

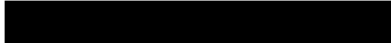
**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2514471
Decision Date:	11/14/2025	Hearing Date:	11/7/2025
Hearing Officer:	David Jacobs		

Appearances for Appellant:



Appearances for MassHealth:

Kelly Rayen, RN



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Prior Authorization (PCA Services)
Decision Date:	11/14/2025	Hearing Date:	11/7/2025
MassHealth Rep:	Kelly Rayen	Appellant Rep:	Pro se
Hearing Location:	Board of Hearings (Remote)	Aid Pending:	No

Authority

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

Jurisdiction

Through notice dated 9/9/2025, MassHealth denied the appellant's request for PCA services because the clinical record indicates that the appellant does not require physical assistance with two or more activities of daily living (ADL) (Exhibit 1 and 130 CMR 422.403(C)(3)). The appellant filed a timely appeal on 10/3/2025. (Exhibit 2 and 130 CMR 610.015(B)). A denial of a request for PCA services is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's request for PCA services.

Issue

The appeal issue is whether the appellant has demonstrated the medical necessity for physical assistance with two or more ADLs.

Summary of Evidence

MassHealth was represented at the hearing by a registered nurse who testified telephonically to the following factual background: The appellant is a female between the ages of 21 and 65 with a primary diagnosis of [REDACTED] (Exhibit 5, pg. 12). The appellant's personal care management (PCM) company, [REDACTED], submitted a reevaluation request for PCA services on her behalf on 9/2/2025 requesting 9 hours and 15 minutes a week of PCA time (Exhibit 5, pgs. 11-38). On 9/9/2025, MassHealth denied the prior authorization request because the clinical documentation did not support that the appellant requires hands on assistance with at least two ADLs as required by 130 CMR 422.403(C)(3). In the prior authorization at issue, a total of two ADLs were requested by appellant's PCM, bathing and med box prefill (Exhibit 5, pgs. 19 and 27). The evaluating nurse found that the appellant is independent in all other ADL tasks (Exhibit 5, pgs. 16-31). MassHealth argues that the documentation does not support that the appellant requires hands on assistance with the two requested ADLs.

For bathing the evaluating nurse's notes state "Physical assist with showering activity, including routine transfers" (Exhibit 5, pg. 19). For med box prefill the evaluating nurse's notes state "planner filled and she takes out on her own as she can be forgetful 'Chemo brain'" (Exhibit 5, pg. 27). MassHealth reached out to the evaluating nurse for more information on her notes and the nurse responded with the following: "For bathing she holds a cloth over her port to keep it dry while PCA washes her hard to reach areas I do not know how long the port will be in place. I do feel she could fill her planner with supervision as she did not exhibit any cognitive impairment but at this time planner filled and she takes out on her own as she can be forgetful 'Chemo brain'" (Exhibit 5, pg. 52)

For bathing, the MassHealth representative testified that based on the submitted documentation the appellant requires help washing her lower extremities while she protects a medical port in her upper body. However, there are waterproof covers the appellant may use to protect the port and long handled brushes the appellant may use to wash her lower extremities. Moreover, the appellant has shown no issues with fine motor control that may interfere with her ability to wash herself. For the med box prefill, the MassHealth representative testified that the appellant has access to special pre-dated bubble packs from the pharmacy that can assist her with prefilling her med box if she is forgetful. The representative testified that medical necessity requires MassHealth to find the service that is the least costly alternative that meets the appellant's needs. Here, based on the submitted documentation it appears that a waterproof cover for the appellant's medical port, a long-handled brush for washing lower extremities, and bubble packs for the appellant's medication will meet the appellant's needs.

The appellant appeared telephonically with the help of a Spanish interpreter. She testified that she has cancer throughout her body and receives regular chemotherapy which leaves her weak and forgetful. She submitted a letter from her primary care provider that states that the appellant needs help with mobility assist, bathing, grooming, dressing, toileting, and medication management (Exhibit 4). She testified that although she was able to accomplish the tasks the

nurse asked her to do during the re-evaluation, she did so with great difficulty which is not represented in the notes. Specifically, she identified that she was able to put on her socks as the nurse's notes describe (Exhibit 5, pg. 23) but it was very hard for her. As for bathing, the appellant testified that she often has issues with balance and must use a shower chair in the bath while bathing herself. She complained that the shower chairs that MassHealth provides are of poor quality and have often broken in the past. She also stated that she has a medical pump she has to use every two weeks that she must hold while the PCA washes her. The hearing officer then asked her what she thought about MassHealth's suggestion about using a waterproof cover for her medical port and a long-handled brush to wash her lower extremities. The appellant did not answer the question and re-iterated the information about her pump, so the interpreter asked her a second time. The appellant responded that she is very sick, her legs often swell and "she does not know how to describe what she needs, but she needs it." For the med box prefill, the appellant testified that she often becomes forgetful after she has chemotherapy and cannot remember when to properly take her medication. A condition she describes as "chemo brain." She testified that she makes regular use of timers that ring when it's time for her to take her medications. When the hearing officer asked her what she thought about MassHealth's recommendation of the pharmacy bubble packs, the appellant responded that she has cancer, is very forgetful, and does not know what else to say. She concluded by saying she will leave the decision in God's hands.

MassHealth responded to the appellant's testimony in several ways. First, as for the letter submitted by the appellant primary care doctor, although it describes all the ADLs the appellant needs assistance with, only bathing and med box prefill were requested by the appellant's PCM. Second, as for the weakness in the appellant's legs while bathing, she has access to a shower chair to help her. Moreover, she has not explained why waterproof port and long handled brush could not meet her needs. Lastly, for med box prefill, the appellant may use bubble packs from the pharmacy, as well as the timers the appellant has already testified to, in order to help her with taking her medication. Again, the appellant has not explained why these things could not meet her needs. Based on the documentation and the appellant's testimony, she stated that MassHealth stands on its decision.

Findings of Fact

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

1. The appellant is a female between the ages of 21 and 65 with a primary diagnosis of malignant neoplasm of unspecified main bronchus.
2. On 9/2/2025, the appellant submitted a reevaluation request for PCA services in the amount of 45 hours per week.
3. The only ADLs requested on the 9/2/2025 prior authorization were for bathing and med box prefill.

4. On 9/9/2025, MassHealth denied the appellant's request for PCA services because the documentation on record did not support that the appellant needs assistance with two or more ADLs.
5. The appellant has a medical port which must be covered while she bathes.
6. The appellant has a pump that she uses every two weeks that she must hold while bathing herself.
7. The appellant regularly receives chemotherapy which often causes loss of balance and forgetfulness.
8. Waterproof covers for medical ports, long handled brushes, and dated bubble packs are available to the appellant and covered by her MassHealth benefits.
9. On 10/3/2025, the appellant appealed the 9/9/2025 notice.

Analysis and Conclusions of Law

Regulations concerning PCA Services are found at 130 CMR 422.000, *et seq.* PCA services are physical assistance with ADLs and IADLs, as described in 130 CMR 422.410. Pursuant to 130 CMR 422.403(C), MassHealth covers PCA services when (1) they 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 ADLs as defined in 130 CMR 422.410(A); and (4) MassHealth has determined that the PCA services are medically necessary.

ADLs and IADLs are addressed in 130 CMR 422.410, which provides as follows:

(A) Activities of Daily Living (ADLs). 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.

(B) Instrumental Activities of Daily Living (IADLs). 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 MassHealth as being instrumental to the health care of the member.

By regulation, MassHealth will not pay a provider for services that are not medically necessary. Pursuant to 130 CMR 450.204(A), a service is considered “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 or cause to aggravate a handicap, or result in illness or infirmity; and
- (2) there is no other medical services 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]. . . .

130 CMR 422.403(C)(3) requires physical hands-on assistance with at least two ADLs to qualify for PCA services. Here, it is found that the appellant has not met her burden to show that she needs hands-on assistance with at least two ADLs.

The appellant’s PCM requested two potential ADLs to be considered in this prior authorization request, bathing and med box prefill. Therefore, to succeed the appellant must show that PCA services are medically necessary for both of them. The appellant submitted a doctor’s letter stating that the appellant also needs assistance with the additional ADLs of mobility assist, grooming, dressing, and toileting (Exhibit 4). However, none of those services were requested by the appellant’s PCM (Exhibit 5 pgs. 11-38).

As for the task of bathing, it is found that the appellant has not met her burden to show that PCA services are medically necessary. The appellant testified that she needs PCA help with washing her lower extremities due to leg swelling and lack of balance caused by her chemotherapy while protecting her medical port from the water. MassHealth offered that the appellant could use a waterproof cover to protect the port and a long-handled brush to wash her lower extremities. The appellant did not give any meaningful testimony to counter MassHealth testimony despite having the question directly asked to her through a Spanish interpreter twice. The appellant did offer that she has a medical pump which she has to hold while bathing herself every two weeks. However, a device she has to use every two weeks cannot be said to impact her needs for activities of **daily** living. Lastly, although the appellant persuasively argued how much she suffers from her cancer, she did not connect those problems specifically to bathing. She mentioned that her legs swell and she has poor balance after her chemotherapy, but those issues seem to be solved by MassHealth already supplying her with a shower chair, the quality of the chair aside. Without meaningful testimony to counter MassHealth's testimony that a waterproof port and long handled brush can meet her needs, it cannot be said that the appellant has met her burden to show that PCA services are medically necessary to assist the appellant with bathing.

As for the task of med box prefill, it is found that the appellant has not met her burden to show that PCA services are medically necessary. The appellant testified that she gets forgetful after chemotherapy and, without a PCA, must use timers to help her remember to take her medication. MassHealth argues that with those timers and a bubble pack from the pharmacy that pre-dates the appellant's medication, she should be able to fill and take her medication without issue. The appellant did not meaningfully respond to this testimony even though she was directly asked. She only said that she has cancer and does not know what else to say. Without meaningful testimony to explain why the appellant cannot use her timers and pharmacy bubble packs, it cannot be said that she has met her burden to show that PCA services are medically necessary to assist the appellant with prefilling her med box.

MassHealth correctly determined that, per 130 CMR 450.204(A), MassHealth will not pay for services when there is a less costly service that will meet the member's needs. The appellant has failed to meet her burden to show why the medical devices MassHealth suggested will not meet her needs. Therefore, MassHealth did not err in its decision that the clinical record does not support that the appellant needs hands on assistance with at least two ADLs and correctly denied the request for PCA services pursuant to 130 CMR 422.403(C).

This appeal is DENIED.

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.

David Jacobs
Hearing Officer
Board of Hearings

cc: Optum