

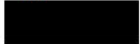
**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Approved in Part; Dismissed in Part; Denied in Part	<b>Appeal Number:</b>	2513119
<b>Decision Date:</b>	1/14/2026	<b>Hearing Date:</b>	10/28/2025
<b>Hearing Officer:</b>	Mariah Burns		

**Appearance for Appellant:**



**Appearance for MassHealth:**

Kelly Rayen, RN 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>	Approved in Part; Dismissed in Part; Denied in Part	<b>Issue:</b>	Prior Authorization; Personal Care Attendant Services
<b>Decision Date:</b>	1/14/2026	<b>Hearing Date:</b>	10/28/2025
<b>MassHealth's Rep.:</b>	Kelly Rayen, RN	<b>Appellant's Rep.:</b>	Pro se
<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 18, 2025, MassHealth modified the appellant's prior authorization request for renewal of personal care attendant 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 September 9, 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 renewal of personal care attendant (PCA) services.

## Issues

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

## Summary of Evidence

The appellant is an adult MassHealth member under the age of 65 who currently receives PCA services through MassHealth and was represented by his mother and legal guardian. MassHealth was represented by a clinical appeals reviewer and registered nurse 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:

The appellant suffers from primary diagnoses of dementia and Down Syndrome. He is non-ambulatory, nonverbal, legally blind, and has a history of seizures and incontinence.<sup>1</sup> He resides in a home with his mother and receives 10 weekly hours of PCA assistance provided by the Massachusetts Department of Developmental Services (DDS). Prior to the notice at issue, the appellant received 51 hours and 45 minutes of weekly PCA assistance through MassHealth. On July 1, 2025, a provider from the personal care management agency [REDACTED] conducted an in-home evaluation and assessment of the appellant's needs for PCA services.

On August 11, 2025, MassHealth received a prior authorization request submitted by [REDACTED] on the appellant's behalf for renewal of services, based on the in-home evaluation, requesting a total of 53 hours of PCA assistance per week. On August 27, 2025, MassHealth modified the request and approved the appellant for 48 hours of PCA assistance for with dates of service from September 19, 2025, to September 18, 2026.

Modifications were made in the areas of: wheelchair mobility, bathing, eating, bladder care, housekeeping, and shopping. At the hearing, the parties agreed to the following modifications:

- **Wheelchair mobility:** appellant accepts MassHealth's modification of 2 minutes, 6 times per day, 7 days per week;
- **Bladder care:** 10 minutes, 7 times per day, 2 days per week (10 minutes, 8 times per day, 5 days per week previously approved on days not covered by DDS);
- **Housekeeping:** 45 minutes per week;

Thus, after the hearing, disputes remained over assistance with bathing, eating, and shopping. Largely at issue is the fact that the appellant receives an additional 10 hours of weekly PCA assistance through DDS. MassHealth contends that much of the time that was requested but not approved could be covered through the assistance provided by DDS. As part of the prior authorization request, the appellant did not submit a schedule of services provided by the DDS PCA. The appellant's representative reported that one of the PCAs works 50 hours per week. He is paid the 10 hours of approved DDS services, and the remainder of his hours are paid through the

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

MassHealth-approved services.

The prior authorization request distinguished between the tasks completed by the DDS services and those not and was adjusted for MassHealth services accordingly. Specifically, the requests for dressing and bladder care were modified to five days per week, and the comments stated: “Consumer’s DDS PCA is currently dressing consumer 2x weekly, therefore time for dressing adjusted accordingly” and “PCA from DDS assists with 1 toileting episode, 2 days per week – time for bladder care adjusted accordingly.” See Exhibit 5 at 25 at 28. The request made no other reference to any assistance provided by the PCA from DDS.

### **Bathing**

The appellant requested 40 minutes per day, 7 days per week for a morning bath, and 15 minutes per day for a quick evening wash. MassHealth approved the evening wash, and approved 40 minutes per day, 5 days per week for a morning bath because the requested services are duplicative of those provided by DDS. The appellant’s representative reported that the appellant gets a daily shower due to incontinence.

### **Eating**

The appellant requested 12 minutes, 3 times per day, 7 days per week for assistance with eating. MassHealth approved the request for 12 minutes, 3 times per day, 5 days per week and 12 minutes, 2 times per day, 7 days per week, on the grounds that the DDS-provided services can cover feeding the appellant in the morning two days per week. The appellant’s prior authorization request did not state that DDS covers any assistance with eating.

### **Shopping**

The appellant requested 45 minutes per week for assistance with grocery shopping. MassHealth denied the request on the grounds that the appellant’s mother and legal guardian is responsible for instrumental activities of daily living (IADLs). The appellant’s mother reported that one of the appellant’s PCAs plans his meals for the week and does the shopping solely for the appellant at a store in-town once per week. The appellant’s prior authorization request states that the appellant’s mother continues to work full time, five days per week. MassHealth offered to approve 30 minutes per week for assistance with shopping, which the appellant asked the hearing officer take under advisement.

## **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 primary diagnoses of dementia and Down Syndrome. He is non-ambulatory, nonverbal, legally blind, and has a history of seizures and incontinence and a host of other conditions. Exhibit 4, Exhibit 5 at 14-15. He resides with his mother, who is his legal guardian and works full-time, five days per week. Testimony, Exhibit 5 at 36.

2. On July 1, 2025, a provider from the personal care management agency [REDACTED] conducted an in-home evaluation and assessment of the appellant's needs for PCA services. Exhibit 5 at 13-46. On August 11, 2025, MassHealth received a prior authorization request submitted by [REDACTED] on the appellant's behalf for renewal of services, based on that evaluation, requesting a total of 53 hours of PCA assistance per week. On August 27, 2025, MassHealth modified the request and approved the appellant for 48 hours of PCA assistance for with dates of service from September 19, 2025, to September 18, 2026. Testimony, Exhibit 1, Exhibit 5 at 44-45.

3. The specific modifications were made in the areas of assistance with wheelchair mobility, bathing, eating, bladder care, housekeeping, and shopping. Exhibit 1.

4. After hearing testimony, MassHealth and the appellant agreed to the following PCA assistance:

- **Wheelchair mobility:** appellant accepts MassHealth's modification of 2 minutes, 6 times per day, 7 days per week;
- **Bladder care:** 10 minutes, 7 times per day, 2 days per week (10 minutes, 8 times per day, 5 days per week previously approved on days not covered by DDS);
- **Housekeeping:** 45 minutes per week.

Testimony.

5. The appellant receives 10 hours per week in PCA services through the Department of Developmental Services (DDS). Exhibit 5 at 15. The individual who provides those services works for the appellant approximately 50 hours per week and is also paid by [REDACTED] through the services provided by MassHealth. Testimony. The appellant's prior authorization request to MassHealth did not include a specific schedule for the DDS services, but the request specifically stated that the DDS PCA provides assistance with dressing and bladder care one time per day, two days per week. Exhibit 5 at 25 and 28.

6. The appellant requested 40 minutes per day, 7 days per week for a morning bath, and 15 minutes per day for a quick evening wash. Exhibit 5 at 22. MassHealth approved the evening wash, and approved 40 minutes per day, 5 days per week for a morning bath on the grounds that the requested services are duplicative of those provided by DDS. Exhibit 1, Testimony. The appellant's prior authorization request made no reference to any DDS-covered assistance with

bathing. Exhibit 5 at 22.

7. The appellant requested 12 minutes, 3 times per day, 7 days per week for assistance with eating. Exhibit 5 at 26. MassHealth approved the request for 12 minutes, 3 times per day, 5 days per week and 12 minutes, 2 times per day, 7 days per week, on the grounds that the DDS-provided services can cover feeding the appellant in the morning two days per week. Exhibit 1, Testimony. The appellant's prior authorization request made no reference to any DDS-covered assistance with eating. Exhibit 5 at 26.

8. The appellant requested 45 minutes per week for assistance with grocery shopping. Exhibit 5 at 38. MassHealth denied the request on the grounds that the appellant's mother and legal guardian is responsible for instrumental activities of daily living (IADLs). Exhibit 1, Testimony. One of the appellant's PCAs plans his meals for the week and does the shopping solely for the appellant at a store in-town once per week. Testimony. MassHealth offered to approve 30 minutes per week for assistance with shopping. 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). Members who wish to renew their PCA services must comply with the following process:

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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).

To ensure the continuation of PCA services, PCM agencies must request prior authorization from the MassHealth agency at least 21 calendar days before the expiration date of the current prior authorization period. The PCM agency must include in its prior authorization request the documentation described in 130 CMR 422.416(A). The MassHealth agency will continue to pay for PCA services during its review of the new PA request only if the MassHealth agency has received the new prior authorization request at least 21 calendar days prior to the expiration of the current prior authorization period. If the MassHealth agency does not receive the new prior authorization request at least 21 calendar days before the expiration date, the MassHealth agency may stop payment for PCA services after the expiration date.

130 CMR 422.416(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.

...Additional requirements about the medical necessity of MassHealth services are contained in other MassHealth regulations and medical necessity and coverage guidelines.

130 CMR 450.204(A)-(B), (D).

As part of the PCA program, MassHealth does not cover certain activities, including, but not limited

to “recreational services...medical services available from other MassHealth providers...assistance provided in the form of cueing, prompting, supervision, guiding, or coaching....[or] services provided by family members.” 130 CMR 422.412(A),(B),(C) and (F). When determining the appropriate amount of physical assistance required by a MassHealth member, the following assumptions are made:

(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.

.....

(3) The MassHealth agency will consider individual circumstances when determining the number of hours of physical assistance that a member requires for IADLs.

130 CMR 422.410(C).

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 agency’s interpretation of its rules, policies and regulations.” 130 CMR 610.085(A).

In this case, as the MassHealth representative and the appellant agreed as to the approved hours for wheelchair mobility, bladder care, and housekeeping, the appeal with respect to those tasks has resolved and is hereby dismissed in part. As the appellant accepted the modifications made by MassHealth for wheelchair mobility, MassHealth is ordered to modify the appellant’s approved hours to include the following, as agreed to at the hearing:

- **Bladder Care:** 15 minutes per instance, 7 instances per day, 2 days per week (in addition to time already approved the remaining 5 days per week);
- **Housekeeping:** 45 minutes per week.

Thus, remaining at issue in this case is whether the appellant met his burden of proof in establishing medical necessity for more PCA time than MassHealth approved for assistance with bathing, eating, and shopping.

### **Bathing and Eating**

The appellant argues that he is entitled to assistance with bathing 40 minutes, once per day, 7 days per week, and assistance with eating 12 minutes, 3 times per day, 7 days per week. MassHealth agrees with the duration of each instance of each task, and instead contends that

these services could be provided through DDS one time per day, two days per week. MassHealth's position is not persuasive. In reviewing the appellant's prior authorization request, MassHealth appears to have arbitrarily selected two tasks and decided that they can be provided by DDS several times per week without any evidence to suggest that this is the case. The modifications made by MassHealth do not add up to the 10 total PCA hours provided by DDS, so it is unclear why MassHealth amended some tasks, and not others, and how those amended tasks were chosen.

Furthermore, there is no evidence that the types of PCA services covered by DDS, or the requirements to qualify for those benefits, are the same as those covered by MassHealth. The evaluator from [REDACTED] who was made aware of the appellant's needs and of the services provided by DDS, specifically indicated which MassHealth-covered services were duplicative of those covered by DDS, and amended the request accordingly. That there was no note that DDS covers assistance with bathing and eating is the clearest evidence that the request is not duplicative. Therefore, I find that the appellant has met his burden of proof that he requires 40 minutes, one time per day, 7 days per week for assistance with bathing and 12 minutes, 3 times per day, for assistance with eating. The appeal is APPROVED with respect to those tasks.

### **Shopping**

MassHealth denied the appellant's request for 45 weekly minutes of shopping and offered 30 minutes at the hearing. The appellant argues that he requires the full amount of time requested because the PCA shops exclusively for the appellant based on a meal plan that is created for him, and because the appellant's mother and legal guardian works full time. However, the appellant did not provide any evidence as to why 30 minutes is not sufficient. His mother testified that the store is in their town, and the shopping is done once per week. Therefore, I find that the appellant has not met his burden of proof that he requires more than 30 minutes per week for PCA assistance with shopping. The appeal is therefore APPROVED with respect to the 30 minutes offered by MassHealth at the hearing, but DENIED with respect to the appellant's full request.

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

## Order for MassHealth

Modify the appellant's approved PCA assistance to reflect the following hours, retroactive to the start date of service of September 19, 2025:

- **Bathing:** 40 minutes, one time per day, 7 days per week (in addition to 15 minutes per day already approved);
- **Bladder Care:** 15 minutes per instance, 7 instances per day, 2 days per week (in addition to time already approved the remaining 5 days per week);
- **Eating:** 12 minutes, 3 times per day, 7 days per week;
- **Housekeeping:** 45 minutes per week;
- **Shopping:** 30 minutes per week.

Remove Aid Pending.

## 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

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