

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	DENIED	<b>Appeal Number:</b>	2513223
<b>Decision Date:</b>	12/8/2025	<b>Hearing Date:</b>	10/15/2025
<b>Hearing Officer:</b>	Kenneth Brodzinski		

**Appearance for Appellant:**

Pro se

**Appearance for MassHealth:**

Robin Brown, OTR/L



*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>	DENIED	<b>Issue:</b>	Prior Authorization - PCA
<b>Decision Date:</b>	12/8/2025	<b>Hearing Date:</b>	10/15/2025
<b>MassHealth's Rep.:</b>	Robin Brown, OTR/L	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Quincy		

## Authority

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

## Jurisdiction

Through notice dated August 29, 2025, MassHealth denied an initial request for prior authorization for Personal Care Attendant (PCA) services (Exhibit A). Appellant filed this appeal in a timely manner on September 11, 2025 (see 130 CMR 610.015(B) and Exhibit A). Denial of prior authorization for assistance constitutes valid grounds for appeal (see 130 CMR 610.032).

## Action Taken by MassHealth

MassHealth denied an initial request for prior authorization for PCA services.

## Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied Appellant's initial request for prior authorization for PCA services

## Summary of Evidence

Both parties appeared by telephone. MassHealth submitted a packet of documentation including copies of the subject prior authorization request and the supporting nurse's evaluation and occupational therapy report (Exhibit B). Appellant did not file any documentation other than her fair hearing request (Exhibit A).

MassHealth was represented by a Registered Occupational Therapist and clinical appeals reviewer who testified that Appellant is a woman in her early [REDACTED] with a primary diagnosis of: fibromyalgia, fatty liver syndrome, lumbar degenerative disk disease, sciatica, depression, PTSD, OCD, Bipolar, anxiety, and pain in her back, right knee and shoulder. Appellant also has severe coccyx pain that may be related to a fracture. Appellant resides alone and has no outside services.

Functionally, Appellant is able to ambulate independently with a cane. She is prone to stumbling but has no reported falls. According to the nurse's evaluation and the occupational therapy report that accompanied the request, Appellant is unable to reach with her dominant right arm, bend or stand longer than 5 minutes without support. Appellant would benefit from a raised toilet seat, a bedside rail, a shower chair and a long-handled reacher.

The subject request was filed on August 20, 2025 and denied on August 29, as the reviewer determined that the documentation submitted for review did not support a finding that Appellant has two unmet ADL needs, which is required to qualify for the PCA program. The reviewer was able to identify other less-costly options that had not been considered.

The MassHealth representative testified that Appellant sought assistance with the following ADL's: transfers (bed); bathing and grooming - nail care, showering, washing hair, applying lotions; LE dressing and undressing; and toileting – bowel and bladder. The MassHealth representative reviewed each of these areas of assistance along with Appellant's documented physical limitations and explained for each how yet-to-be-tried adaptive equipment could meet Appellant's needs. The Masshealth representative also testified that the cost for the adaptive equipment is less than the cost of providing PCA services.

According to the MassHealth reviewer, Appellant would need to trial the following equipment: a bed bar to assist with bed transfers; adaptive long-handles to assist with shaving and applying lotions, a long handled hair brush and also learning to brush hair with functioning non-dominant hand, a raised height toilet seat along with a bidet attachment for bowel and balder care; adaptive nail clippers as well as relying on podiatry services (also nail care is not a daily need); a shower chair along with long-handle sponge and long towels and a "hip kit" which contains adaptive equipment used to help Appellant dress and undress her lower body where conditions limit her ability to reach and bend.

Lastly, the Masshealth representative testified that Appellant needs to schedule a visit with an occupational therapist who can identify the types of devices that could help her function independently in her home and instruct her how to use the devices.

Appellant discussed her functional limitations and pain and how they impede her ability to perform a number of the tasks that were discussed. She acknowledged that she recently acquired a shower chair, but still had difficulty reaching all parts of her body to shower and wash her hair. She thought the bed bar would be helpful. Appellant also agreed that she did not require much help with bowel and bladder care. Appellant stated that she was not familiar with most of the other devices and equipment that were discussed and was receptive to consulting with an occupational therapist.

## **Findings of Fact**

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant is a woman in her early ■■■ with a primary diagnosis of: fibromyalgia, fatty liver syndrome, lumbar degenerative disk disease, sciatica, depression, PTSD, OCD, Bipolar, anxiety and pain in her back, right knee and shoulder.
2. Appellant also has severe coccyx pain that may be related to a fracture.
3. Appellant resides alone and has no outside services.
4. Functionally, Appellant is able to ambulate independently with a cane; she is prone to stumbling but has no reported falls.
5. According to the nurse's evaluation and the occupational therapy report that accompanied the request, Appellant is unable to reach with her dominant right arm, bend or stand longer than 5 minutes without support.
6. According to the occupational therapy report, Appellant would benefit from a raised toilet seat, a bedside rail, a shower chair and a long-handled reacher.
7. The subject request was filed on August 20, 2025 and denied on August 29, upon determining that the documentation submitted for review did not support a finding that Appellant has two unmet ADL needs
8. Appellant sought assistance with the following ADL's: transfers (bed); bathing and grooming - nail care, showering, washing hair, applying lotions; LE dressing and undressing; and toileting – bowel and bladder.

9. There is yet-to-be-tried adaptive equipment that could meet Appellant's needs for each of these areas of assistance.
10. The cost for the adaptive equipment is less than the cost of providing PCA services.
11. Applicable equipment includes a bed bar to assist with bed transfers; adaptive long-handles to assist with shaving and applying lotions, a long handled hair brush and also learning to brush hair with functioning non-dominant hand, a raised height toilet seat along with a bidet attachment for bowel and bladder care; adaptive nail clippers as well as relying on podiatry services (also nail care is not a daily need); a shower chair along with long-handle sponge and long towels and a "hip kit" which contains adaptive equipment used to help Appellant dress and undress her lower body where conditions limit her ability to reach and bend.

## Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). On this record, Appellant has not met her burden.

Appellant was both sincere and credible. Unfortunately, her testimony did not provide information capable of justifying the reversal of MassHealth's determination that her current application for PCA services fails to demonstrate the medical necessity for assistance with at least two ADLs.

MassHealth regulation 130 CMR 422.403 in pertinent part states (emphasis added):

*(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.

MassHealth regulation 130 CMR 450.204 regarding medical necessity states (emphasis added):

Medical Necessity

*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.*

ADLs are specifically defined in the above-cited regulation. They do not include shopping, laundry, meal preparation or housekeeping. Those tasks constitute IADL's (instrumental activities of daily living) for MassHealth PCA program purposes. The controlling factor here is whether PCA services are medically necessary to assist Appellant with a minimum of two ADLs.

This record shows that MassHealth properly applied the controlling regulations in denying PCA assistance with each of the ADL's identified in Appellant's request. For each area of assistance, MassHealth identified adaptive equipment that could be used to overcome Appellant's current degree of physical limitation. In order to satisfy the medical necessity regulation cited above, Appellant would need to try this equipment and demonstrate that it does not fully satisfy her needs before MassHealth could determine that PCA services are medically necessary.

For the foregoing reasons, the appeal is denied.

If she has yet to do so, Appellant should consult with an occupational therapist to identify, obtain and learn to use adaptive equipment that could improve her daily independent functioning in the home. The use and duration of use should be documented. Should Appellant find that despite the use of adaptive equipment, she still requires physical hands-on assistance with at least two ADL's she can reapply for PCA services at that time and document the trials.

## **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.

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Kenneth Brodzinski  
Hearing Officer  
Board of Hearings

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