

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part; Dismissed in part	Appeal Number:	2515402
Decision Date:	02/06/2026	Hearing Date:	12/16/2025
Hearing Officer:	Emily Sabo		

Appearances for Appellant:



Appearance for MassHealth:




Kelly Rayen, RN, 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; Denied in part; Dismissed in part	Issue:	Prior Authorization; Personal Care Attendant (PCA) Services
Decision Date:	02/06/2026	Hearing Date:	12/16/2025
MassHealth's Rep.:	Kelly Rayen, RN	Appellant's Reps.:	
Hearing Location:	Quincy Harbor South 4	Aid Pending:	No

Authority

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

Jurisdiction

Through notice dated September 19, 2025, MassHealth modified the Appellant's prior authorization request for personal care attendant (PCA) services from the requested 19 hours, 30 minutes per week, to 9 hours, 45 minutes per week; by notice dated September 23, 2025, MassHealth further modified the request to 8 hours, 45 minutes per week. Exhibit 1. The Appellant's representative filed this appeal with the Board of Hearings in a timely manner on October 20, 2025. 130 CMR 610.015 and Exhibit 2. Modification of a prior authorization request is valid grounds for appeal to the Board of Hearings. 130 CMR 610.032.¹

Action Taken by MassHealth

¹ By notice dated October 24, 2025, MassHealth modified the request to authorize 8 hours and 45 minutes per week for 47.14 weeks and 48 hours and 15 minutes per week for 5 vacation weeks. Exhibit 1. By notice dated November 5, 2025, MassHealth stated that it was denying the Appellant's prior authorization request because the documentation submitted does not meet the prior authorization submission requirements. *Id.* At the hearing, the MassHealth representative testified that by notice dated October 29, 2025, MassHealth approved 57 hours per week for PCA time for the 5 vacation weeks.

MassHealth modified the Appellant’s prior authorization request for PCA services.

Issue

Was MassHealth correct, pursuant to 130 CMR 422.410 and 130 CMR 450.204(A), to modify the Appellant’s prior authorization request for PCA services from the requested 19 hours, 30 minutes per week, to 8 hours and 45 minutes per week for 47.14 weeks and 57 hours per week for 5 vacation weeks?

Summary of Evidence

The hearing officer and Appellant’s representatives met in-person in the Quincy office for the hearing and the MassHealth representative appeared virtually. MassHealth was represented by a Registered Nurse and clinical appeals reviewer. Information from the record and the parties’ testimony is summarized as follows: the Appellant is [REDACTED] and has a primary diagnosis of a [REDACTED]. The Appellant is non-ambulatory and totally dependent for all of her care needs. The Appellant primarily lives at a [REDACTED] residential home. The Appellant’s personal care management (PCM) agency is the [REDACTED] and they submitted a reevaluation prior authorization request on September 10, 2025. The service period is October 20, 2025, to October 19, 2026.

The Appellant spends five vacation weeks and every other weekend at her parents’ home, and the reevaluation prior authorization request relates to PCA services for those time frames. The MassHealth representative testified that MassHealth modified the request to reflect one day and one night of PCA services per week to average out to the Appellant visiting her parents every other weekend and that the five vacations weeks can be utilized at any point during the service period. The MassHealth representative testified that the PCM agency submitted an adjustment for the vacation weeks, which MassHealth authorized on October 29, 2025, for 57 hours per week for 5 vacation weeks.

Mobility

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
1 person physical assist w/ mobility	2	6	3	36
1 person physical assist w/	10	2	3	60

transfers				
Physical assist w/ repositioning	5	7	3	105

Night (12 AM-6AM)

Task	Mins/Ep	Eps/Night	Total Mins/Night
Physical Assist w/ repositioning	5	3	15

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
1 person physical assist w/ mobility	2	6	1	12
1 person physical assist w/ transfers	10	2	1	20
Physical assist w/ repositioning	5	7	1	35

Passive Range of Motion (PROM)

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Upper extremity left	8	2	2	32
Upper extremities right	8	2	2	32
Lower extremities left	8	2	2	32
Lower extremities right	8	2	2	32

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Upper extremity	8	2	1	16

left				
Upper extremities right	8	2	1	16
Lower extremities left	8	2	1	16
Lower extremities right	8	2	1	16

Bathing

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist with showering, including routine transfers	20	1	2	40
	30	1	2	60
Physical assist with washing hair	5	2	2	20

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist with showering, including routine transfers	20	1	1	20
	30	1	1	30
Physical assist with washing hair	5	1	1	5

Grooming

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Nail care	5	1	1	5

Oral Care	5	2	2	20
Hair	5	1	2	10
Shaving	5	1	1	5

Modified by MassHealth:²

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Oral Care	5	2	1	10
Hair	5	1	1	5

Dressing/Undressing

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist w/ dressing	20	1	2	40
Physical assist w/ undressing	10	1	2	20

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist w/ dressing	20	1	1	20
Physical assist w/ undressing	10	1	1	10

Eating

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
------	--------	---------	-----------	-----------------

² MassHealth did not modify the time requested for nail care and shaving. Exhibit 5.

Physical assist w/ eating	30	1	2	60
	20	1	3	60

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist w/ eating	30	1	1	30
	20	1	1	20

Toileting

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Bladder Care	10	6	2	120
Bowel Care	10	1	2	20

Night (12 AM-6AM)

Task	Mins/Ep	Eps/Night	Total Mins/Night
Bladder Care	10	2	20

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Bladder Care	10	6	1	60
Bowel Care	10	1	1	10

Assistance with Medications

Requested by the PCM agency:

Task	Min/Ep	Eps/Day	Days/Week	Total
------	--------	---------	-----------	-------

				Mins/Week
Physical assist w/ medications	3	2	2	12

Modified by MassHealth:

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist w/ medications	3	2	1	6

Other Healthcare Needs

Requested by the PCM agency:

Task	Mins/Month	Mins/Week
Menses Care	25	6

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist in/out of stander	20	1	3	60

Modified by MassHealth:

Task	Mins/Month	Mins/Week
Menses Care		3 ³

Task	Min/Ep	Eps/Day	Days/Week	Total Mins/Week
Physical assist in/out of stander	20	1	1	20

Special Needs

Requested by the PCM agency:

³ MassHealth described the reduction of 6 minutes to 3 minutes for menses care but did not explain the minutes per month.

Task	Total Mins/Week
Equipment Maintenance (wheelchair)	30

Modified by MassHealth:

Task	Total Mins/Week
Equipment Maintenance (wheelchair)	15

The MassHealth representative testified that most of the modifications MassHealth made were to reduce the time to one day per week, to reflect that the Appellant is not at her parents' home every weekend. The MassHealth representative stated that otherwise, MassHealth's reductions were decreasing the hair washing episodes from 2 to 1 per day, reducing the time for menses care from 6 minutes to 3 minutes, and reducing the time for equipment maintenance from 30 minutes per week to 15 minutes per week, to reflect that the Appellant is only home every other weekend. The MassHealth representative testified that this equated to 17 hours and 30 minutes every two weeks. The hearing officer asked how MassHealth went about reducing the number of episodes or days to one, when the PCM had requested 3, and the MassHealth representative testified that the reduction to one was appropriate.

The Appellant was represented by her mother and guardian and an attorney, and they verified the Appellant's identity. The Appellant's attorney explained that the appeal was brought for several reasons—including that the September notices did not include time for PCA services during vacation weeks, the receipt of multiple notices, and the reduction from the 9 hours, 45 minutes listed in the September 19, 2025 notice to the 8 hours, 45 minutes in the September 23, 2025 notice. The Appellant's attorney testified that this also reflects a reduction from the past year in which MassHealth had approved 9 hours and 30 minutes per week for time for PCA services for the Appellant, that this reduction was not explained by MassHealth, and that the Appellant's condition has not changed or improved. The Appellant's attorney explained that she understood MassHealth's reduction to one day per week but did not understand the decrease from either 9 hours, 45 minutes (from the earlier notice) or 9 hours, 30 minutes (from the prior service year) to 8 hours, 45 minutes. The MassHealth representative testified that the change from 9 hours, 45 minutes to 8 hours, 45 minutes was due to a calculation error. The Appellant's attorney testified that in the prior year, the PCM agency had requested hours over the course of a two-week period, but that the PCM agency said that they would not redo the request to correct that until next year.

Based on discussion at hearing concerning the Appellant's condition, where she has difficulty holding her head up and drools such that her hair becomes matted, the MassHealth representative

agreed to restore 2 episodes of hair washing per day for one day per week (a total of 10 minutes per week), which the Appellant's representative agreed to. Based on the materials in Exhibit 5, MassHealth had not included the 3 minutes for menses care in the total for other healthcare needs, and the MassHealth representative testified that that would be added back in.

The Appellant's mother explained that positioning the Appellant into the stander, and adjusting the foot straps, takes 15 minutes, and then another 15 minutes to position the Appellant out of the stander, if the process is smooth, but that it can take more time. The Appellant's mother testified that when the Appellant uses the stander she must be carefully monitored because she may faint. The MassHealth representative testified that any time spent by the PCA monitoring the Appellant in the stander is a non-covered service.

The Appellant's mother also testified that the Appellant uses a Deep Brain Stimulator, which needs to be charged daily for 15 to 30 minutes, and that the charge needs to be held and charged on the Appellant's head. The Appellant's mother testified that this was not reflected in the request.

The Appellant's mother testified that when the Appellant is at home, she usually eats a snack and three meals daily. The Appellant is fully dependent and needs assistance to eat. The Appellant's mother testified that due to the Appellant's swallowing problems, she takes her medications separately with yogurt. The Appellant's mother testified that the Appellant's use of the PCA program helps her maintain her health and independence, as well as participate as a member of her family safely and appropriately.

Findings of Fact

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

1. The Appellant is [REDACTED] and has a primary diagnosis of a [REDACTED]. Testimony, Exhibit 5.
2. The Appellant is non-ambulatory and totally dependent for all her care needs. Testimony, Exhibit 5.
3. The Appellant primarily lives at a [REDACTED] [REDACTED]. Testimony, Exhibit 5.
4. The Appellant spends 5 vacation weeks and every other weekend at her parents' home, where she receives time for PCA services. Testimony.
5. The Appellant's PCM agency is the [REDACTED], and they submitted a reevaluation prior authorization request on September 10, 2025, for 19 hours, 30 minutes per week for PCA

services. The service period is October 20, 2025, to October 19, 2026. Testimony, Exhibit 5.

6. By notice dated September 19, 2025, MassHealth modified the request to 9 hours, 45 minutes per week, for time for PCA services. Exhibit 1.
7. By notice dated September 23, 2025, MassHealth further modified the request to 8 hours, 45 minutes per week, for time for PCA services. Exhibit 1.
8. On October 20, 2025, the Appellant's representative filed a timely appeal with the Board of Hearings. Exhibit 2.
9. The PCM agency submitted an adjustment reflecting the vacation weeks, and on October 29, 2025, MassHealth authorized 57 hours per week for 5 vacation weeks. Testimony.
10. I take notice of the time requested by the PCM agency and modified by MassHealth as stated above in the Summary of Evidence. Exhibit 5.
11. During the hearing, the MassHealth representative agreed to authorize 2 episodes of hair washing per day for one day per week (a total of 10 minutes per week), which the Appellant's representative agreed to. Testimony.
12. During the hearing, the MassHealth representative agreed to add in the 3 minutes weekly approved for menses care, which was not reflected in the total for other healthcare needs. Testimony.
13. When the Appellant is at home, she usually eats a snack and three meals daily. The Appellant is fully dependent and needs assistance to eat. Testimony.

Analysis and Conclusions of Law

MassHealth regulations about PCA services are found at 130 CMR 422.000 et seq.

130 CMR 422.402: Definitions

....

Activities of Daily Living (ADLs) — those specific activities described in 130 CMR 422.410(A) and in the Contract for Personal Care Management (PCM) Services. Such activities are performed by a personal care attendant (PCA) to physically assist a member with mobility, taking medications, bathing or grooming, dressing, passive range of motion exercises, eating, and toileting.

....

Activity Time — the actual amount of time spent by a PCA physically assisting the member with ADLs and Instrumental Activities of Daily Living (IADLs). Activity time is reported on the activity form.

....

Family Member — the spouse of the member, the parent of a minor member, including an adoptive parent, or any legally responsible relative.

....

Personal Care Attendant (PCA) — a person who meets the requirements of 130 CMR 422.404(A)(1) and who is hired by the member or surrogate to provide PCA services. In addition, for the sole purpose of M.G.L. c. 118E, §§ 70 through 75, a PCA is a person who is hired by the member or surrogate to provide PCA services through a senior care organization (SCO) contracting with the MassHealth agency pursuant to M.G.L. c. 118E, § 9D or a person who is hired by the member or surrogate to provide PCA services through an integrated care organization (ICO) contracting with the MassHealth agency pursuant to M.G.L. c. 118E, § 9F. Unless explicitly stated in 130 CMR 422.000, in the SCO's MassHealth contract, or in the ICO's MassHealth contract, no other provisions of 130 CMR 422.000 apply to any SCO, ICO, or PCA hired by any eligible MassHealth member through a SCO or ICO.

....

Personal Care Attendant Program (PCA Program) — a MassHealth program under which PCA services and associated Personal Care Management and Fiscal Intermediary functions are available to MassHealth members including, for the sole purpose of M.G.L. c. 118E, §§ 70 through 75, those services and functions when provided through a senior care organization (SCO) as defined in M.G.L. c. 118E, § 9D, or an integrated care organization (ICO) as defined in M.G.L. c. 118E § 9F. Unless explicitly stated in 130 CMR 422.000, the SCO's MassHealth contract, or the ICO's MassHealth contract, no other provisions of 130 CMR 422.000 apply to any SCO, ICO, or PCA hired by an eligible MassHealth member through a SCO or ICO.

....

Personal Care Attendant Services (PCA Services) — physical assistance with ADLs and IADLs provided to a member by a PCA in accordance with the member's authorized evaluation or reevaluation, service agreement, and 130 CMR 422.410.

Personal Care Management (PCM) Agency — a public or private agency or entity under contract with EOHHS to provide PCM functions in accordance with 130 CMR 422.000 and the PCM agency contract.

Personal Care Management (PCM) Functions — administrative functions provided by a PCM agency to a member in accordance with a contract with EOHHS, including, but not limited to, functions identified in the PCM agency contract and 130 CMR 422.419(A).

130 CMR 422.410: Activities of Daily Living and Instrumental Activities of Daily Living

(A) Activities of Daily Living (ADLs). Activities of daily living include the following categories of activities. Any number of activities within one category of activity is counted as one ADL:

- (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 bathing, personal hygiene, or grooming;
- (4) dressing: 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 or 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 PCA services; and
 - (c) other special needs approved by the MassHealth agency as being instrumental to the health care of the member.

(C) Determining the Number of Hours of Physical Assistance. In determining the number of hours of physical assistance that a member requires under 130 CMR 422.410(B) for IADLs, the PCM agency must assume the following.

- (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.
- (2) When a member is living with one or more other members who are authorized for MassHealth PCA services, PCA time for homemaking tasks (such as shopping, housekeeping, laundry, and meal preparation and clean-up) must be calculated on a shared basis.
- (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 422.411: Covered Services

(A) MassHealth covers activity time performed by a PCA in providing assistance with ADLs and IADLs as described in 130 CMR 422.410, as specified in the evaluation described in 130 CMR 422.422(C) and (D), and as authorized by the MassHealth agency.

(B) MassHealth covers transitional living program services provided by an organization in accordance with 130 CMR 422.431 through 422.441 and the MassHealth agency's proposal requirements.

130 CMR 422.412: Noncovered Services

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, or a resident of a provider-operated residential facility subject to state licensure, such as a group home;

(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;

(G) surrogates, as defined in 130 CMR 422.402; or

(H) PCA services provided to a member without the use of EVV as required by the MassHealth agency.

Pursuant to 130 CMR 450.204(A), 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 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 MassHealth. Services that are less costly to MassHealth include, but are not limited to, health care reasonably known by the provider, or identified by MassHealth 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. 130 CMR 450.204(A).

At the hearing, the MassHealth representative agreed to authorize 2 episodes of hair washing per day for one day per week (a total of 10 minutes per week), which the Appellant's representative agreed to. The MassHealth representative also agreed to include the 3 minutes for menses care, that were authorized by MassHealth but were not reflected in the total time approved for other healthcare needs. Accordingly, those parts of the appeal are approved and dismissed. 130 CMR 610.035(A)(8).

As discussed above, MassHealth only approved PCA time for services for two eating episodes per day. *See also* Exhibits 1 and 5. Based on the testimony of the Appellant's mother, which I credit, and the other evidence in the record, regarding the Appellant's total dependence, I also approve the appeal, for an additional 20 minutes for PCA assistance for eating. Regarding MassHealth's other modifications to the time requested, the appeal is denied.

Order for MassHealth

Adjust notice of September 23, 2025, to authorize PCA assistance weekly for

- Bathing—Hair Washing
 - 5 minutes twice per day
 - 10 minutes weekly
- Other Healthcare Needs
 - Menses Care—3 minutes weekly
 - 23 minutes total weekly
- Eating
 - One 30- and 2 20-minute episodes
 - 70 minutes total weekly

for the prior authorization period of October 20, 2025, to October 19, 2026, in addition to the PCA assistance time already authorized by MassHealth.

Send notice to Appellant of implementation only; do not include appeal rights.

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.

Emily Sabo
Hearing Officer
Board of Hearings

[REDACTED]

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