

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2511936
Decision Date:	11/07/2025	Hearing Date:	09/16/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	N/A

Appearance for Appellant:
Pro se

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	Issue:	Prior Authorization – Personal Care Attendant (PCA) Services
Decision Date:	11/07/2025	Hearing Date:	09/16/2025
MassHealth’s Rep.:	Kelly Rayen, RN, Optum	Appellant’s Rep.:	Pro se
Hearing Location:	Quincy Harbor South	Aid Pending:	No

Authority

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

Jurisdiction

Through a notice dated 08/06/2025, MassHealth informed the appellant that it denied her request for authorization of personal care attendant (PCA) services because she does not have documented need for hands-on assistance with at least two activities of daily living (ADLs) (130 CMR 420.001; Exhibit 1). The appellant filed this appeal with the Board of Hearings in a timely manner on 08/13/2025 (130 CMR 610.015(B); Exhibit 2). MassHealth agency actions to suspend, reduce, terminate, or restrict a member's assistance are valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant’s request for PCA services.

Issue

Was MassHealth correct in denying the appellant’s request for PCA services?

Summary of Evidence

MassHealth was represented by a registered nurse employed by Optum, the contractor that makes the PCA decisions for MassHealth. The appellant represented herself in these proceedings. All parties appeared telephonically. Exhibits 1-4 were entered into the hearing record.

The MassHealth representative testified that on 07/31/2025, an initial prior authorization request (PA) for PCA services was submitted on the appellant's behalf by her PCA provider, [REDACTED] [REDACTED] [REDACTED]. (Provider). In the PA request, the provider requested 14 hours and 30 minutes (14:30) per week of day/evening PCA assistance of personal care attendant services for a period of one year. On 08/06/2025, MassHealth determined that the appellant does not have documented need for assistance with at least two activities of daily living (ADLs) and therefore denied the request for PCA services.

According to the documentation submitted by the PCA provider with the PA, the appellant has diagnoses that include [REDACTED] [REDACTED] [REDACTED], and she is unable to leave the home. Reports no recent hospitalization. She lives in the with her adult daughter and support dog (Exhibit 4).

As part of this initial evaluation, a report was submitted from the appellant's occupational therapist. The provider requested PCA time for the Activity of Daily Living (ADL) tasks of bathing, nail care, dressing and undressing, and assistance with medications. Additionally, the provider requested PCA time for assistance with the instrumental activities of daily living (IADL) tasks of meal preparation/clean-up, laundry and shopping.

Bathing

The appellant's provider requested 30 minutes per day (30 X 1 X 7) for assistance with bathing. The provider noted that the appellant's bathroom has bathtub, handheld shower, shower stool. The appellant requires assistance with bathing due to impaired mobility, impaired balance/reach/bending, dizziness. She reports that she requires assistance in/out of bathtub, assistance to wash/rinse/dry back, lower body, and difficult to reach areas. She reports she is able to wash her face and upper front torso (Exhibit 4).

The MassHealth representative testified that the appellant needs to contact MassHealth for an occupational therapist evaluation, a physical therapist evaluation and for durable medical equipment that may assist her with her ADL's. In this case, the appellant may be able to independently bath herself without the assistance of a PCA.

Grooming

The appellant's provider requested 5 X 1 X 7 for assistance with her nail care. The provider noted that the appellant reports that she is able to complete most grooming tasks; she reports that she

requires assistance with toenail care due to impaired balance/reach/bending and dizziness (Exhibit 4).

The MassHealth representative testified that the occupational therapist report included with the PA request stated that the appellant may need help with her toenails; however, she could go to the podiatrist for toe-nail trimming, or she can be taught to use available durable medical equipment to assist her to independently complete the task. The report also states that the appellant is independent with oral care, hair care, and applying lotion. The MassHealth representative testified that the appellant should have the functional ability to trim her toenails with some assistance from DME or a podiatrist.

Dressing/Undressing

The appellant's provider requested 6 X 1 X 7 for assistance with dressing and 4 X 1 X 7 for assistance with undressing. The provider notes that the appellant requires some assistance with dressing and undressing due to impaired mobility, impaired balance/reach/bending, dizziness. She reports that she requires assistance with all lower body dressing.

The MassHealth representative testified that the appellant needs assistance only with her lower extremities. She testified that MassHealth provides "dressing aids" that are devices that assist members with tasks such as dressing. She suggested the appellant contact MassHealth for assistance from an occupational therapist, a physical therapist, and to access the DME available at no cost to her.

Medication Planner – Fill

The appellant's provider requested 10 X 1 X 1 for assistance filling the appellant's medication planner. The provider noted that the appellant reports that she has two medication planners and requires assistance to fill them weekly. She reports she is able to take medication on her own. She was observed to be able to open med bottle, take out/put back a pill and recap bottle (Exhibit 4).

The MassHealth representative testified that the occupational therapist report attached to the PA request states the appellant is able to independently manage and fill her medication planner. She testified that since there is no evidence that the appellant has a fine motor impairment, there is no reason why the appellant would require assistance for this task.

The MassHealth representative concluded that there is no evidence that the appellant requires assistance with two or more ADL's, and as a result, the request for PCA services was denied. The appellant's needs may be met with an evaluation from a physical therapist, an occupational therapist and with DME available at no cost to the appellant.

The appellant represented herself in this matter. She testified that she is under the care of a psychiatrist. She argued that she is disabled, and she requires assistance with day-to-day activities.

She disputed some of the medications on the list provided by her PCA provider to MassHealth. The appellant receives assistance from her daughter; however, she works from 7:00 a.m. to 3:30 p.m. every day. The appellant's sister also assists her "for free."

For the task of bathing, the appellant testified that she requires "longer than 4 hours a day" of assistance for bathing, and 30 minutes to get dressed. She reports she can "open bottles of medications," but that "every day is different" because she sometimes "forgets to take her medications." She testified she "tried physical therapy," but her vertigo prevented her from participating in therapy. The appellant testified that her leg is numb that "goes down to her foot." She requests PCA assistance because she has "too many medical issues going on."

Findings of Fact

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

1. The appellant is a MassHealth member (Testimony; Exhibit 4).
2. The appellant is an adult who lives independently in the community. She has diagnoses that include [REDACTED] and unable to leave the home. Reports no recent hospitalization. She lives in the with daughter and support dog (Testimony; Exhibit 4).
3. On 07/31/2025, a prior authorization request (PA) for PCA services was submitted on the appellant's behalf by her PCA provider, [REDACTED]. (Provider). In the PA request, the provider requested 14 hours and 30 minutes (14:30) per week of day/evening PCA assistance of personal care attendant services for a period of one year (Testimony; Exhibit 4).
4. On 08/06/2025, MassHealth determined that the appellant does not have documented need for assistance with at least two activities of daily living (ADLs) and therefore denied the request for PCA services (Testimony; Exhibits 1 and 4).
5. A timely appeal was filed by the appellant on 08/13/2025 (Exhibit 2).
6. A fair hearing was held before the Board of Hearings on 09/16/2025 (Exhibit 3).
7. The appellant's provider requested 30 minutes per day (30 X 1 X 7) for assistance with bathing. The provider noted that the appellant's bathroom has bathtub, handheld shower, shower stool. The appellant requires assistance with bathing due to Impaired mobility, impaired balance/reach/bending, dizziness. The appellant reports that she requires assistance in/out

of bathtub, assistance to wash/rinse/dry back, lower body, and difficult to reach areas. She reports she is able to wash her face and upper front torso (Testimony; Exhibit 4).

8. The MassHealth representative, a registered nurse, testified that the appellant may have alternative options available to her to assist with bathing; specifically, the appellant might benefit from physical therapy, occupational therapy or with MassHealth-provided durable medical equipment.
9. The appellant's provider requested 5 X 1 X 7 for assistance with her nail care. The provider noted that the appellant reports that she is able to complete most grooming tasks; she reports that she requires assistance with toenail care due to impaired balance/reach/bending and dizziness (Exhibit 4).
10. The MassHealth representative testified that the appellant may be able to have her nail care performed by a podiatrist or she may be able to be taught to independently perform the task with therapy by a physical therapist or an occupational therapist.
11. The appellant's provider requested 6 X 1 X 7 for assistance with dressing and 4 X 1 X 7 for assistance with undressing. The provider notes that the appellant requires some assistance with dressing and undressing due to impaired mobility, impaired balance/reach/bending, dizziness. She reports that she requires assistance with all lower body dressing.
12. The appellant needs assistance only with dressing her lower extremities. MassHealth provides "dressing aids" that are devices that assist members with tasks such as dressing. The appellant may contact MassHealth for assistance from an occupational therapist, a physical therapist and to access the DME available at no cost to her.
13. The appellant's provider requested 10 X 1 X 1 for assistance filling the appellant's medication planner. The provider noted that the appellant reports that she has two medication planners and requires assistance to fill them weekly. The appellant reports she is able to take medication on her own. She was observed to be able to open med bottle, take out/put back a pill and recap bottle (Exhibit 4).
14. The occupational therapist report attached to the PA request states the appellant is able to independently manage and fill her medication planner. Also, there is no evidence that the appellant has a fine motor impairment.

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 requested personal care attendant (PCA) services from MassHealth. The appellant requested assistance with various ADLs and instrumental activities of daily living (IADLs).

The MassHealth representative testified that the appellant's needs may be met with physical therapy, occupational therapy and/or with durable medical equipment provided by MassHealth. MassHealth denied the request for PCA time based on its review of the documentation and its determination that the appellant does not need assistance with at least 2 activities of daily living

(ADLs).

MassHealth presented testimony that the appellant can be assisted with “tools,” in the form of durable medical equipment, which is a less costly alternative to PCA services. The MassHealth representative testified that the appellant may be able to independently perform the tasks with therapy from a physical therapist, occupational therapist and/or DME. The appellant responded that she is not able to participate in physical or occupational therapy because of her “vertigo.”

MassHealth determination that the appellant can live more independently if she has some or all of the above options, is credible and supported by the facts in the hearing record and the regulations. Any assistance the appellant may need is explicitly not covered, as it is assistance in the form of cueing, prompting, supervision, guiding, or coaching. MassHealth correctly determined the appellant does not have a documented need for assistance with 2 or more ADLs. MassHealth correctly denied the appellant’s PA Accordingly, 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

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