

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Approved in part; Denied in part; Dismissed in part	<b>Appeal Number:</b>	2510688
<b>Decision Date:</b>	10/09/2025	<b>Hearing Date:</b>	08/19/2025
<b>Hearing Officer:</b>	Alexandra Shube		


**Appearance for Appellant:**

*Via telephone:*



**Appearance for Respondent, United Healthcare:**

*Via telephone:*

, Medical Dir. for One Care at United Healthcare



*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>	Approved in part; Denied in part; Dismissed in part	<b>Issue:</b>	ICO; Denial of Internal Appeal; Prior Authorization – PCA Services
<b>Decision Date:</b>	10/09/2025	<b>Hearing Date:</b>	08/19/2025
<b>United's Rep.:</b>	██████████	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Quincy Harbor South, Remote	<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 Denial of Level 1 Appeal dated June 17, 2025, United Healthcare (“United”) denied the appellant’s internal appeal regarding personal care attendant (PCA) services because it determined the requested level of services was not medically necessary. Exhibit 1. The appellant filed this appeal in a timely manner on July 21, 2025. Exhibit 2; 130 CMR 610.015(B). An integrated care organization’s decision to deny or provide limited authorization of a requested service is grounds for appeal. 130 CMR 610.032(B).

### Action Taken by United Healthcare

United reduced the number of PCA hours it authorized for the appellant from the requested 50.25 hours per week down to 25 hours per week.

## Issue

The appeal issue is whether United was correct, pursuant to 130 CMR 422.000 and 450.204, in determining that the appellant required fewer hours of PCA assistance than he had requested.

## Summary of Evidence

United was represented at hearing by its Medical Director for the One Care product. Through testimony and documentation, United provided the following: the appellant, who is under 65 years old, had an in-person assessment on February 19, 2025 after a surgery which resulted in an increase in his PCA hours to 50.25 per week. Exhibit 5 at 326. Nursing notes indicate the appellant has a non-healing fracture requiring multiple surgeries. *Id.* At the time of the February assessment, the appellant was a maximum assist for walking inside, bathing, transfers, bed mobility, toileting, and hygiene. *Id.* at 335-337. He required extensive assistance for grooming. *Id.* He was totally dependent for walking outside and dressing his lower body. *Id.* He was a minimum assist with upper body tasks and had great difficulty administering his medications. *Id.* Prior to this addition of extra PCA time, he had been receiving 46.25 hours since a May 2024 evaluation.

On May 22, 2025, United conducted a new assessment and determined that the appellant was able to do much more and needed less PCA assistance. *Id.* at 338. According to the new assessment, the appellant was a limited assist for walking inside, transfers, and toileting. *Id.* at 347-349. He was a maximum assist for walking outside. *Id.* He required extensive assistance with bathing and dressing his lower body. *Id.* He still had great difficult with administering medications. *Id.* Based on these improvements, United reduced the appellant's PCA hours to 25 hours per week beginning June 17, 2025. Exhibit 1.

The appellant testified as follows: when the nurse came in May, 2025 to do the evaluation, all her systems were down and her laptop wasn't working, and it seemed like she did not take notes. The appellant was on the couch with his foot elevated and his PCA was out of the house. The nurse did not observe him getting in and out of bed and did not ask about transfers to the bathroom. The appellant is sometimes incontinent of bowel and, at night, he has issues with his bladder. The appellant was involved in a car accident approximately [REDACTED] ago and he has had [REDACTED] surgeries since that time, most recently in [REDACTED]. The appellant's pelvis is currently very swollen and he thinks it might be infected. He saw his surgeon for a CAT scan three weeks ago and is waiting on the results. He has had a very hard time with the decrease in hours. His PCA, who has been with him for seven years, has had to get another job. He is ashamed he needs so much help at his age, but since his accident, he has never had less than 45 hours per week.

## Mobility

United approved the appellant for 1.5 minutes per day (15 minutes per week) for walking inside

and 4.5 minutes per day (35 minutes per week) for walking outside. Exhibit 5 at 347. Previously, after the February 2025 evaluation, the appellant had 4.5 minutes per day for walking inside and 7.5 minutes per day for walking outside. *Id.* at 335.

The appellant agreed with the assessment that he did not need time for repositioning. Exhibit 5 at 339. He also was fine with the time approved for transfers; however, he felt he needed more time than what was approved for walking. According to the evaluation, the appellant requires limited assistance for walking inside the home and maximal assistance for walking outside. *Id.* at 347. The appellant testified that he needs someone next to him to make sure he does not fall. He has to use a walker, because a cane was insufficient. His PCA puts a gait belt on his waist and then holds onto the gait belt to help him to walk to the bathroom or living room or wherever else he needs to go in the home. He needs this assistance every time he walks around the house. The one time that he tried to do it without assistance, he fell.

The nurse evaluator observed the appellant “ambulate indoors with a slow pace and left leg limp not utilizing his rollator or cane to open the door to greet” her. *Id.* at 347. The nurse observed the appellant being full weight bearing and ambulating approximately 20 feet, multiple times, in the home with a rollator or holding onto the wall for support. *Id.* The nurse stated that the appellant cannot get the rollator into his bedroom and requires guided maneuvering indoors when getting up from sitting down or laying down for long periods of time, especially at night. *Id.* The nurse noted that the appellant declined to show ambulation outdoors due to rain, but he is not able to independently do the stairs and requires maximal assistance to safely ambulate down them. *Id.* The nurse reported that the appellant stated he was moving to a first-floor unit June 1, 2025, but as of hearing, the appellant was still in his third-floor apartment with no elevator. *Id.* at 340.

### **Bathing**

United approved 16 minutes, 5 times per week (80 minutes per week) for bathing and 10 minutes, 5 times per week (50 minutes per week) for bathing transfers. *Id.* at 347. The appellant felt the total time was about right, but he bathes every day. The United representative testified that he could adjust the frequency for bathing and bathing transfers to 7 days per week. This adjustment (bathing 16 minutes per day, 7 days per week for a total of 110 minutes per week and bathing transfers 10 minutes per day, 7 days per week for a total of 70 minutes per week) was confirmed by United via email after hearing. Exhibit 6 at 3.

### **Grooming – Hair and Personal Hygiene**

United did not approve any time for hair care or personal hygiene. Exhibit 5 at 347. Previously, post-surgery in February, the appellant had been approved for around 8 minutes per day, 7 days per week for hair care (60 minutes per week) based on needing extensive assistance and 12 minutes per day, 7 days per week (85 minutes per week) for personal hygiene based on needing maximal assistance. *Id.* at 335. The appellant testified that the PCA helps him with shaving. He can

brush his teeth by himself, but the PCA sets him up.

### **Dressing/Undressing**

United did not approve any time for dressing/undressing the upper body. The appellant agreed that he was independent with that. United approved 7 minutes per day, 7 days per week (50 minutes total) for dressing/undressing the lower body based on needing extensive assistance. *Id.* at 347-348. In February, the appellant was deemed total dependence and approved for 20 minutes per day, 7 days per week (140 minutes total). *Id.* at 336. The appellant explained that it takes at least 15 minutes per day to dress his lower body. With his leg injury and swollen pelvis area, it is really difficult and painful to bend past his waist area. He needs assistance with underwear, socks, pants, and shoes. Additionally, he has incontinence issues which results in additional clothing changes.

### **Toileting**

United approved the appellant for 4 minutes per day, 7 days per week (30 minutes total) for toileting based on needing limited assistance. *Id.* at 348. The nurse evaluator observed the appellant sit-to-stand on a chair and stand holding onto the wall. *Id.* She also observed the appellant reach behind himself and do the wiping motion. *Id.* She noted that the appellant reported he requires “limited assistance with toileting tasks of clothing management when he is incontinent of bladder, which member reports occurs at nighttime.” *Id.*

The appellant stated that the nurse evaluator did not observe toileting, but he agreed that he can do the hygiene/wiping on his own. He needs assistance with clothing management, especially when he has incontinence issues. He also needs help on and off the toilet given his poor balance. 4 minutes per day is not sufficient given that he goes to the bathroom multiple times throughout the day and night. He goes to the bathroom more often than the average person because of his injuries. He has bowel movements three times per day and urinates throughout the day, but more frequently during the night. The need to urinate is worse when he is lying down.

The United representative agreed that this amount of time did not seem sufficient and it would make sense to adjust it to five to six times per day; however, no adjustment was made at or after hearing.

### **Medication**

United approved 10 minutes per day for assistance with medication and the appellant agreed that this was sufficient.

### **Meal Preparation**

United approved 10 minutes per week for breakfast, 15 minutes per week for lunch, and 45 minutes per week for dinner based on the appellant having some difficulty with the task. *Id.* at 348. The nurse noted that the appellant “reports he is able to prepare food items such as cereal, snacks, and cold foods... member reports he is able to warm up meals in his microwave that his PCA/roommate prepares for him. Member reports he is unable to stand for long period of time to prepare foods that require chopping, peeling, stirring, or cutting at dinner time. RNCC observed member have a rollator with a seat so member is able to carry his plates and utensils while using rollator. RNCC observed member dining room table directly near the cabinets and counters in the kitchen. RNCC observed member demonstrate the ability to grab and reach without difficulty or assistance at this time.” *Id.*

The appellant testified that he lives alone and his PCA cooks and sets him up. He has poor balance and needs help moving around, which means he cannot help prepare the meal. The PCA does the preparation at the kitchen sink where the counter space is and he cannot stand there to help. He cannot stand for long periods.

### **Laundry**

United approved 40 minutes per week for laundry based on having great difficulty with the task. *Id.* Previously, he had been approved for 30 minutes per week. *Id.* at 336. The appellant testified that he has accidents in his bed and clothes, creating excessive laundry. His sheets usually need to be changed and laundered four times per week due to incontinence. There is no laundry available in his third-floor apartment and the washer and dryer are located in the basement. *Id.* at 344.

### **Housekeeping**

United approved 45 minutes per week for housekeeping based on having great difficulty with the task. *Id.* Previously, he had also been approved for 45 minutes per week. *Id.* at 336. The appellant testified that he lives alone and needs assistance with all housekeeping tasks.

### **Shopping**

United approved 20 minutes per week for shopping based on having great difficulty with the task. *Id.* Previously, he had also been approved for 20 minutes per week. *Id.* at 336. The nurse observer noted that the appellant “reports he has difficulty putting away groceries as he has difficulty ambulating up 3 flights of stairs to the third floor. Member reports he requires assistance purchasing groceries and picking up medication due to the member’s use of a cane or rollator for ambulation due to chronic left knee, leg and ankle pain as well as pelvis pain from history of multiple surgeries from a past motor vehicle accident in [REDACTED] His PCA does the shopping.

The appellant explained that he cannot go shopping, even using one of the electric shopping cart/scooters, due to his frequent need to go to the bathroom. He goes to the bathroom more often than the average person because of his injuries. He lives on the third floor and there is no elevator. The PCA needs to bring the groceries up three flights of stairs.

### **Medical Appointments**

United approved 35 minutes per week for medical appointments based on 12 appointments per year to his primary care physician (PCP), orthopedic surgeon, and psychiatric care. *Id.* at 349. The nurse noted that the appellant needs a cane or rollator for ambulation and requires his PCA to get the assistive devices from the trunk before he gets out of the car. *Id.* The nurse also stated that the appellant uses Modivcare when his PCA is unable to bring him to appointments. *Id.*

The appellant testified that, if and when he uses Modivcare, his PCA comes with him because Modivcare will not assist him. Additionally, he goes to the methadone clinic daily for treatment.

The United representative agreed that daily visits to the methadone clinic should be added in for medical appointments. He agreed to adjust that but would have to check how much additional time would be added. After hearing, his office confirmed that “exception time” of 60 minutes per day, 7 days per week to support daily clinic appointments was approved. Exhibit 6 at 2-3.

## **Findings of Fact**

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

1. The appellant, who is under 65 years old, had an in-person assessment on February 19, 2025, after a surgery, which resulted in an increase in his PCA hours to 50.25 per week. Prior to this time, he had been receiving 46.25 hours per week since a May 2024 evaluation.
2. On May 22, 2025, United conducted a new assessment and determined that the appellant was able to do much more and needed less PCA assistance.
3. Based on the May assessment, United approved the appellant for 25 hours per week, beginning June 17, 2025.
4. The appellant agreed to the time approved for assistance with mobility – repositioning, mobility – transfers, dressing/undressing – upper body, and medication.
5. United approved the appellant for 1.5 minutes per day (15 minutes per week) for walking inside and 4.5 minutes per day (35 minutes per week) for walking outside.

6. United approved 16 minutes, 5 times per week (80 minutes per week) for bathing and 10 minutes, 5 times per week (50 minutes per week) for bathing transfers.
7. Based on testimony at hearing, United agreed to adjust the time for bathing and bathing transfers and approved 16 minutes per day, 7 days per week (110 minutes per week) for bathing and 10 minutes per day, 7 days per week (70 minutes per week) for bathing transfers
8. United did not approve any time for hair care or personal hygiene.
9. United approved 7 minutes per day, 7 days per week (50 minutes total) for dressing/undressing the lower body.
10. United approved the appellant for 4 minutes per day, 7 days per week (30 minutes total) for toileting.
11. For meal preparation, United approved 10 minutes per week for breakfast, 15 minutes per week for lunch, and 45 minutes per week for dinner.
12. United approved 40 minutes per week for laundry.
13. United approved 45 minutes per week for housekeeping.
14. United approved 20 minutes per week for shopping.
15. United approved 35 minutes per week for medical appointments based on 12 appointments per year to his PCP, orthopedic surgeon, and psychiatric care. United did not initially include time for transportation to his daily methadone clinic visits.
16. Based on testimony at hearing, United approved 12 appointments at 35 minutes per week, plus exception time of 60 minutes per day, 7 days per week to support daily clinic appointments.
17. As of hearing, the appellant lives alone on a third-floor walk-up apartment with a washer and dryer in the basement of the building.
18. It is difficult and painful for the appellant to bend below the waist. He has poor balance and low standing tolerance. He experiences incontinence and his bed sheets need to be changed and washed four times per week. He needs to urinate frequently due to his pelvis and bladder issues and has bowel movements three times per day.

## Analysis and Conclusions of Law

As a MassHealth ICO, United Healthcare One Care

will authorize, arrange, integrate, and coordinate the provision of all covered services for the member. Upon enrollment, the ICO is required to provide evidence of its coverage, the range of available covered services, what to do for emergency conditions and urgent care needs, and how to obtain access to specialty, behavioral health, and long-term services and supports.

(130 CMR 508.007(C)).

United is “responsible for providing enrolled members with the full continuum of Medicare- and MassHealth covered services.” (130 CMR 450.105(A)(7); 130 CMR 450.105(E)(6)). Those services include PCA services, which are governed by the regulations at 130 CMR 422.000. (See 130 CMR 450.105). Whenever an ICO makes a coverage decision, it must provide notice to the affected member. 130 CMR 508.011. An ICO has 30 days to resolve any internal appeals, and the member then has 120 days to request a fair hearing from the Board of Hearings. See 130 CMR 508.012; 130 CMR 610.015(B)(7).

MassHealth is required to cover all services and treatments that are “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.

130 CMR 450.204(A).

MassHealth generally covers PCA services provided to eligible MassHealth members with a permanent or chronic disability that impairs their functional ability to perform activities of daily

living (“ADLs”) and instrumental activities of daily living (“IADLs”), but who can be appropriately cared for in the home.

ADLs include:

- (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.

130 CMR 422.410(A).

IADLs include:

- (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.

130 CMR 422.410(B).

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.

See 130 CMR 422.412 (emphasis added).

As an ICO, however, United can provide more to members than MassHealth allows, but not less. According to the United One Care Member Handbook, United will provide PCA assistance provided in the form of cueing and/or monitoring, in addition to hands-on physical assistance. Exhibit 5 at 189.

The appeal is dismissed as to mobility – repositioning, mobility – transfers, bathing, dressing/undressing – upper body, medication, and transportation because at hearing, parties were able to resolve those disputes. The appellant agreed to the time approved for assistance with mobility – repositioning, mobility – transfers, dressing/undressing – upper body, and medication. United adjusted the time for bathing to 16 minutes per day, 7 days per week (110 minutes per week) and bathing transfers 10 minutes per day, 7 days per week (70 minutes per week). United also approved exception time of 60 minutes per day, 7 days per week to support the appellant’s daily clinic visits.

As to mobility – walking, the appeal is approved in part and denied in part. He is approved for 4.5 minutes per day, 7 days per week for walking inside, as he previously had. He is denied any additional time for assistance walking outside. The appellant’s testimony is credible and supports the need for additional time for both hands-on assistance and monitoring for walking inside his home. While the appellant has clearly improved since his last evaluation, the amount of time approved by United based on the May evaluation (1.5 minute per day inside) is unreasonable given the appellant’s needs and the number of times someone ambulates around their home on a given day. He is denied any additional time for assistance walking outside as there was insufficient testimony to support needing additional time going up and down the

stairs. He has been approved for time for other tasks, such as daily transportation to the methadone clinic, which provides mobility assistance to him while outside of the home.

The appeal is denied as to grooming – hair and personal hygiene. It is the appellant's burden to show that United's determination was in error and he has not done so here. The appellant's testimony did not sufficiently demonstrate that time was needed for these ADLs. Based on the appellant's testimony and the nurse evaluator's comments, the appellant is able to independently dress his upper body and grab and reach without difficulty, suggesting he can do tasks such as brush his teeth and shave. For these reasons, the appellant has not shown that time for assistance with hair and personal hygiene is medically necessary.

As to the request for additional time for dressing/undressing – lower body, the appeal is approved for 20 minutes per day, 7 days per week. The appellant's testimony is credible and supports the need for additional time for hands-on assistance with dressing and undressing his lower body. Due to his injuries and medical condition, it is very difficult and painful for the appellant to bend past his waist. He needs assistance with underwear, socks, pants, and shoes. He also has incontinence issues which results in additional clothing changes. He testified that it takes about 15 minutes to dress his lower body; however, that did not include time for undressing or additional clothing changes. For these reasons, the appellant has shown that additional time for assistance with dressing/undressing – lower body is medically necessary.

As to the request for additional time for toileting, the appeal is approved for 4 minutes, 8 times per day, 7 days per week. The appellant's testimony is credible and the time approved daily for toileting by United was insufficient given the number of times the appellant uses the bathroom and his need for clothing management and assistance on and off the toilet. He testified that he has three bowel movements per day and urinates more frequently than the average person due to his pelvis and bladder issues. For these reasons, the appellant has shown that additional time for assistance with toileting is medically necessary.

As to the request for additional time for meal preparation, the appeal is approved in part and denied in part. He is denied additional time for breakfast as documentation shows he is able to prepare food items such as cereal, snacks, and cold foods. He is approved for 10 minutes per day, 7 days per week for lunch and 20 minutes per day, 7 days per week for dinner. The appellant's testimony is credible and the time approved weekly for meal preparation by United was insufficient given his physical needs. While the appellant can perhaps help with some tasks while sitting at the kitchen table, the PCA must do the majority of the preparation and cooking due to the kitchen set up, the appellant's poor balance, his inability to stand for long periods, and his need for assistance moving around. For these reasons, appellant has shown that additional time for assistance with meal preparation for lunch and dinner is medically necessary.

As to the request for additional time with laundry, the appeal is approved for 60 minutes per week. There is no laundry available in his third-floor apartment and the washer and dryer are

located in the basement. He is physically unable to do the stairs and carry the laundry, so his PCA must do it all. Additionally, given his incontinence, he goes through extra clothing and his bed sheets must be changed and laundered about four times per week.

As to the request for housekeeping, the appeal is denied. The appellant has not demonstrated that additional PCA assistance with housekeeping takes longer than the time approved.

As to the request for shopping, the appeal is approved for 30 minutes per week. The appellant's testimony is credible and the time approved weekly for shopping by United was insufficient given his physical needs. He is unable to assist with shopping and the PCA must carry the groceries up to his third-floor apartment.

For these reasons, the appeal is approved in part, denied in part, and dismissed in part.

## **Order for United**

Approve the appellant for the following: 4.5 minutes per day, 7 days per week for walking inside; 20 minutes per day, 7 days per week for dressing/undressing – lower body; 4 minutes, 8 times per day, 7 days per week for toileting; 10 minutes per day, 7 days per week for meal preparation for lunch; 20 minutes per day, 7 days per week for meal preparation for dinner; 60 minutes per week for laundry; and 30 minutes per week for shopping. If not already done so, implement the adjustments made at hearing for bathing (16 minutes per day, 7 days per week); bathing transfers (10 minutes per day, 7 days per week); and medical appointments (35 minutes per week plus exception time of 60 minutes per day, 7 days per week). All approvals and adjustments should go retroactive to the beginning of the prior authorization period, June 17, 2025.

## **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.

## Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact United. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

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Alexandra Shube  
Hearing Officer  
Board of Hearings

MassHealth Representative: United Healthcare, Attn: Appeals & Grievances Committee, 1325  
Boylston Street, 11th Floor, Boston, MA 02215