

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:

[REDACTED]

Appeal Decision:	Denied in part; Approved in part; Dismissed in part	Appeal Number:	2512255
Decision Date:	11/10/2025	Hearing Date:	September 23, 2025
Hearing Officer:	Brook Padgett		

Appellant Representatives:

[REDACTED]

MassHealth Representative:

Kelly Rayen, R.N.

Interpreter:

[REDACTED]

APPEAL DECISION

Appeal Decision:	Denied in part; Approved in part; Dismissed in part	Issue:	Prior Authorization PCA Services 130 CMR 450.204
Decision Date:	11/10/2025	Hearing Date:	September 23, 2025
MassHealth Rep.:	K. Rayen, R.N.	Appellant Reps.:	
Hearing Location:	Quincy		

Authority

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

Jurisdiction

The appellant received a notice dated July 28, 2025 stating: Your request for prior authorization for personal care attendant services has been modified. (Exhibit 1). The appellant filed this appeal timely on August 20, 2025. (130 CMR 610.015(B); Exhibit 2). Modification of a prior approval is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth modified the appellant's request for PCA services.

Issue

Did MassHealth correctly modify the appellant's request for 55.45 hours of PCA assistance to 51.30 hours as the request did not meet the requirements set forth in the medical necessity regulation?

Summary of Evidence

A MassHealth clinical appeals reviewer testified that on July 23, 2025, a PCA request was submitted by [REDACTED] asking for 55 hours and 45 minutes of PCA assistance per week. After review MassHealth approved 51 hours and 30 minutes per week of PCA services. The reviewer testified that the appellant is [REDACTED] years old with a primary diagnosis of

[REDACTED] autism, developmental delay, cognitive impairment, non-verbal, behavior disorder, ADHD, and dual incontinence. He lives with his family in a townhouse with large set of stairs to enter/exit from the street level and full set of stairs to access his bedroom and full bathroom. The appellant's father works long hours outside of the home while his mother cares for the children in the home, including three additional siblings (two with autism and special needs). The appellant attends school five days per week. The appellant's mother reports that she is unable to assist the appellant without help from another person due to her own condition as well as appellant's height, weight and physical limitations, along with tactile defensiveness and aggressive behaviors.

The MassHealth reviewer testified that six modifications were made to the PCA request: Mobility/Stairs, Transfers, Bathing, Dressing, Undressing, and Eating. The representative stated that the modifications were made as the requests exceeded the guideline for time ordinarily required for members with comparable physical needs and reflected assistance already being provided or required to be provided by family members. The representative did acknowledge the appellant has an IV port which requires additional attention when performing the activities of bathing, dressing and undressing.

The appellant's social worker representative responded that because of the appellant's increased height, weight, and aggressive behaviors, the time required for virtually every activity of daily living, including transfers, bathing, dressing, and eating is going to take more, not less time. The appellant requires weekly IV infusions that must be administered in home with assistance from two people due to the appellant's severe behaviors and risk for injury. The representative emphasized that the 51.5 hours per week authorized by MassHealth does not realistically reflect the true amount of time required to provide safe care for the appellant.

The appellant's mother testified through an interpreter and reiterated that her son is "very big and difficult to handle." The appellant's mother maintains she is unable to assist the appellant without help from another person due to her own condition as well as the appellant's height and weight, along with his tactile defensiveness and aggressive behaviors. The appellant's mother maintains the appellant requires 24/7 supervision, has no safety skills or awareness, and will ingest inedible objects. She reports frequent bladder and bowel incontinence, requiring multiple showers per day (often 2-3 showers to maintain cleanliness). The appellant's mother stated that because of the appellant's condition, every activity must be done slowly to prevent an escalation in his behavior, and maintains it takes 10 to 15 minutes to transfer the appellant from chair to chair. She stated that she herself cannot lift or manage him safely, especially given her own

physical limitations. The appellant's requires a maximum assist during ambulation with gait belt due to poor standing tolerance, unsteady gait, risk for falls, lack of safety skills/awareness. He is unable to self-propel his wheelchair/stroller for long distances and requiring maximum assistance with climbing or descending stairs (bedroom and full bathroom on second floor, or climbing and descending large set of stairs outside of home to get to bus stop on school days). While the appellant is able to reposition himself independently, he still requires occasional repositioning when experiencing side effects of medications.

The appellant submitted supportive documentation from [REDACTED] regarding the appellant's complex care needs and reliance on two-person assistance. (Exhibit 5).

After discussion, MassHealth reversed the modification for Mobility/Stairs which includes time requested for assistance getting on the school bus. MassHealth stated the modification of times regarding Transfer, Bathing, Dressing, Undressing and Eating would remain the same.

Findings of Fact

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

1. The appellant is a [REDACTED] years old with diagnoses including [REDACTED], autism, developmental delay, cognitive impairment, seizure disorder, ADHD, behavior disorder, and dual incontinence. (Exhibit 4).
2. The appellant is non-verbal, lacks safety awareness, ingests inedible objects, and requires a two-person assist for transfers and most ADLs due to his size, physical limitations, and aggressive behaviors. (Exhibit 4).
3. On July 23, 2025, [REDACTED] submitted a request for 55 hours and 45 minutes per week of PCA services for one year. (Exhibit 4).
4. On July 28, 2025, MassHealth reduced PCA time to 51 hours and 30 minutes per week. (Exhibit 4).
5. MassHealth reversed the modification for Mobility/Stairs and approved the time requested. (Testimony).
6. MassHealth's modifications included:
 - o **Transfers:** MassHealth reduced the request for time with transfers from 7 minutes x 6 times a day x 2 days a week to 7 minutes x 4 times a day x 2 days a week and 5 minutes x 6 times a day x 2 days a week to 5 minutes x 4 times a day x 5 days a week, as the request is longer than ordinarily required for an individual in the appellant's conditions. (Exhibit 4, pg. 19).
 - o **Bathing:** MassHealth reduced bathing time from 50 minutes x 1 time a day x 7 days a week to 45 minutes x 1 time a day x 7 days a week, as the request is longer than ordinarily required for an individual in the appellant's condition. (Exhibit 4, pg. 22).

- **Dressing:** MassHealth reduced the time requested for assistance with dressing from 25 minutes x 1 time a day x 7 days a week to 20 minutes a day x 1 time a day x 7 times a week, as the request is longer than ordinarily required for an individual in the appellant's condition. (Exhibit 4, pg. 26).
- **Undressing:** MassHealth reduced the time requested for assistance with undressing from 20 minutes x 1 time a day x 7 days a week to 18 minutes x 1 time a day x 7 days a week as the request is longer than ordinarily required for an individual in the appellant's condition. (Exhibit 4, pg. 26).
- **Eating:** MassHealth reduced the time requested for assistance with eating from 20 minutes x 3 times a day x 2 times a day and 20 minutes x 2 times a day x 5 times a week to 15 minutes x 3 times a day x 2 days a week and 15 minutes x 2 times a day x 5 times a week, as the request is longer than ordinarily required for an individual in the appellant's condition. (Exhibit 4, pg. 27).

Analysis and Conclusions of Law

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 (ADL'S) (130 CMR 422.410(A)).

130 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.

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

Per 130 CMR 422.412, 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, or a resident of a provider-operated residential facility subject to state licensure, such as a group home;
- (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;
- (G) surrogates, as defined in 130 CMR 422.402; or
- (H) PCA services provided to a member without the use of EVV as required by the MassHealth agency. (emphasis added).

The appellant’s mother and representative gave credible testimony regarding the appellant's care needs, explaining how his size, strength, and aggressive behaviors mean that ordinary caregiving tasks take longer and often require the assistance of two adults. This testimony is consistent with the provider documentation and supports the severity of the appellant's functional limitations.

MassHealth is bound by the regulatory framework. Under 130 CMR 450.204, services must be “reasonably calculated” to meet the member’s medical needs, and cannot exceed what is ordinarily required for someone with the member’s conditions unless extraordinary justification

is documented. The PCA Time-for-Tasks Guidelines provide a standardized framework for determining “ordinarily required” time.¹

MassHealth approved or the appellant agreed to the time requested for assistance with all activities with the exception of time requested for assistance with Transfers, Bathing, Dressing, Undressing and Eating. MassHealth modified these requests arguing that the time requested for assistance is longer than ordinarily required for someone with the appellant's physical needs. MassHealth maintains that although the appellant is dependent with his ADLs, the appellant is requesting more time than previously approved and above the average for an individual in his condition. MassHealth explained that while the appellant has significant needs, the documentation did not fully establish why times beyond guideline were required. Other than the testimony that the appellant is getting bigger and stronger, no detailed medical explanation beyond behavioral considerations was offered to justify the excess.

MassHealth reduced the PCA time for Transfers from 7 minutes x 6 times a day x 2 days a week to 7 minutes x 4 times a day x 2 days a week and 5 minutes x 6 times a day x 2 days a week to 5 minutes x 4 times a day x 2 days a week. Although the appellant's representative testified that it is getting more difficult to handle the appellant due to his size, there was insufficient evidence presented as to why an increase in the number of transfers was warranted. Transfer time is for movement between surfaces such as to and from bed, chair, or wheelchair and not for the time for the movement between locations in room, within the home, and outside. There is insufficient evidence that the appellant requires more than 4 transfers per day as the request is longer than ordinarily required for an individual in the appellant's condition, therefore the reduction in PCA time is upheld.

MassHealth reduced the PCA time for Bathing from 50 minutes x 1 time a day x 7 days a week to 45 minutes x 1 time a day x 7 days a week. The appellant is dependent to transfer in/out of the shower, and wash and dry his body and hair. The appellant must complete this task slowly to prevent increased agitation, anxiety and sensory behavior disorder. In addition special consideration must be made not to get his IV port wet or soiled during bathing. The appellant's representatives also credibly testified that it is getting more difficult to handle the appellant due to his size. The Time for Task guidelines allow 15 minutes for a minimal assist to 60 minutes for total dependency with this activity. The appellant's representatives presented credible testimony that it is more difficult to handle the appellant due to his size, and sensory behavior disorder along with the increased attention regarding the appellant's IV port. 50 minutes for assistance with Bathing is within the Time for Task guidelines and therefore the increase in PCA time for assistance with Bathing is approved.

MassHealth reduced the PCA time for Dressing from 25 minutes x 1 time a day x 7 days a week to 20 minutes a day x 1 time a day x 7 times a week and Undressing from 20 minutes x 1 time a

¹ The PCA Time-for-Tasks Guidelines provide average time ranges for ADLs such as bathing (15-60 minutes), dressing (7-30 minutes), undressing (5-20 minutes), transfers (3-10 minutes), and eating (10-30 minutes).

day x 7 days a week to 18 minutes x 1 time a day x 7 days a week. The Time for Task guidelines state the average range is 7-30 minutes for dressing and 5-20 minutes for undressing. The appellant's representatives presented credible testimony that the appellant is dependent with putting on, fastening, and taking off all items of clothing, including set-up. He requires an assist from two people with all routines that must be completed slowly to prevent increased agitation, anxiety and sensory behavior disorder. In addition, he needs special consideration so that the IV port does not get caught on clothing. 25 minutes to dress and 20 minutes to undress are within the Time for Task guidelines and therefore the increase in PCA time for Dressing and Undressing is approved.

MassHealth reduced the PCA time for Eating from 20 minutes x 3 times a day to 15 minutes x 3 times a day. The appellant is dependent on the use of utensils with a maximum assist with beverages. The appellant is able to manage finger foods, however he will stuff food into mouth and as at risk for choking and aspiration. The time for eating only consists of the time to physically assist the appellant to eat or drink and does not include time waiting for the appellant to chew and swallow or time between bites. There is insufficient evidence that the appellant requires more time for than 15 minutes per episode for eating as the request is longer than ordinarily required for an individual in the appellant's condition, therefore the reduction in PCA time is upheld.

After reviewing the testimony, documentary evidence, and applicable regulations, I conclude that MassHealth correctly modified the appellant's PCA prior authorization regarding Transfers and Eating. The reductions are consistent with the PCA Time-for-Tasks Guidelines and the requirements of 130 CMR 422.410 and 450.204 and this appeal is therefore denied in part. Regarding Bathing, Dressing, and Undressing, the appellant provided sufficient credible testimony that the requested increase in PCA time is consistent with the PCA Time-for-Tasks Guidelines and the requirements of 130 CMR 422.410 and 450.204 and this appeal is therefore approved in part.

MassHealth reversed the modification for Mobility/Stairs (time requested for assistance getting on the school bus) and this appeal is therefore dismissed in part.

Order for MassHealth

Rescind notice on appeal. Recalculate time after restoration of the requested time for Mobility/Stairs (which includes time for assistance with getting on the school bus), as agreed to at the hearing. Further, recalculate time after restoration of the requested time for Bathing, Dressing, and Undressing, in accordance with 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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this notice, you should contact Optum. 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.

Brook Padgett
Hearing Officer
Board of Hearings

cc: MassHealth Representative: PA Unit