

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Dismissed in Part; Denied in Part	<b>Appeal Number:</b>	2512311
<b>Decision Date:</b>	11/10/2025	<b>Hearing Date:</b>	09/22/2025
<b>Hearing Officer:</b>	Mariah Burns		

**Appearance for Appellant:**



**Appearances for MassHealth:**

Heather Adams, RN, Clinical Appeals Reviewer  
for Optum; Robin Brown OTL/R, Clinical  
Appeals Reviewer for 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>	Dismissed in Part; Denied in Part	<b>Issue:</b>	Prior Authorization; Personal Care Attendant Services
<b>Decision Date:</b>	11/10/2025	<b>Hearing Date:</b>	09/22/2025
<b>MassHealth's Reps.:</b>	Heather Adams, RN; Robin Brown, OTL/R	<b>Appellant's Rep.:</b>	[REDACTED]
<b>Hearing Location:</b>	Telephone (Quincy)	<b>Aid Pending:</b>	Yes

## 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 August 5, 2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services. *See* 130 CMR 450.024(A), 130 CMR 422.10(A)(7), 130 CMR 422.410(B)(1) and Exhibit 1. The appellant filed this appeal in a timely manner on August 22, 2025. *See* 130 CMR 610.015(B) and Exhibit 2. MassHealth's decision to restrict a member's assistance is valid grounds for appeal. *See* 130 CMR 610.032.

## Action Taken by MassHealth

MassHealth modified the appellant's prior authorization request for PCA services.

## Issue

The appeal issue is whether MassHealth acted within the scope of the regulations in modifying the appellant's prior authorization request for PCA services.

## Summary of Evidence

The appellant is a MassHealth member over the age of 65, who was assisted at the hearing by her adult daughter. MassHealth was represented by two clinical appeals reviewers, one of whom is a registered nurse and the other a licensed occupational therapist for Optum, which manages MassHealth's PCA program. All parties appeared at the hearing by telephone. The following is a summary of the testimony and evidence presented:

Prior to the notice on appeal, the appellant received 46 hours in weekly PCA assistance. The appellant suffers from diagnoses of a recent stroke, renal failure, asthma, chronic pain in the shoulders, hips, knees, feet, and back, macular degeneration and blindness to one eye, and a history of congestive heart failure and falls.<sup>1</sup> On July 21, 2025, MassHealth received a prior authorization request from [REDACTED] a Personal Care Services Management (PCM) agency, on the appellant's behalf for a re-evaluation of services. The request was for a total of 46 hours and 15 minutes of PCA assistance per week. On August 5, 2025, MassHealth modified the request and approved the appellant for 41 hours and 45 minutes of weekly assistance with dates of service from August 30, 2025, to August 29, 2026.

Modifications were made in the areas of mobility, bathing, and special toileting transfers. After the hearing, the parties agreed to the following modifications:

- **Mobility:** five minutes, six times per day, seven days per week;
- **Bathing:** 43 minutes per day, seven days per week.

Thus, after the hearing, the only dispute remained over special toileting transfers. The appellant requested 15 minutes, two times per day, four days per week for that task, and the request reported that the appellant requires two-person assistance with toileting transfers. One of the MassHealth representatives testified that she has an abundance of experience with helping individuals get on and off the toilet. She reported that, in her experience, the special toileting transfer is for people who are severely disabled and require extra assistance sitting down or standing up, and often for members who require special equipment to use the toilet, such as a lift. She stated that this category is just for getting on and off the toilet, as time to get into and out of the bathroom is accounted for in the mobility transfer section of the request, and that, in her experience, it should take someone without a severe physical disability approximately 30 seconds to safely descend onto the toilet, and a similar time to stand back up.

The appellant has been approved for all requested assistance with mobility transfers and toileting. The appellant's representative testified that it only takes one person to get the appellant onto the

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<sup>1</sup> This is not an extensive list of the appellant's conditions or symptoms, all of which can be found at Exhibit 5 at 14-15 and are hereby incorporated by reference.

toilet, and that the PCA helps her turn and plant her feet, then helps her sit down and stand up before and after using the toilet. She estimated that it takes about three to five minutes, and that the appellant uses the toilet approximately 10 times per day.

## Findings of Fact

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

1. The appellant is an adult MassHealth member under the age of 65 who suffers from relevant diagnoses of a recent stroke, renal failure, asthma, chronic pain in the shoulders, hips, knees, feet, and back, macular degeneration and blindness to one eye, and a history of congestive heart failure and falls. Exhibit 4, Exhibit 5 at 14-15.
2. On July 31, 2025, MassHealth received a prior authorization request from [REDACTED] on the appellant's behalf for a re-evaluation of services, requesting a total of 46 hours and 15 minutes of PCA assistance per week. Testimony, Exhibit 5 at 42. On August 5, 2025, MassHealth modified the request and approved the appellant for 41 hours and 45 minutes of weekly assistance with dates of service from August 30, 2025, to August 29, 2026. Testimony, Exhibit 1.
3. The specific modifications were made in the areas of mobility transfers, bathing, and special toileting transfers. Exhibit 1.
4. After the hearing, the parties agreed to the following modifications:
  - **Mobility:** five minutes, six times per day, seven days per week;
  - **Bathing:** 43 minutes per day, seven days per week.

Testimony.

5. The appellant requested 15 minutes, two times per day, four days per week for assistance with special toileting transfers. The appellant requires physical assistance turning, planting her feet, descending onto the toilet, and standing up. Testimony. MassHealth denied this request after finding that the appellant does not require using any special equipment to get onto and off the toilet. Exhibit 1, Testimony.

## Analysis and Conclusions of Law

MassHealth requires providers to obtain prior authorization before administering certain medical services. 130 CMR 450.303 and 130 CMR 420.410. PCA services fall into this category, and the regulations governing prior authorization for such services are found at 130 CMR 422 et seq. MassHealth will authorize coverage of PCA services when:

- (1) The PCA services are authorized for the member in accordance with 130 CMR 422.416.
- (2) The member's disability is permanent or chronic in nature and impairs the member's functional ability to perform [Activities of Daily Living (ADLs)] and [Instrumental Activities of Daily Living (IADLs)] without physical assistance.<sup>2</sup>
- (3) The member, as determined by the PCM agency, requires physical assistance with two or more of the ADLs as defined in 130 CMR 422.410(A).
- (4) The MassHealth agency has determined that the PCA services are medically necessary.

130 CMR 422.403 (C). It is undisputed that the appellant is a MassHealth member eligible to receive PCA services. However, in addition to meeting those categorical criteria, all PCA services must be medically necessary for prior authorization to be approved. A service is determined to be 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...

...Medically necessary services must be of a quality that meets professionally recognized standards of health care, and must be substantiated by records including evidence of such medical necessity and quality.

130 CMR 450.204(A)-(B).

An appellant bears the burden of proof at fair hearings "to demonstrate the invalidity of the administrative determination." *Andrews v. Division of Medical Assistance*, 68 Mass. App. Ct. 228, 231 (2006). The fair hearing decision, established by a preponderance of evidence, is based upon "evidence, testimony, materials, and legal rules, presented at hearing, including the MassHealth

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<sup>2</sup> ADLs include assistance with mobility, medications, bathing or grooming, dressing or undressing, passive range of motion, and toileting, while IADLs include household services (such as laundry, shopping, and housekeeping), meal preparation and clean-up, transportation, and other special needs codified in the regulations. 130 CMR 422.410(A) and (B).

agency's interpretation of its rules, policies and regulations." 130 CMR 610.085(A). The purpose of a fair hearing before the Board of Hearings is to allow "dissatisfied applicants, members, or nursing facility residents to have administrative review of certain *actions or inactions on the part of the MassHealth agency* and of determinations by a MassHealth managed care contractor." 130 CMR 610.001(A)(1) (emphasis added).

In this case, as the MassHealth representative and the appellant agreed as to the approved hours for assistance with mobility transfers and bathing, the appeal with respect to those tasks has resolved and is hereby dismissed in part. MassHealth is ordered to modify the appellant's approved hours to include the following:

- **Mobility Transfers:** five minutes, six times per day, seven days per week;
- **Bathing:** 45 minutes per day, seven days per week.

Thus, at issue in this case is whether the appellant met her burden of proof in establishing that she is entitled PCA assistance with special toileting transfers.

The MassHealth regulations define assistance with mobility as "physically assisting a member who has a mobility impairment that prevents unassisted transferring, walking, or use of prescribed durable medical equipment," while toileting is "physically assisting a member with bowel or bladder needs." 130 CMR 422.410(A)(1) and (7). In this case, the MassHealth representative credibly testified that, based on her years of experience, the standard of care with regards to special toileting transfers typically involves someone who requires special equipment to get onto and off the toilet. There is no evidence in the record that the appellant requires such special equipment to use the bathroom. As such, all assistance the appellant requires to get to and use the bathroom is accounted for in her mobility and toileting requests, which MassHealth has approved in full. If the appellant feels that she requires more assistance with toileting than her personal care management agency requested, she may submit a request for an adjustment to her current prior authorization approval pursuant to 130 CMR 422.416(B).

Based on the evidence before me, I find that the appellant has not met her burden of proof in demonstrating that she is entitled to PCA assistance with special toileting transfers. The appeal is therefore denied with respect to that task.

For the foregoing reasons, the appeal is hereby dismissed in part and denied in part.

## **Order for MassHealth**

Remove Aid Pending and modify the appellant's approved hours for PCA assistance to include the following:

- **Mobility Transfers:** five minutes, six times per day, seven days per week;
- **Bathing:** 45 minutes per day, seven days per week.

## **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 your MassHealth Enrollment Center. 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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Mariah Burns  
Hearing Officer  
Board of Hearings

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