

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2509939
Decision Date:	9/15/2025	Hearing Date:	08/05/2025
Hearing Officer:	Christine Therrien		

Appearances for Appellant:



Appearance for MassHealth:


Kelly Rayen, R.N.

Interpreter:



*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 – PCA services
Decision Date:	9/15/2025	Hearing Date:	08/05/2025
MassHealth’s Rep.:	Kelly Rayen, R.N.	Appellant’s Reps.:	
Hearing Location:	Springfield MassHealth Enrollment Center Room 1		

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 5/29/25, MassHealth modified the appellant’s prior authorization request for personal care attendant (PCA) services. (130 CMR 422.410 and Exhibit 1). The appellant filed this appeal in a timely manner on 7/3/25. (130 CMR 610.015(B) and Exhibit 2). Modifications of a request for assistance are valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth modified the appellant’s request for PCA services.

Issue

The issue is whether MassHealth was correct, under 130 CMR 422.410, 422.412, and 450.204, in modifying the appellant's prior authorization request for PCA services.

Summary of Evidence

The MassHealth representative testified that a prior authorization (PA) reevaluation request for 26 hours and 15 minutes per week for personal care attendant (PCA) services was submitted by [REDACTED] on 5/19/25. The MassHealth representative testified that the PA for PCA services is applicable for dates of service beginning 6/2/25 and ending 6/1/26. The MassHealth representative testified that MassHealth modified the request to 12 hours and 15 minutes per week by notice dated 5/29/25. The appellant is [REDACTED] years old with a primary diagnosis of autism.¹ The MassHealth representative testified that the appellant lives at home with her mother. The appellant's mother has her own PCA. The MassHealth representative testified that the narrative submitted with the PA request states the appellant "continues to have difficulty with ADLs and will have tantrums/behaviors at times. [Appellant's mother] reports that [the appellant] has difficulty sleeping and stays up for most of the night, despite the medication she is on. [The appellant's mother] has chronic medical conditions which make it difficult for her to care for [the appellant] at night when she is needing to get sleep." (Exhibit 5, pp. 13-14).

The MassHealth representative testified that the appellant is listed as requiring maximum assistance with toileting. The MassHealth representative testified that the appellant requested 6 minutes, 2 times per night, every night, for toileting. The MassHealth representative testified that MassHealth modified this request to 0 because there is no clinical documentation that states the appellant has excessive urination requiring nighttime toileting. The MassHealth representative testified that the appellant wears diapers at night that can hold 20-50 ounces of fluid and keep the moisture away from the appellant's skin. The MassHealth representative testified that these diapers should be sufficient to keep the appellant from leaking through her diaper overnight. The MassHealth representative testified that the appellant has a bed tent that keeps her from leaving her bed at night. The MassHealth representative testified that the request for PCA time overnight is for supervision, which is a non-covered service.

The appellant's mother testified that the appellant wakes every hour at night, and she gets upset when she is wet. The appellant's mother testified that she has her own chronic health issues, which make it difficult to care for her daughter at night. The appellant's mother testified that she has to change the appellant's diaper 1-5 times per night and also has to change her clothing and bedding at least once because the diapers leak. The appellant's mother testified

¹ Secondary diagnoses include ADHD, seizure disorder, eczema, asthma, pain, sleep disorder, allergies, and Atopic dermatitis.

that the appellant has to get her clothes changed during the day at school because the MassHealth-provided diapers leak.

Findings of Fact

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

1. A PA reevaluation request for 26 hours and 15 minutes per week for PCA services was submitted by [REDACTED] on 5/19/25.
2. The PA for PCA services is applicable for dates of service beginning 6/2/25 and ending 6/1/26.
3. MassHealth modified the request to 12 hours and 15 minutes per week by notice dated 5/29/25.
4. The appellant is [REDACTED] years old with a primary diagnosis of autism.
5. The appellant lives at home with her mother.
6. The appellant's mother has her own PCA.
7. The narrative submitted with the PA states the appellant "continues to have difficulty with ADLs and will have tantrums/behaviors at times. [Appellant's mother] reports that [the appellant] has difficulty sleeping and stays up for most of the night, despite the medication she is on. [The appellant's mother] has chronic medical conditions which make it difficult for her to care for [the appellant] at night when she is needing to get sleep." (Exhibit 5, pp. 13-14).
8. The appellant requires maximum assistance with toileting.
9. The appellant requested 6 minutes, 2 times per night, every night, for toileting.
10. MassHealth modified this request to 0 because there is no clinical documentation that states the appellant has excessive urination requiring nighttime toileting.
11. The appellant wears diapers at night that can hold 20-50 ounces of fluid and keep the moisture away from the appellant's skin. These diapers should be sufficient to keep the

appellant from leaking through her diaper overnight.

Analysis and Conclusions of Law

MassHealth covers personal care services provided to eligible MassHealth members who can be appropriately cared for in the home when all 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 or grooming;
 - d. dressing or undressing;
 - e. range-of-motion exercises;
 - f. eating; and
 - g. toileting.
- (4) The Division has determined that the PCA services are medically necessary and has granted a prior authorization for PCA services.

(130 CMR 422.403©)

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)).

120 CMR 422.410: Activities of Daily Living and Instrumental Activities of Daily Living

- (A) Activities of Daily Living. 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.

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

- (2) household services: physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping;
- (3) meal preparation and clean-up: physically assisting a member to prepare meals;
- (4) transportation: accompanying the member to medical providers; and
- (5) 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.

The requested services must also be medically necessary for prior authorization to be approved. (130 CMR 450.204). 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 the MassHealth. Services that are less costly to the 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©, 503.007, or 517.007.

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

MassHealth does not cover any of the following as part of the PCA program or the transitional living program. (130 CMR 422.412).

- (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.
- (H) PCA services provided to a member without the use of EVV as required by the MassHealth agency.

(emphasis added)

Per 130 CMR 503.007, MassHealth is the payer of last resort and only pays for health care and related services when no other source of payment is available, except as otherwise required by federal law.

- (A) Health Insurance. Every applicant and member must obtain and maintain available health insurance in accordance with 130 CMR 505.000: Health Care Reform: MassHealth: Coverage Types. Failure to do so may result in loss or denial of eligibility unless the applicant or member is
 - (1) receiving MassHealth Standard or MassHealth CommonHealth; and
 - (2) younger than ■ years old or pregnant.
- (B) Use of Benefits. The MassHealth agency does not pay for any health care and related services that are available
 - (1) through the member's health-insurance, if any; or

- (2) at no cost to the member including, but not limited to, any such services that are available through any agency of the local, state, or federal government, or any entity legally obligated to provide those services.

MassHealth modified the request for nighttime toileting time from 6 minutes, 2 times per night, every night, to zero because the appellant wears diapers to bed; therefore, any nighttime hours would only be for supervision. The appellant is reported to wake up several times per night and has trouble falling back to sleep. Per 130 CMR 422.412©, the PCA program covers hands-on assistance only and does not cover supervision. For this reason, the appeal for the modifications to the request for nighttime toileting 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.

Christine Therrien
Hearing Officer
Board of Hearings



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