

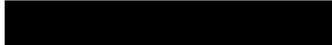
**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part	Appeal Number:	2516747
Decision Date:	2/3/2026	Hearing Date:	12/16/2025
Hearing Officer:	Emily Sabo		

Appearance 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	Issue:	Prior Authorization; Personal Care Attendant (PCA) Services
Decision Date:	2/4/2026	Hearing Date:	12/16/2025
MassHealth's Rep.:	Kelly Rayen, RN	Appellant's Rep.:	Parent
Hearing Location:	Quincy Harbor South (Telephone)	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 a notice dated September 17, 2025, MassHealth modified the Appellant's prior authorization request for personal care attendant (PCA) services from the requested 8 hours, 30 minutes, to 7 hours, 15 minutes per week. Exhibit 1. The Appellant's representative filed this appeal with the Board of Hearings in a timely manner on November 10, 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.

Action Taken by MassHealth

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 8 hours, 30 minutes, to

7 hours, 15 minutes per week?

Summary of Evidence

Prior to the hearing, the Appellant's representative submitted a letter dated November 6, 2025, from [REDACTED] Hospital, which stated:

Per [Appellant's] mother, [Appellant] has required significant supports with [activities of daily living (ADLs)] following recent medical events resulting in regression in skills. Throughout all tasks of daily living, [Appellant] requires a significant level of supervision during ADLS in order to complete ADLS in an appropriate, safe, and healthy manner. At this time, [Appellant] will require support with his ADLS unless noted otherwise at a later time. PCA hours should be reviewed with [Appellant's] mother to best understand the limitations present for the child and the hours he needs given his disability.

Exhibit 5 at 1.

The hearing was held by telephone. 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] years old and has a medical history that includes [REDACTED] epilepsy, autism, intellectual disability, attention-deficit hyperactivity disorder (ADHD), [REDACTED] and seizures. The Appellant was represented by his parent, who verified the Appellant's identity.

On September 15, 2025, [REDACTED], a personal care management services agency, submitted an initial evaluation to MassHealth on the Appellant's behalf requesting 8 hours and 30 minutes per week for PCA services. On September 17, 2025, MassHealth modified the request to 7 hours and 15 minutes per week. The time period for the prior authorization request is September 17, 2025, to September 16, 2026.

The MassHealth representative testified that MassHealth's only modification was to the ADL of bathing. [REDACTED] requested 30 minutes of PCA assistance for bathing daily and 15 minutes for an evening quick wash daily, for a total of 315 minutes per week. The MassHealth representative testified that MassHealth accepted the request for 30 minutes for daily bathing but reduced the time for the evening quick wash to 5 minutes per day, for an overall total of 245 minutes of assistance per week. The MassHealth representative testified that MassHealth made this adjustment because the time requested for the evening quick wash was longer than ordinarily required. The MassHealth representative testified that based on the record, there was no documentation to support that 15 minutes daily for this activity was medically necessary. The

MassHealth representative testified that the purpose was for the PCA to assist the Appellant with washing his face and hands in the evening.

The Appellant's representative testified that due to the Appellant's epilepsy, he frequently soils himself so that a more comprehensive wash is necessary in the evenings. The Appellant's representative testified that the Appellant may have multiple epileptic episodes in a day. After listening to the Appellant's representative's testimony, the MassHealth agreed to restore 10 minutes daily for the evening wash. The Appellant's representative felt this was not sufficient time and asked that the hearing officer issue a decision on the matter.

Findings of Fact

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

1. The Appellant is [REDACTED] years old. Testimony, Exhibits 4 and 6.
2. The Appellant has a medical history that includes [REDACTED] epilepsy, autism, intellectual disability, ADHD, [REDACTED] and seizures. Testimony, Exhibit 6.
3. On September 15, 2025, [REDACTED], a personal care management services agency, submitted an initial evaluation to MassHealth on the Appellant's behalf requesting 8 hours and 30 minutes per week for PCA assistance services. Testimony, Exhibits 1 and 6.
4. By notice dated September 17, 2025, MassHealth modified the request to 7 hours and 15 minutes per week. The time period for the prior authorization request is September 17, 2025, to September 16, 2026. Testimony, Exhibits 1 and 6.
5. MassHealth modified the time for the ADL of bathing. Testimony, Exhibits 1 and 6.
6. The Appellant's representative filed a timely appeal with the Board of Hearings on November 10, 2025. Exhibit 2.
7. During the hearing, the MassHealth representative explained that MassHealth's specific modification for the time for bathing was in regard to the 15 minutes daily for a secondary or evening quick wash, which MassHealth modified from 15 to 5 minutes daily. Testimony.
8. The Appellant experiences incontinence due to his epilepsy. Testimony.
9. Based on the Appellant's representative's testimony during the hearing, the MassHealth representative agreed to restore 10 minutes daily for the secondary or evening quick wash.

Testimony.

10. I take administrative notice of the MassHealth PCA Time-for-Task Guidelines.

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).

The Appellant has the burden "to demonstrate the invalidity of the administrative determination." *Andrews v. Division of Medical Assistance*, 68 Mass. App. Ct. 228, 231 (2007). See also *Fisch v. Board of Registration in Med.*, 437 Mass. 131 (2002); *Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn.*, 11 Mass. App. Ct. 333, 334 (1981); *Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance*, 45 Mass. App. Ct. 386, 390 (1998).

At the hearing, the MassHealth representative agreed to partially restore the PCA assistance time requested for bathing, specifically allowing 10 minutes for the secondary or evening quick wash. Combining that with the 30 minutes daily approved for the main wash, is a total of 280 minutes per week. The appeal is approved in part based on MassHealth's testimony agreeing to increase the time allowed. Based on my review of the testimony and evidence in the record, including administrative notice of the MassHealth PCA Time-For-Tasks Guidelines, I find that the Appellant has not met his burden to demonstrate that MassHealth otherwise erred in making its modification. Accordingly, the appeal is denied in part.

Order for MassHealth

Adjust notice of September 17, 2025, to authorize PCA assistance weekly for

- Bathing—280 minutes weekly
 - 40 total minutes daily

for the prior authorization period of September 17, 2025, to September 16, 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

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