

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Dismissed in Part; Denied in Part	Appeal Number:	2517074
Decision Date:	01/30/2026	Hearing Date:	12/30/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	

Appearance for Appellant:




Appearance for MassHealth:

Heather Adams, 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:	Dismissed in Part; Denied in Part	Issue:	Prior Authorization – Personal Care Assistance (PCA) Services
Decision Date:	01/30/2026	Hearing Date:	12/30/2025
MassHealth's Rep.:	Heather Adams, RN, Optum	Appellant's Rep.:	
Hearing Location:	Springfield MassHealth Enrollment Center	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 11/06/2025, MassHealth modified the appellant's prior authorization request for personal care attendant (PCA) services from a requested 62 hours and 30 hours per week (62:30) to 20:15 hours per for the dates of service from 12/08/2025 to 12/07/2026 (130 CMR 422.410; Exhibit 1). The appellant filed this appeal in a timely manner on 11/19/2025 (130 CMR 610.015(B); Exhibit 2). MassHealth agency actions to suspend, reduce, terminate, or restrict a member's assistance are valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth modified the appellant's prior authorization request for personal care attendant services.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 422.410 and 450.204, in modifying appellant's prior authorization request for personal care attendant services.

Summary of Evidence

The appellant was present at the fair hearing with her advocate, Andy Forman from Boston Center for Independent Living ("BCIL"), the person care attendant ("PCA") management agency ("PCM" or "Provider"). MassHealth was represented by Heather Adams, a registered nurse who works for Optum, the MassHealth contractor that makes the personal care attendant (PCA) decisions. Exhibits 1 – 4 were admitted to the hearing record. All parties appeared virtually through a video hearing (Exhibit 3).

The MassHealth representative testified that, on 10/30/2025, a prior authorization request ("PA") for PCA services was received on appellant's behalf from her PCA provider, and it is a re-evaluation request for the dates of service of 12/08/2025 to 12/07/2026. In the PA request for PCA services (Exhibit 4), the provider requested 62:30 hours per week. The appellant is an adult woman who lives in the community. She has a diagnosis of [REDACTED]

[REDACTED] In addition, she has the following diagnoses:

[REDACTED]

(Exhibit 4, p. 13, 14.)

The Optum representative testified that, on 11/06/2025, MassHealth modified the PCA request to 20:15 day/evening hours per week. Modifications were made to the request in the activities of daily living (“ADL”) task of mobility/stairs; bathing; grooming/nail care; grooming/other; hair care; dressing, eating at night; toileting; medication prefill; assistance administering medications; glucose monitoring; and ostomy care. Modifications were made to the request for assistance with instrumental activities of daily living (“IADLs”) of laundry; and equipment maintenance (Exhibits 1 and 4).

Mobility – Stairs

The appellant’s PCA provider requested 5 minutes, 4 times per day, 7 days per week (5 X 4 X 7) for assistance with mobility – Stairs. The provider noted that “she is more uncomfortable. She has been diagnosed with [REDACTED] - she had surgery - now has drainage device in her left side adding to the need for assistance with mobility. She is experiencing increased pain, she is less stable, fears falling. She needs assistance on stairs, she needs maximum assistance with all transfers: in and out of bed, on and off recliner/commode, etc. She is still experiences nearly constant pain – especially her left side of body, starting with her past surgical site (left side where spleen and most of her pancreas was removed) (Exhibit 4, p. 18).

MassHealth denied the time requested for assistance with mobility – stairs. The MassHealth representative testified that the time requested was to assist the appellant up and down the outside stairs when she goes outside the home. This time would be allowed if the appellant had submitted a request for medical transportation; however, no request was made. The time is only covered when using transportation services to and from medical appointments because MassHealth does not cover mobility for assistance outside of the home.

The appellant testified that the apartment is one level. She suffers from balance problems due to her ataxia, and she needs “hands-on” assistance up and down the outside stairs to make sure she does not fall forward. She uses a walker and needs assistance getting to it.

Bathing

The appellant’s PCA provider requested 30 X 1 X 7 for assistance with bathing and 15 X 1 X 7 for assistance with sponge/bed bath and drying. The provider noted that the appellant needs physical assistance with showering activity, including routine transfers; physical assist w/sponge/bed bath and drying, including routine transfers (Exhibit 4, p. 20).

MassHealth modified the request for assistance with bathing to 15 X 1 X 7 for all bathing activities. The MassHealth representative testified that the time requested is longer than ordinarily necessary for someone with the appellant’s abilities.

The appellant testified that she cannot reach higher than her shoulder with her left arm, making it necessary that she receive assistance with her bathing and hair care.

The MassHealth representative responded that she would approve 25 X 1 X 7 for daily bathing and 12 X 1 X 7 for a daily quick wash.

Hair Care

The appellant's provider requested 3 X 1 X 7 for assistance with grooming – hair care. The provider noted that the PCA provides assistance with hair combing due to her physical limitations. The appellant carries out oral care herself (Exhibit 4, p. 22).

MassHealth initially denied the time requested for hair care; however, at the fair hearing, the MassHealth representative restored all time as requested for hair care (3 X 1 X 7).

Dressing/Undressing

The appellant's PCA provider requested 25 X 1 X 7 and 12 X 1 X 7 for assistance with dressing; and 12 X 1 X 7 and 6 X 1 X 7 for assistance with undressing. The provider noted that the appellant requires assistance with this task

due to her becoming generally weaker [REDACTED] and diff level so pain (primarily left side of body), her PCA provides maximum care to carry out her needs. Her hand tremors make dressing herself impossible. In AM: after completing her sponge bath, her PCA provides max assist with all aspects dressing/undressing. She chooses her attire for the day, her PCA provides maximum assistance. She is dressed appropriately for the day. In PM: prior to pm shower and shampoo, PCA assists in undressing. Past pm shower - PCA assists her in applying appropriate sleepwear for the night.

(Exhibit 4, p. 24.)

MassHealth initially denied the PCA assistance for dressing and undressing, based on the appellant's clinical record that states she can perform these tasks with assistance, and she can participate with assistance.

The appellant testified that she uses assistive devices to assist her with putting on her shorts, and socks. She testified that if she were left without assistance for dressing and undressing it may take her "6 hours a day."

The MassHealth representative responded that she would restore 25 X 1 X 7 for assistance with dressing and 12 X 1 X 7 for undressing.

Grooming – Nail Care

The appellant's PCA provider requested 10 X 1 X 1 for assistance with nail care. The provider noted that the PCA assists the appellant with fingernail and toenail care.

MassHealth modified the time requested for grooming – nail care to 5 X 1 X 1. The MassHealth representative testified that the appellant has been diagnosed with diabetes. Due to the possibility of infections and wounds on the feet, MassHealth does not permit the PCAs to perform toenail care on members who are diabetic, as it requires a specialization beyond the training of a PCA. This task must be performed by a podiatrist or other medical professional. MassHealth approved PCA time for assistance with fingernail care.

Grooming – Other

Appellant's provider requested 7 X 1 X 7 for assistance with grooming – other. The provider noted that the appellant requires assistance applying deodorant and body lotion.

MassHealth modified the request for assistance with grooming – other to 2 X 1 X 7. The MassHealth representative testified that the time requested for assistance applying deodorant and lotion is longer than what is ordinarily required for someone with the appellant's abilities. According to the assessment included with the PA, the appellant is able to participate in performing applying deodorant and lotion.

Eating

The appellant's PCA provider requested 10 X 2 X 7 for assistance with overnight eating. The provider noted that

the appellant continues to be independent feeding herself. She has special utensils and a no spill cup. her PCA prepares all meals and snacks, sets up, cuts up, stands by to assist her as needed, and cleans up each time. PCA provides assistance with fluids for her to take in bed during night.

(Exhibit 4, p. 25.)

MassHealth denied the time for assistance with overnight eating. The MassHealth representative testified that the assessment included with the PA request states the appellant is independent with eating and drinking. The MassHealth representative also testified that no time was requested for assistance with eating during the day, showing that the appellant is independent. For nighttime feeding, the PCA prepares a "glass of water" to bring to the appellant at night.

The appellant responded that the PCA sets up her meals like a sandwich so the appellant can eat later. She testified that the PCA takes about 15-20 minutes to assist her with overnight feeding.

The MassHealth representative replied that all time was approved, as requested, for meal preparation and cleanup.

Toileting

The appellant's provider requested 5 X 6 X 7 for assistance with bladder care and 10 X 2 X 7 for assistance with bowel care. The provider noted that

For bladder care: she senses need to void and/or defecate. She has a bedside commode, uses this if in bedroom or living room due to location of her bedroom. She needs mod PCA assist getting on/off toilet seat or bedside commode seat) - toilet hygiene and clothing mgmt. She wears panty liner +/- pads, pullups, as needed. Bowel care: she senses need to defecate - often has loose +/- diarrhea stools requiring PCA to provide assist w/ toileting and clothing mgmt. Due to the irrigation device at the past surgical site on L side of her body, her PCA must be careful to keep the site intact. During the night, she often has BMs. PCA assists her to/from bedside commode and provides hygiene and clothing mgmt.

(Exhibit 4, p. 26.)

MassHealth initially denied the request for assistance with toileting. The MassHealth representative testified that according to the documentation included with the PA, the appellant is able to perform toileting independently.

The appellant testified that she requires about 5-10 minutes for each instance when she needs bladder care. Bowel care takes about 15-20 minutes. She is able to "prop herself up," and can use her walker for transfers.

After hearing the appellant's testimony, the MassHealth representative responded that she would restore 5 X 6 X 7 for assistance with bladder care and 5 X 2 X 7 for assistance with bowel care. In addition, MassHealth approved 5 X 2 X 7 for overnight assistance in and out of bed for toileting needs and 5 X 2 X 7 for overnight assistance with toileting.

Medication Prefill Planner

The appellant's PCA provider requested 15 X 1 X 1 for assistance with prefilling the appellant's medication planner. The provider noted that the PCA prefills the appellant's medication planner weekly (Exhibit 4, p. 28).

MassHealth initially denied the time requested for assistance with this task; however, after hearing the appellant's testimony, the requested time was approved in full (15 X 1 X 1).

Medication Administration

The appellant's provider requested 5 X 4 X 7 and 10 X 2 X 7 for assistance with medication administration. The provider noted that the appellant's "PCA administers medications 4x/day and 1 med 7x/day for neuropathy (gabapentin) (Exhibit 4, p. 28).

MassHealth initially denied the request for assistance with medication administration. The MassHealth representative testified that the documentation included with the PA indicates the appellant has significant functional ability to perform her medication administration.

The appellant testified that she must take her medications at the prescribed time. She testified that she "can do this on my own." She also testified that her PCA must fill up her "gigantic water bottle," so that the appellant can take the medications.

The MassHealth representative responded that she would restore 3 X 3 X 7 for assistance with medication administration.

Glucometer Checks

The appellant's provider requested 3 X 3 X 7 for assistance with glucometer checks. The provider noted that "the PCA does glucometer test for blood glucose level three times a day, has been running 90-200" (Exhibit 4, p. 28).

MassHealth initially denied the request for assistance with glucometer checks; however, at the fair hearing, after hearing the appellant's testimony, the MassHealth representative restored the time, as requested (3 X 3 X 7).

Laundry

The appellant's PCA provider requested 75 X 1 X 1 for assistance with laundry. MassHealth initially modified the time requested for assistance with laundry to 60 X 1 X 1; however, at the fair hearing, after hearing the appellant's testimony, MassHealth restored all time requested for this task (75 X 1 X 1).

Equipment Maintenance

The appellant's PCA provider requested 91 X 1 X 1 for assistance with maintaining her medical equipment. The provider noted that the PCA

- cleans and maintains 3 items used for mobility and safety.
- rollator walker
- shower chair
- bedside commode.

(Exhibit 4, p. 39.)

MassHealth initially modified the request for assistance with equipment maintenance to 35 X 1 X 1 for assistance with equipment maintenance. The MassHealth representative testified that there are only three pieces of medical equipment listed in the request. The time requested is longer than ordinarily required for assistance with this task.

The appellant testified that the time requested is for maintenance of her walker, her rollator, and her grab bars.

Based on the appellant's testimony, MassHealth approved 45 X 1 X 1 for assistance with equipment maintenance.

Ostomy Care

The appellant's provider requested 10 X 2 X 7 for assistance with ostomy care. MassHealth denied the request for assistance with ostomy care. The MassHealth representative testified that there is no evidence in the appellant's PA request that indicates she has an ostomy.

The appellant testified that she no longer has an ostomy or a drain.

Findings of Fact

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

1. On 10/30/2025, a prior authorization request ("PA") for PCA services was received on appellant's behalf from her PCA provider, and it is a re-evaluation request for the dates of service of 12/08/2025 to 12/07/2026 (Testimony; Exhibit 4).
2. In the PA request for PCA services (Exhibit 4), the provider requested 62:30 day/evening hours per week (Testimony; Exhibit 4).
3. The appellant is an adult woman who lives in the community. She has a [REDACTED]
[REDACTED]. In addition, she has the following diagnoses:



(Exhibit 4.)

4. On 11/06/2025, MassHealth modified the PCA request to 20:15 day/evening hours per week. Modifications were made to the request in the activities of daily living (“ADL”) task of mobility/stairs; bathing; grooming/nail care; grooming/other; hair care; dressing, eating at night; toileting; medication prefill; assistance administering medications; glucose monitoring; and ostomy care. Modifications were made to the request for assistance with instrumental activities of daily living (“IADLs”) of laundry; and equipment maintenance (Testimony; Exhibit 4).
5. The appellant’s PCA provider requested 5 minutes, 4 times per day, 7 days per week (5 X 4 X 7) for assistance with mobility – Stairs. The provider noted that “she is more uncomfortable. She has been diagnosed with [REDACTED] side adding to the need for assistance with mobility. She is experiencing increased pain, she is less stable, fears falling. She needs assistance on stairs, she needs maximum assistance with all transfers: in and out of bed, on and off recliner/commode, etc. She is still experiences nearly constant pain – especially her left side of body, starting with her past surgical site (left side where spleen and most of her pancreas was removed) (Testimony; Exhibit 4).
6. MassHealth denied the time requested for assistance with mobility – stairs (Testimony; Exhibit 4).
7. The time requested for mobility – stairs is for assisting the appellant up and down the stairs

outside of her home (Testimony).

8. The appellant has not requested PCA time for assistance to and from medical appointments (Testimony).
9. The appellant's PCA provider requested 30 X 1 X 7 for assistance with bathing and 15 X 1 X 7 for assistance with sponge/bed bath and drying. The provider noted that the appellant needs physical assistance with showering activity, including routine transfers; physical assist w/sponge/bed bath and drying, including routine transfers (Testimony; Exhibit 4).
10. MassHealth initially modified the request for assistance with bathing to 15 X 1 X 7 for all bathing activities; however, after hearing the appellant's testimony, MassHealth approved 25 X 1 X 7 for daily bathing and 12 X 1 X 7 for a daily quick wash (Testimony; Exhibit 4).
11. The appellant's provider requested 3 X 1 X 7 for assistance with grooming – hair care. The provider noted that the PCA provides assistance with hair combing due to her physical limitations. The appellant carries out oral care herself (Testimony; Exhibits 1 and 4).
12. MassHealth initially denied the time requested for hair care; however, at the fair hearing, the MassHealth representative restored all time as requested for hair care (3 X 1 X 7).
13. The appellant's PCA provider requested 25 X 1 X 7 and 12 X 1 X 7 for assistance with dressing; and 12 X 1 X 7 and 6 X 1 X 7 for assistance with undressing. The provider noted that the appellant requires assistance with this task

due to her becoming generally weaker (dx pancreatic cancer), and diff level so pain (primarily left side of body), her PCA provides maximum care to carry out her needs. Her hand tremors make dressing herself impossible. In AM: after completing her sponge bath, her PCA provides max assist with all aspects dressing/undressing. She chooses her attire for the day, her PCA provides maximum assistance. She is dressed appropriately for the day. In PM: prior to pm shower and shampoo, PCA assists in undressing. Past pm shower - PCA assists her in applying appropriate sleepwear for the night.

(Exhibit 4.)

14. MassHealth initially denied the PCA assistance for dressing and undressing, based on the appellant's clinical record that states she can perform these tasks with assistance, and she can participate with assistance; however, after hearing the appellant's testimony, MassHealth restored 25 X 1 X 7 for assistance with dressing and 12 X 1 X 7 for undressing (Testimony; Exhibit 4).

15. The appellant's provider requested 10 X 1 X 1 for assistance with fingernail and toenail care (Exhibit 4).
16. MassHealth approved 5 X 1 X 1 for assistance with fingernail care (Testimony).
17. Toenail care for a member with diabetes is not a covered service by the PCA program because of the danger of infections and wounds on the feet (Testimony).
18. The appellant's provider requested 7 X 1 X 7 for assistance with grooming – other (applying deodorant and body lotion).
19. MassHealth modified the request for assistance with grooming – other to 2 X 1 X 7.
20. The appellant's PCA provider requested 10 X 2 X 7 for assistance with overnight eating. The provider noted that

the appellant continues to be independent feeding herself. She has special utensils and a no spill cup. her PCA prepares all meals and snacks, sets up, cuts up, stands by to assist her as needed, and cleans up each time. PCA provides assistance with fluids for her to take in bed during night.

(Exhibit 4).
21. MassHealth denied the time for assistance with overnight eating (Exhibit 4).
22. The assessment included with the PA request states the appellant is independent with eating and drinking (Testimony; Exhibit 4).
23. No PCA time was requested for assistance with eating during the day, showing that the appellant is independent. For nighttime feeding, the PCA prepares a "glass of water" to bring to the appellant at night (Testimony).
24. The appellant's provider requested 5 X 6 X 7 for assistance with bladder care and 10 X 2 X 7 for assistance with bowel care. The provider noted that

For bladder care: she senses need to void and/or defecate. She has a bedside commode, uses this if in bedroom or living room due to location of her bedroom. She needs mod PCA assist getting on/off toilet seat or bedside commode seat) - toilet hygiene and clothing mgmt. She wears panty liner +/- pads, pullups, as needed. Bowel care: she senses need to defecate - often has loose +/- diarrhea stools requiring PCA to provide assist w/ toileting and clothing mgmt. Due to the irrigation device at the past surgical site on L side of her body, her PCA must be careful to keep the site intact.

During the night, she often has BMs. PCA assists her to/from bedside commode and provides hygiene and clothing mgmt.

(Testimony; Exhibit 4).

25. MassHealth initially denied the request for assistance with toileting. The MassHealth representative testified that according to the documentation included with the PA, the appellant is able to perform toileting independently (Exhibit 4).
26. After hearing the appellant's testimony regarding her needs for assistance with toileting, the MassHealth representative responded that she would restore 5 X 6 X 7 for assistance with bladder care and 5 X 2 X 7 for assistance with bowel care. In addition, MassHealth approved 5 X 2 X 7 for overnight assistance in and out of bed for toileting needs and 5 X 2 X 7 for overnight assistance with toileting (Testimony).
27. The appellant's PCA provider requested 15 X 1 X 1 for assistance with prefilling the appellant's medication planner. The provider noted that the PCA prefills the appellant's medication planner weekly (Exhibit 4).
28. MassHealth initially denied the time requested for assistance with prefilling the appellant's medication planner; however, after hearing the appellant's testimony, the requested time was approved in full (15 X 1 X 1) (Testimony).
29. The appellant's provider requested 5 X 4 X 7 and 10 X 2 X 7 for assistance with medication administration. The provider noted that the appellant's "PCA administers medications 4x/day and 1 med 7x/day for neuropathy (gabapentin) (Exhibit 4).
30. MassHealth initially denied the request for assistance with medication administration. The MassHealth representative testified that the documentation included with the PA indicates the appellant has significant functional ability to perform her medication administration (Testimony; Exhibit 4).
31. After hearing the appellant's testimony, MassHealth restored 3 X 3 X 7 for assistance with medication administration (Testimony).
32. The appellant's provider requested 3 X 3 X 7 for assistance with glucometer checks. The provider noted that "the PCA does glucometer test for blood glucose level three times a day, has been running 90-200" (Exhibit 4).
33. MassHealth initially denied the request for assistance with glucometer checks; however, at the fair hearing, after hearing the appellant's testimony, the MassHealth representative restored the time, as requested (3 X 3 X 7) (Testimony).

34. The appellant's PCA provider requested 75 X 1 X 1 for assistance with laundry (Exhibit 4).
35. MassHealth initially modified the time requested for assistance with laundry to 60 X 1 X 1; however, at the fair hearing, after hearing the appellant's testimony, MassHealth restored all time requested for this task (75 X 1 X 1).
36. The appellant's PCA provider requested 91 X 1 X 1 for assistance with maintaining her medical equipment. The provider noted that the PCA
- cleans and maintains 3 items used for mobility and safety.
 - rollator walker
 - shower chair
 - bedside commode.
- (Exhibit 4).
37. Based on the appellant's testimony at the fair hearing, MassHealth approved 45 X 1 X 1 for assistance with equipment maintenance (Testimony).
38. The appellant's provider requested 10 X 2 X 7 for assistance with ostomy care (Exhibit 4).
39. MassHealth denied the request for assistance with ostomy care.
40. The appellant does not have an ostomy (Testimony).

Analysis and Conclusions of Law

Regulations at 130 CMR 450.204 described medical necessity, as follows:

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 (emphasis added).

Regulations at 130 CMR 422.412 describe non-covered PCA 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;
- (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.

To qualify for services under the PCA program, the member must meet the conditions defined at 130 CMR 422.403, below:

(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
- (4) The MassHealth agency has determined that the PCA services are medically necessary and has granted a prior authorization for PCA services.

The type of PCA services available are described in 130 CMR 422.410 below:

- (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/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 tubefeeding 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 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 personal care 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 personal care 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.

The appellant has the burden "to demonstrate the invalidity of the administrative determination." See *Andrews vs. Division of Medical Assistance*, 68 Mass. App. Ct. 228. Moreover, the burden is on the appealing party to demonstrate the invalidity of the administrative determination. See *Fisch v. Board of Registration in Med.*, 437 Mass. 128, 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).

MassHealth modified the appellant's request for PCA services. Modifications were made to the request in the activities of daily living ("ADL") tasks of mobility/stairs; bathing; grooming/nail care; grooming/other; hair care; dressing, eating at night; toileting; medication prefill; assistance administering medications; glucose monitoring; and ostomy care. Modifications were made to the request for assistance with instrumental activities of daily living ("IADLs") of laundry; and equipment maintenance.

At the fair hearing, after hearing the appellant's testimony, MassHealth restored all time, as requested in the following areas:

- Hair care – 3 X 1 X 7;
- Bladder care – 5 X 6 X 7;
- Medication Planner Filling – 15 X 1 X 1;
- Glucose Monitoring – 3 X 3 X 7;
- Laundry – 75 X 1 X 1;
- Equipment Maintenance – 45 X 1 X 1;
- Overnight Toileting – 5 X 2 X 7;
- Overnight Toileting Transfers – 5 X 2 X 7.

This portion of the appeal, concerning the above areas where MassHealth originally modified the time requested, but at the fair hearing restored all time, is dismissed.¹

¹ See 130 CMR 610.051.

Mobility – Stairs

The appellant's PCA provider requested 5 minutes, 4 times per day, 7 days per week (5 X 4 X 7) for assistance with mobility – Stairs. The request was for assistance going up and down stairs from the outside of the home into/out of the home. MassHealth denied the request for assistance with mobility-stairs because the request for assistance out of the home, which is only a covered PCA service when the appellant is going to or from a medical appointment. The appellant has not requested PCA time for medical appointments. MassHealth's denial of PCA time for mobility – stairs is supported by the facts in the hearing record and the regulations. This portion of the appeal is denied.

Bathing

The appellant's PCA provider requested 30 X 1 X 7 for assistance with bathing and 15 X 1 X 7 for assistance with sponge/bed bath and drying. The provider noted that the appellant needs physical assistance with showering activity, including routine transfers; physical assist w/sponge/bed bath and drying, including routine transfers. MassHealth initially modified the request for assistance with bathing to 15 X 1 X 7 for all bathing activities; however, after hearing the appellant's testimony, MassHealth approved 25 X 1 X 7 for daily bathing and 12 X 1 X 7 for a daily quick wash. The appellant testified that she cannot reach higher than her shoulder with her left arm, making it necessary that she receive assistance with her bathing. The appellant's testimony is credible; however, it does not meet the burden of showing MassHealth's modified time for assistance with bathing does not meet her needs. This portion of the appeal is therefore denied.

Dressing

The appellant's PCA provider requested 25 X 1 X 7 and 12 X 1 X 7 or assistance with dressing; and 12 X 1 X 7 and 6 X 1 X 7 for assistance with undressing. The provider noted that the appellant requires assistance with this task.

MassHealth initially denied the PCA assistance for dressing and undressing, based on the appellant's clinical record that states she can perform these tasks with assistance, or she can participate with assistance; however, after hearing the appellant's testimony, MassHealth restored 25 X 1 X 7 for assistance with dressing and 12 X 1 X 7 for undressing. Although the time for each instance of assistance for dressing/undressing was approved, the number of episodes per day was not. The appellant requested dressing twice a day and undressing twice a day.

At the fair hearing, the appellant's testimony supported MassHealth's modified approval for dressing and undressing. Accordingly, this portion of the appeal is denied.

Grooming/nail care

The appellant's provider requested 10 X 1 X 1 for assistance with fingernail and toenail care. MassHealth approved 5 X 1 X 1 for assistance with fingernail care. The time for toenail care was denied because, according to the MassHealth representative, the appellant's foot care, including trimming and caring for toenails, is not a covered service under the PCA program for members with diabetes. This task must be performed by a podiatrist or other health care professional who has professional training/education to treat members who have diabetes. The purpose is because a PCA may nick the skin and open the appellant up to an infection or a wound. MassHealth's denial of time for toenail is supported by the regulations and facts in the hearing record. This portion of the appeal is denied.

Grooming/other

The appellant's provider requested 7 X 1 X 7 for assistance with grooming – other (applying deodorant and body lotion). MassHealth modified the request for assistance with grooming – other to 2 X 1 X 7. The appellant provided credible testimony that she is unable to lift her arms; however, there is no evidence that she requires more than 2 minutes per day for applying deodorant and body lotion. This portion of the appeal is denied.

Eating at night

The appellant's PCA provider requested 10 X 2 X 7 for assistance with overnight eating. The provider noted that

the appellant continues to be independent feeding herself. She has special utensils and a no spill cup. her PCA prepares all meals and snacks, sets up, cuts up, stands by to assist her as needed, and cleans up each time. PCA provides assistance with fluids for her to take in bed during night.

MassHealth denied the time for assistance with overnight eating, basing the decision on the fact that the appellant did not request time for daytime eating, therefore, she should be able to independently eat during the nighttime. The appellant testified that this time was requested for the PCA to bring her a large container of water for her to drink during the night. There is no evidence in the hearing record to show the appellant needs a PCA to bring her water during the nighttime. She has not shown that the water container cannot be provided at the beginning of the night for her to drink when the PCA is not present. This portion is therefore denied.

Toileting (bowel care)

The appellant's provider requested 5 X 6 X 7 for assistance with bladder care and 10 X 2 X 7 for assistance with bowel care. The provider noted that

For bladder care: she senses need to void and/or defecate. She has a bedside commode, uses this if in bedroom or living room due to location of her bedroom. She needs mod PCA assist getting on/off toilet seat or bedside commode seat) - toilet hygiene and clothing mgmt. She wears panty liner +/- pads, pullups, as needed. Bowel care: she senses need to defecate - often has loose +/- diarrhea stools requiring PCA to provide assist w/ toileting and clothing mgmt. Due to the irrigation device at the past surgical site on L side of her body, her PCA must be careful to keep the site intact. During the night, she often has BMs. PCA assists her to/from bedside commode and provides hygiene and clothing mgmt.

MassHealth initially denied the request for assistance with toileting. The MassHealth representative testified that according to the documentation included with the PA, the appellant is able to perform toileting independently. After hearing the appellant's testimony regarding her needs for assistance with toileting, the MassHealth representative responded that she would restore 5 X 2 X 7 for assistance with bowel care. MassHealth also approved six instances of assistance for bladder care, bringing the number of toileting instances to eight a day. The appellant has not shown that the time approved for bowel care does not meet her needs. Accordingly, this portion of the appeal is denied.

Assistance administering medications

The appellant's provider requested 5 X 4 X 7 and 10 X 2 X 7 for assistance with medication administration. The provider noted that the appellant's "PCA administers medications 4x/day and 1 med 7x/day for neuropathy (gabapentin)." MassHealth initially denied the request for assistance with medication administration. The MassHealth representative testified that the documentation included with the PA indicates the appellant has significant functional ability to perform her medication administration. After hearing the appellant's testimony, MassHealth restored 3 X 3 X 7 for assistance with medication administration, reducing the instances from the requested four a day to three a day. MassHealth also modified the time for task to three minutes. The appellant's testimony is credible; however, she has not shown that the time, as modified by MassHealth, is not adequate to meet her needs. This portion of the appeal is denied.

Ostomy Care

The appellant's provider requested 10 X 2 X 7 for assistance with ostomy care. MassHealth denied the request for assistance with ostomy care. The appellant does not have an ostomy. Accordingly, the denial of time requested for ostomy care is supported by the regulations and the facts in the hearing record. This portion of the appeal is denied.

For the foregoing reasons, this appeal is dismissed in part; denied in part.

Order for MassHealth

Release aid pending. Restore all time, as requested, in the areas of:

- Hair care – 3 X 1 X 7;
- Bladder care – 5 X 6 X 7;
- Medication Planner Filling – 15 X 1 X 1;
- Glucose Monitoring – 3 X 3 X 7;
- Laundry – 75 X 1 X 1;
- Equipment Maintenance – 45 X 1 X 1;
- Overnight Toileting – 5 X 2 X 7;
- Overnight Toileting Transfers – 5 X 2 X 7.

For all other modifications, proceed with modifications, pursuant to hearing record.

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, Division of Medical Assistance, at the address on the first page of this decision.

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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

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