

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2509331
<b>Decision Date:</b>	9/15/2025	<b>Hearing Date:</b>	07/23/2025
<b>Hearing Officer:</b>	Marc Tonaszuck	<b>Record Open to:</b>	

**Appearance 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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Prior Authorization – Personal Care Attendant (PCA) Services
<b>Decision Date:</b>	9/15/2025	<b>Hearing Date:</b>	07/23/2025
<b>MassHealth’s Rep.:</b>	Kelly Rayen, RN, Optum	<b>Appellant’s Rep.:</b>	Mother
<b>Hearing Location:</b>	Quincy Harbor South	<b>Aid Pending:</b>	No

## Authority

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

## Jurisdiction

Through a notice dated 05/30/2025, Optum, a MassHealth contractor, modified a request for an increase of personal care attendant (PCA) time requested on behalf of the appellant by his PCA provider, [REDACTED] (130 CMR 422.410, 412; Exhibit 1). The appellant filed this appeal with the Board of Hearings in a timely manner on 06/23/2025 (130 CMR 610.015(B); Exhibit 2). Individual MassHealth agency determinations regarding scope and amount of assistance are grounds for appeal (130 CMR 610.032(A)(5)).

## Action Taken by MassHealth

MassHealth modified the appellant’s request for an increase of 4.00 day/evening hours of PCA assistance. MassHealth modified the request of 56 hours and 45 minutes (56:45) to 53:15 hours of PCA time.

## Issue

Was MassHealth correct in modifying the appellant's request for an increase in PCA services?

## Summary of Evidence

A fair hearing was held before the Board of Hearings on 07/23/2025. The appellant appeared telephonically, as did the MassHealth representative. Exhibits 1-4 were admitted into the hearing record.

The MassHealth representative testified that she is a registered nurse who is employed by Optum, the contractor that makes the PCA decisions for MassHealth. She testified that the instant prior authorization (PA) request was submitted on the appellant's behalf by his PCA provider, [REDACTED] ("PCM" or "Provider"). It is an increase request for the dates of service from 05/29/2025 to 05/28/2026. Prior to the PA request, the appellant was approved for, and received, 52:45 hours per week of PCA assistance. The PA is for an adjustment from 52:45 to 56:45, reflecting an increase of four hours a week.

In support of the request for an increase in PCA time, the provide notes, "the appellant is an adult male, who is deaf and blind. The provider notes that the appellant needs more time for bladder care due to urinary dribbling, incontinence, anxiety and stress surrounding toileting time. He requires more time for meal prep as on a special diet. Meals are prepared separately from his siblings. Consumer also required laundry care due to incontinence and urinary dribbling."

On 05/30/2025, MassHealth modified the increase request from 56:45 requested day/evening PCA hours to 53.15 hours. Modifications were made to the request for additional time in the areas of toileting-special transfers, and meal preparation and clean-up. The time requested assistance with laundry was approved, as requested.

### Toileting – Special Transfers

In the task of toileting-special transfers, the appellant currently has been approved for 15 minutes, 6 times a day, 7 days a week (15 X 6 X 7). The PA provider requested an increase of PCA time to 19 X 6 X 7. The provider noted that the appellant "consumer requires increase assistance with bladder care due to increased dribbling, incontinence, anxiety and stress surrounding toileting time" (Exhibit 4, p. 4).

MassHealth denied the request for additional time for toileting-special transfers. The MassHealth representative testified that the time requested is in excess of the ordinary time necessary for an individual with the appellant's abilities. The MassHealth representative testified that time was approved, as requested, for bowel care (19 X 2 X 7). She testified that the documentation included with the PA request does not support additional time for assistance with toileting-special transfers.

The appellant's representative testified that the PCA spends at least 20 minutes per episode to assist the appellant with toileting-special transfers. She stated that the appellant has "massive diarrhea" due to a high dose of steroids. He cannot tell her when he needs to use the bathroom, so he usually needs to be cleaned in the shower after using the toilet. It takes from 10-30 minutes for each instance.

The MassHealth representative responded that the time request is for bladder care only. No increase request was submitted for bowel care. This time is to allow the PCA to transfer the appellant, manage his clothing, incontinence care, hygiene and washing hands.

### Meal Preparation and Clean-up

The appellant has a current authorization for 15 X 1 X 7 hours per week of PCA assistance with meal preparation and clean-up. The PCM submitted an increase request for 20 X 1 X 7. The provider noted that the "PCA preps appellant's meals separately from siblings who upset him. The appellant is on a special diet" (Exhibit 4, p. 4).

MassHealth denied the request for additional time for meal preparation and clean-up. The MassHealth representative testified that the appellant lives with other consumers who receive PCA services from MassHealth. Time for this task, as an instrumental activity of daily living (IADL), is to be shared among all consumers in the home who receive PCA services.

The appellant's representative testified that the appellant requires 735 minutes per week for assistance with his own meal preparation and clean up. She stated that he needs 45 minutes a day for breakfast, 45 minutes a day for dinner and 15 minutes a day for a snack.

## **Findings of Fact**

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

1. The appellant is an adult MassHealth member. He lives in the community with his family.
2. The appellant is deaf and blind.
3. In the increase request, the provider notes that the appellant needs more time for bladder care due to urinary dribbling, incontinence, anxiety and stress surrounding toileting time. He requires more time for meal prep as on a special diet. meals are prepared separately from his siblings. The appellant also required laundry care due to incontinence and urinary dribbling."
4. The appellant is currently authorized for 52 hours and 45 minutes (52.45) per week of PCA

services.

5. On 05/29/2025, the appellant's PCA provider, [REDACTED] submitted a PA for an adjustment from 52:45 hours of assistance per week to 56:45 hours (increase request).
6. On 05/30/2025, MassHealth modified the request for an increase to a total of 53:15 hours per week. Modifications were made in the tasks of bladder care – special transfers and meal preparation and clean-up.
7. For the PCA task of toileting-special transfers, the appellant currently has been approved for 15 minutes, 6 times per day, 7 days per week (15 X 6 X 7).
8. The PCM requested an increase of PCA time to 19 X 6 X 7 for assistance toileting-special transfers. The provider noted that the appellant “requires increase assistance with bladder care due to increased dribbling, incontinence, anxiety and stress surrounding toileting time.”
9. MassHealth denied the request for an increase of time for toileting-special transfers.
10. There is no documentation showing why an additional four minutes per instance is requested for toileting-special transfers.
11. The appellant is currently authorized for 15 X 1 X 7 for assistance with meal preparation and clean-up.
12. The PCM requested an increase to 20 X 1 X 7 for assistance with meal preparation and clean-up. The provider noted that “the PCA prepares the appellant's meals separately from siblings who upset him. The appellant is on a special diet.”
13. MassHealth denied the request for an increase of PCA time for meal preparation and clean-up.
14. The appellant lives with other MassHealth consumers who are authorized for PCA time for IADLs.

## **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.

**(Emphasis added.)**

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).

The appellant, a MassHealth member, has a current authorization for 52:45 hours of weekly PCA services. His PCA provider submitted an adjustment, or increase request, for 56:45 hours per week of PCA assistance. MassHealth modified the request in the tasks of bladder care-special transfers and meal preparation and clean-up. MassHealth ultimately approved a total of 53:15 hours of PCA services.

#### Toileting – Special Transfers

In the task of toileting-special transfers, the appellant has a current authorization for 15 X 6 X 7 hours of PCA time per week. The PA requested an increase of PCA time to 19 X 6 X 7 for assistance with toileting-special transfers. The provider noted that the appellant "requires increase assistance with bladder care due to increased dribbling, incontinence, anxiety and stress surrounding toileting time." MassHealth denied the time requested.

The appellant's representative testified that the appellant has "massive diarrhea and needs to be showered after every bowel movement." MassHealth's denial of an increase of PCA time for this task is supported by the regulations and the facts in the hearing record. The request was specifically for bladder care and there is no documentation to show why an additional four minutes of PCA time per instance is necessary. This portion of the appeal is therefore denied.

### Meal Preparation and Clean-Up

The appellant has a current authorization for 15 X 1 X 7 for assistance with meal preparation and clean-up. The provider noted that "the PCA prepares the appellant's meals separately from siblings who upset him. The appellant is on a special diet."

MassHealth denied the request for an increase in PCA time for assistance with meal preparation and clean-up. MassHealth argued that according to the regulations, PCA assistance with IADLs, like meal preparation and clean-up, is shared among all consumers receiving PCA assistance in the household. In this case there are other consumers in the home who receive MassHealth PCA services. Therefore, there is no documentary evidence to show why the appellant is unable to participate with shared PCA time for this task. This portion of the appeal is therefore 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.

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Marc Tonaszuck  
Hearing Officer  
Board of Hearings



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