the request for transfers to 20 X 6 X 7. The MassHealth representative testified that other transfers were requested at 10 minutes. The appellant's representative were unable to explain why the PCM requested the time as it did. They provided no substantive information about the PCA time necessary for transfers. Accordingly, MassHealth's modification for transfers is upheld and this portion of the appeal is denied.

Repositioning

The appellant's PCA provider requested 5 X 10 X 7 and 2 X 10 X 7 for assistance with repositioning, totaling 8:15 hours per week for this task. The PCM noted that "2 persons usually needed for frequent turning and repositioning to prevent skin breakdown and trying to prevent respiratory issues due to inability to move himself - done days/evenings/and nights 24hrs/day." MassHealth modified the request for assistance with repositioning to 5 X 8 X 7. The MassHealth representative testified that the time for this task involves moving the appellant slightly while he

is sitting or in bed, to make him more comfortable.

The appellant's representative testified that the appellant needs to be repositioned every 15 minutes and it takes up to 15 minutes each instance. In calculating the time, as testified to by the appellant's PCA, it seems to leave little time for all the other tasks, since the majority of the PCA time, as testified to by the PCA, is taken up by repositioning.

I credit MassHealth's testimony that the time for repositioning should not take more than 5 minutes and there is no support for the request for 20 instances a day of repositioning. Thus, MassHealth's modification in the area of repositioning is upheld. This portion of the appeal is denied.

Bathing – Evening Wash

The appellant's provider requested 30 X 1 X 7 for assistance with evening wash. The provider noted "physical assist w/sponge/bed bath and drying, including routine transfers." MassHealth modified the request for assistance with evening wash to 15 X 1 X 7. At the fair hearing, the appellant's PCA agreed that the time, as modified, will meet the appellant's needs. This portion of the appeal is therefore denied.

Assistance with Medications – Pre-filling Medication Box

The appellant's provider requested 25 X 1 X 2 for assistance with pre-filling the appellant's medication box. The PCM noted that the "PCA sets up med boxes 2x/wk." MassHealth modified the request for assistance pre-filling the medication box to 25 X 1 X 1. The appellant's PCA testified that the medication box is filled one time per week. Since the only modification MassHealth made in this area is the frequency (instances per week), this portion of the appeal is denied.

Other Health Care Needs - Suctioning

The appellant's PCM requested 5 X 4 X 7 for assistance with oral suctioning. The provider noted that the appellant requires "oral suctioning: due to his inability to clean his throat and airways adequately, he is orally suctioned about every 4 hours, day, evening and night." MassHealth modified the request for assistance with suctioning to 2 X 4 X 7. The MassHealth representative, a registered nurse, testified that that professional standards of care dictate that oral suctioning should not go behind the appellant's teeth. It should take 10-15 seconds. The time should also be limited to prevent airway trauma. The appellant's PCA testified that it takes "a couple of minutes" to perform this task. As the appellant's representative has confirmed that "a couple of minutes" is necessary for this task, and MassHealth has approved 2 minutes per instance, this portion of the appeal is denied.

Other Health Care Needs – Stretching and Massaging

The appellant's PCM requested 10 X 1 X 7 for assistance with stretching and massaging. The PCM noted that the PCA "provides massage and some stretching to torso - some extra attention to left side of torso. Usually, 10 minutes every day and as needed." MassHealth denied the request for assistance with stretching and massaging. MassHealth correctly testified that a PCA providing massage is not a covered service under the PCA program. Moreover, MassHealth approved PCA time for passive range of motion (PROM) exercises. If stretching is necessary, it can be performed with the PROM.

The appellant's PCA stated that he does not perform massage on the appellant, but he does assist with stretching his back, neck and legs. MassHealth's denial of PCA time for stretching and massaging is supported by the regulations above. Therefore this portion of the appeal is denied.

Other Health Care Needs – CPAP/BiPap

The appellant's PCM requested 5 X 3 X 7 for assistance with the BiPap, a machine used to assist a person to breath while he sleeps. The provider noted that the BiPap is "used for sleep apnea: during day/evening - during rest periods, BiPap via device is applied via mask. during sleep at night - mask and device applies, checked routinely and removed around 6:00 a.m." MassHealth modified the request for assistance with the BiPap to 5 X 1 X 7. MassHealth based its modification on the fact that there is no documentation in the provider's submission to show why the appellant needs assistance with this task three times a day. The appellant's PCA testified that the appellant uses the BiPap machine at night and during his naps. Because there is no documentation to support this request, MassHealth's decision is upheld and this portion of the appeal is denied.

Housekeeping

The appellant's PCM requested 75 minutes per week for assistance with housekeeping. The provider noted that the "PCA carries out all housekeeping tasks for him [the appellant] due to his total dependence." MassHealth modified the request for assistance with housekeeping to 45 minutes per week. MassHealth based its decision on the testimony that the time requested is longer than normally necessary. The appellant's PCA stated it "takes a while," but he did not know how much time it takes to perform housekeeping. As it is the appellant's burden to show MassHealth's decision is incorrect, and the appellant has not met his burden, this portion of the appeal is denied.

Equipment Maintenance

The appellant's PCM requested 156 minutes per week for assistance with equipment maintenance. The provider noted that the PCA maintains the CPAP, the wheelchair and other." MassHealth modified the request for assistance with equipment maintenance to 70 minutes per

week to maintain the CPAP/BiPap, a Hoyer lift, 2 wheelchairs, and a shower chair. At the fair hearing, the MassHealth representative testified that she could approve 80 minutes per week for assistance with this task. The appellant agreed that the time for equipment maintenance, as modified at 80 minutes per week, will meet the appellant's needs. This portion of the appeal is therefore dismissed.

For the foregoing reasons, this appeal is dismissed in part; denied in part.

Order for MassHealth

In the area of housekeeping, approve 80 minutes per week. In all other areas, none.

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, Division of Medical Assistance, at the address on the first page of this decision.

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

cc: [REDACTED]

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