

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved in part; Dismissed in part	Appeal Number:	2513489
Decision Date:	11/14/2025	Hearing Date:	10/09/2025
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:



Appearance for MassHealth:

Via telephone:

Robin Brown, OTR/L & Clinical Appeals
Reviewer, 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:	Approved in part; Dismissed in part	Issue:	Prior Authorization – PCA
Decision Date:	11/14/2025	Hearing Date:	10/09/2025
MassHealth's Rep.:	Robin Brown	Appellant's Rep.:	██████████
Hearing Location:	Quincy Harbor South, Remote	Aid Pending:	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 September 5, 2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services (Exhibit 1). The appellant filed this appeal in a timely manner on September 15, 2025 (see 130 CMR 610.015(B) and Exhibit 2). Modification and/or denial of PCA hours 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 was correct in modifying the appellant's prior authorization request for PCA services.

Summary of Evidence

The MassHealth representative appeared via telephone and identified herself as a registered, licensed occupational therapist and clinical appeals reviewer. The appellant was represented at hearing via telephone by his mother who is his legal guardian.

The MassHealth representative offered the following through testimony and documentary evidence: the appellant is a [REDACTED] with primary diagnoses including [REDACTED]

[REDACTED] He lives at home with his mother, who is his legal guardian, and attends a day program five days per week. On September 2, 2025, the appellant's personal care management (PCM) agency, Arc of the South Shore, submitted a prior authorization for PCA services (re-evaluation) requesting 43 hours and 45 minutes per week for dates of service of October 27, 2025 through October 26, 2026. On September 5, 2025, MassHealth modified the request to 35 hours and 30 minutes per week. MassHealth made modifications related to PCA assistance with bathing; grooming – shaving; bladder care; other healthcare needs (meal preparation – lunch); and laundry.

Based on testimony at hearing, MassHealth and the appellant agreed to the following PCA time for grooming – shaving: 10 minutes, 1 time per day, 6 days per week. The appellant agreed to MassHealth's modification of bladder care and PCA time for bladder care remains at 10 minutes, 7 times per day, 2 days per week and 10 minutes, 5 times per day, 5 days per week. Therefore, since parties resolved the disputes for shaving and bladder care, the appeal is dismissed as to those activities of daily living (ADLs).

MassHealth testified that at the time of hearing, the appellant was receiving 39 hours and 30 minutes per week of PCA assistance, as he did last year. Once the new prior authorization period begins on October 27, 2025, he will continue to receive 39 hours and 30 minutes per week through aid pending during the appeal process.

Bathing

The appellant requested 25 minutes, 2 times per day, 7 days per week for PCA assistance with bathing. MassHealth modified it to 25 minutes, 1 time per day, 7 days per week because the time requested is longer than ordinarily required for someone with his documented needs. The MassHealth representative stated that MassHealth typically would approve some time (around 10 minutes) for a quick wash in addition to a daily shower, but not time for a second full shower. She was willing to approve an additional 10 minutes, 1 time per day, 7 days per week for a quick wash to address odor and hygiene.

The appellant's mother testified that he is incontinent of both bladder and bowel. In the morning, he takes a full shower. Most days, he wakes up having had an accident. In the afternoon, he is busy with activities and gets sweaty. He also has accidents at his day program and comes home wet on a daily basis. Thus, he needs a second full shower at the end of the day.

Other Healthcare Needs – Meal Preparation

The appellant requested 30 minutes, 1 time per day, 5 days per week for meal preparation of lunch to bring to the appellant's day program. The MassHealth representative explained that meal preparation should have been requested under the instrumental activities of daily living (IADLs) section for meal preparation, not under other healthcare needs. MassHealth did not approve any time for lunch meal preparation because when a member lives with a legal guardian, the legal guardian is responsible for meal preparation and other IADLs. MassHealth approved 15 minutes, 1 time per day, 5 days per week for meal preparation of breakfast because the appellant's guardian works full time outside of the home; however, she could prepare lunch the night before.

The appellant's mother explained that the appellant needs to bring his lunch to his day program every day. She has long hours at work and a long commute to and from the city. Her work hours are 7:00AM to 7:00PM, but she needs to leave the house at 5:30AM to get to work on time and doesn't get home until around 8:30PM. His lunch varies every day. Once per week, it is a sandwich, but the other days it is something that requires cooking, such as chicken and rice.

Laundry

The appellant requested 90 minutes per week for PCA assistance with laundry. MassHealth approved 30 minutes per week which should be enough for two loads of laundry. MassHealth did not approve the request in full because he lives with his mother who is his legal guardian. IADLs, such as laundry, are the responsibility of family members.

As stated above, the appellant's mother works long hours and has a long commute. His mother testified that the appellant is incontinent of bowel and bladder. His sheets need to be changed every other day and he goes through multiple clothing changes a day due to his incontinence. He comes home wet from his day program every day. Because of his incontinence, his laundry must be done separately from the rest of the household. The appellant does not have a washer or dryer at her home and needs to go to a laundromat. The appellant's father is not involved in his life and his mother is his sole care provider.

Findings of Fact

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

1. The appellant, an adult male between ages 21 and 65, has primary diagnoses including symptoms and signs involving cognitive functions following nontraumatic subarachnoid hemorrhage, autism, cognitive deficit, impaired executive functioning, and developmental delays and lives with his mother who is legal guardian (Testimony and Exhibit 5).
2. On September 2, 2025, MassHealth received a prior authorization request for PCA services requesting 43 hours and 45 minutes per week of PCA assistance for dates of service October 27, 2025 through October 26, 2026 (Testimony and Exhibit 5).
3. On September 5, 2025, MassHealth modified the request to 35 hours and 30 minutes per week (Testimony and Exhibits 1 and 5).
4. MassHealth made modifications related to PCA assistance with bathing; grooming – shaving; bladder care; other healthcare needs (meal preparation – lunch); and laundry (Testimony and Exhibit 5).
5. At hearing, parties were able to resolve the disputes related to PCA assistance with grooming – shaving and bladder care (Testimony).
6. MassHealth approved 10 minutes, 1 time per day, 6 days per week for grooming – shaving (Testimony).
7. The appellant agreed to MassHealth’s modification of bladder care at 10 minutes, 7 times per day, 2 days per week and 10 minutes, 5 times per day, 5 days per week (Testimony).
8. The appellant seeks 25 minutes, 2 times per day, 7 days per week for PCA assistance with bathing (Testimony and Exhibit 5).
9. MassHealth modified the request to 25 minutes, 1 time per day, 7 days per week (Testimony and Exhibit 5).
10. Under Other Healthcare Needs, the appellant requested 30 minutes, 1 time per day, 5 days per week for meal preparation of lunch (Testimony and Exhibit 5).
11. MassHealth did not approve any time for meal preparation of lunch (Testimony and Exhibit 5).

12. The appellant seeks 90 minutes per week for PCA assistance with laundry (Testimony and Exhibit 5).
13. MassHealth modified the request to 30 minutes per week (Testimony and Exhibit 5).
14. The appellant is incontinent of bowel and bladder and requires multiple clothing changes daily. His sheets need to be changed every other day. The appellant does not have a washer or dryer in his home and must go to a laundromat. (Testimony).
15. The appellant's mother's work shifts are from 7:00AM to 7:00PM, but she needs to leave the house at 5:30AM to get to work on time and doesn't get home until around 8:30PM.

Analysis and Conclusions of Law

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 or grooming;
 - (d) dressing or undressing;
 - (e) range-of-motion exercises;
 - (f) eating; and
 - (g) toileting.
- (4) The Division has determined that the PCA services are medically necessary and has granted a prior authorization for PCA services.

See 130 CMR 422.403(C).

The requested services must also be medically necessary for the 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 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 the Division. Services that are less costly to the Division include, but are not limited to, health care reasonably known by the provider or identified by the Division 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.
- (B) 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. A provider must make those records, including medical records, available to the Division upon request. (See 42 U.S.C. 1396a(a)(30) and 42 CFR 440.230 and 440.260.)
- (C) A provider's opinion or clinical determination that a service is not medically necessary does not constitute an action by the MassHealth agency.

See 130 CMR 450.204

Pursuant to 130 CMR 422.410(A), 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.

Pursuant to 130 CMR 422.410(B), 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 Division as being instrumental to the health care of the member.

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.**

See 130 CMR 422.412 (emphasis added).

MassHealth will consider individual circumstances in determining the number of hours of PCA services that a member needs, but “[w]hen 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.” See 130 CMR 422.410(C). Family members include the spouse of the member, the parent of a minor member, including an adoptive parent, or any legally responsible relative. See 130 CMR 422.402.

The appeal is dismissed as to grooming – shaving and bladder care because at hearing, parties were able to resolve the disputes.

As to the appellant’s request for 25 minutes, 2 times per day, 7 days per week of PCA assistance with bathing, the appeal is approved. The appellant’s testimony was credible and demonstrated that he requires more time than what was approved given his physical needs and medical conditions. He is incontinent of bladder and bowel and sweats a lot, necessitating two showers per day. The appellant has shown that additional time for PCA assistance with bathing is medically necessary. For these reasons, he is approved for bathing as requested: 25 minutes, 2 times per day, 7 days per week.

As to the appellant’s request for 30 minutes, 1 time per day, 5 days per week for meal preparation for lunch (requested as “Other Healthcare Needs”), the appeal is approved. Even though as an IADL, meal preparation is typically the responsibility of the legal guardian, MassHealth considers individual circumstances in determining the number of hours of PCA services. The appellant’s mother is his sole caregiver and she works twelve-hour shifts with a very long commute. There is no one else in the home who can assist him and he is dependent for meal preparation. It is unreasonable to expect her to perform all the appellant’s IADLs in the time she has at home.

As to the appellant’s request for PCA assistance with laundry, the appeal is approved. The appellant requested 90 minutes per week for assistance with laundry, but MassHealth only approved 30 minutes per week because the appellant lives with a responsible family member and laundry, as an IADL, is the legal guardian’s responsibility. The regulation requires family members to provide “**routine** laundry” and “household management” assistance. The appellant’s need for laundry services related to his medical conditions far exceeds the laundry services anticipated through “household management” or “routine laundry.” The appellant’s mother testified credibly that the appellant’s medical conditions result in an excessive amount of laundry being generated daily, including bed linens and multiple clothing changes. Because of his urinary and bowel incontinence, the appellant’s laundry must be done separately from the rest of the household. MassHealth considers individual circumstances in determining the number of hours of PCA services. Not only does the appellant have excessive laundry needs, but there is no washer or dryer in the home and they must go to a laundromat. Therefore, the appellant’s medical condition results in the need for laundry assistance in excess of the routine laundry assistance that would be

expected for regular household maintenance. For these reasons, the appellant is approved for 90 minutes per week for PCA assistance with laundry, as requested.

Order for MassHealth

Approve 25 minutes, 2 times per day, 7 days per week for bathing; approve 30 minutes, 1 time per day, 5 days per week for meal preparation for lunch; and approve 90 minutes per week for laundry. If not already done so, implement agreement made at hearing for grooming – shaving (10 minutes, 1 time per day, 6 days per week). All changes should go retroactive to the beginning of the prior authorization period, October 27, 2025

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.

Alexandra Shube
Hearing Officer
Board of Hearings

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