

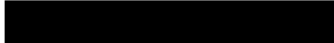
**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved in part; denied in part	Appeal Number:	2518025
Decision Date:	2/27/2026	Hearing Date:	1/12/2026
Hearing Officer:	Cynthia Kopka		

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:	Approved in part; denied in part	Issue:	Prior authorization – PCA services
Decision Date:	2/27/2026	Hearing Date:	1/12/2026
MassHealth’s Rep.:	Heather Adams, RN	Appellant’s Rep.:	██████
Hearing Location:	Quincy (remote)	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

By notice dated November 12, 2025, MassHealth denied Appellant’s request for prior authorization of personal care attendant (PCA) services. Exhibit 1. Appellant filed this timely appeal on December 8, 2025. Exhibit 2. 130 CMR 610.015(B). Denial of prior authorization is a valid basis for appeal. 130 CMR 422.417(B) and 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied Appellant’s request for prior authorization of PCA services.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 422.412 and 450.204, in denying Appellant’s prior authorization request for PCA services.

Summary of Evidence

A registered nurse and clinical appeals reviewer represented MassHealth at remote hearing and submitted records in support. Exhibit 4. Appellant's parent appeared at remote hearing and submitted documents for hearing. Exhibits 2 and 5. A summary of testimony and documents follows.

Appellant is [REDACTED] years old with a primary diagnosis of autistic disorder and medical history of developmental delays, cognitive deficits, poor fine motor skills, and sensory disorder. Appellant lives with family and attends preschool four days per week, six hours per day, receives educational support, speech and language therapy, occupational therapy, and applied behavior analysis services (ABA). Appellant is non-verbal. Notes provided with the request indicated that Appellant is independent with eating finger foods. Exhibit 4 at 11.

On October 31, 2025, Appellant's Personal Care Management Agency (PCMA), [REDACTED], submitted an initial evaluation for PCA services on Appellant's behalf, requesting 7.75 hours per week of PCA services per week. On November 12, 2025, MassHealth denied the request because the clinical record submitted did not support that Appellant requires physical assistance with two or more activities of daily living (ADLs) to qualify for the PCA program. Exhibit 1. The MassHealth representative testified that the denial was also due to Appellant's age. Based on the *Schematics of Age Ranges at which Non-Disabled Children Master Functional Items* (50% percentile) ("*Schematics*") (contained in the record as a part of the PCA Operating Standards at Exhibit 6), a non-disabled child at Appellant's age would still require parental assistance in all ADL tasks, though could participate in some areas. The PCA Operating Standards also set forth that a parent is required to be the second person when two people are required to perform a task, and that special consideration may be given to behavioral needs that demonstrate a safety risk for the child or others. The PCA Operating Standards state that PCA time is not allowed when requested for purposes of restraint. Exhibit 6 at 62-63. There must be documentation supporting the medical necessity in the PCA evaluation. The MassHealth representative emphasized that the documentation provided with the prior authorization request did not support additional hands-on assistance from someone other than a parent for the requested ADLs and a deferral response from the PCMA was not sufficient to approve time.

Appellant's parent argued that Appellant requires hands-on assistance with two or more ADLs and offered evidence in the form of test results showing that Appellant is performing at less than the first percentile of peers at daily living skills. Exhibit 5 at 8, 10. This level of delay is why Appellant requires assistance. Appellant's ABA provider offered a letter explaining Appellant's delays in daily functioning. *Id.* at 27-28. Appellant's ABA provider detailed the Vineland-3 standardized measure of adaptive behavior and noted that Appellant is 40.5 raw score points below the average for his age. The BCBA noted that Appellant is not consistently cooperating in dressing and undressing, cooperating in washing of his hands and face, feeding self with spoon (with or without spilling), taking off shoes and socks, drinking from an open cup (with or without spilling), indicating he needs a diaper change, pulling up clothing with an elastic waist, using a toilet, wiping or blowing his nose. *Id.* at 27.

Appellant also has sensory disorder and cannot regulate sensory input without adult support. *Id.* at 55. Each of the ADL tasks with which Appellant requires assistance are sensory-rich experiences. Appellant's occupational therapist (OT) documented that Appellant avoids or becomes distressed during such activities. *Id.* at 55. Appellant's parent testified that Appellant will elope, resist, thrash, and kick when faced with these ADLs. Each ADL requires two people to perform, one to hold Appellant and the other to perform the task.

Based on testimony provided, the MassHealth representative testified that she would reverse the denial and offer time for assistance for the requested ADLs. The parties did not agree on all of the time restored. The MassHealth representative testified that the decision not to allow all the time requested was based on the fact that a non-disabled individual at Appellant's age would still require parental assistance to perform these tasks. The PCA time approved represents the additional time needed for a second person to assist with the hands-on care and not for other items such as restraint, redirection, cueing, or supervision. Appellant's parent appreciated the approval and the restoration of some of the time, but argued that more time was needed given how delayed Appellant is as compared to peers in these tasks.

In the area of bathing, Appellant's PCMA requested 15 minutes, 1 time per day, 7 days per week of assistance. Exhibit 4 at 20. At hearing, the MassHealth representative agreed to restore 10 minutes, 1 time per day, 7 days per week. The MassHealth representative testified regardless of motor skills, any child at Appellant's age would not be able to perform bathing without a parent being largely involved to fill and empty the tub, help the child transfer in and out of the tub, and wash and dry thoroughly.

Appellant's parent testified that Appellant struggles with bathing due to the sensory nature of the task and that he does not like the water. It can be a three person job to bathe Appellant because he elopes and cannot control his body movements. Appellant's parent testified that the doctor's and OT notes support this. To complete bathing, one person must hold Appellant while he is in the tub to keep Appellant and everyone safe, otherwise he may slip when he tries to elope. The other participant performs the washing and drying part of the task.

For grooming, Appellant's PCMA requested 2 minutes, 2 times per day, 7 days per week for oral care and 2 minutes, 1 time per day, 7 days per week for hair care. Exhibit 4 at 22. At hearing, the MassHealth representative agreed to restore 1 minute, 2 times per day, 7 days per week for oral care and 1 minute, 1 time per day, 7 days per week for hair care. Appellant's parent testified that it is a two person job to brush Appellant's teeth because he will not keep his mouth open and will thrash his limbs. Appellant also struggles with cutting and brushing hair due to the sensory nature of the task.

For dressing, Appellant's PCMA requested 10 minutes, 1 time per day, 7 days per week. Exhibit 4 at 24. At hearing, MassHealth approved 5 minutes, 1 time per day, 7 days per week. For undressing,

the PCMA requested 5 minutes, 1 time per day, 7 days per week. *Id.* MassHealth approved 3 minutes, 1 time per day, 7 days per week at hearing. Appellant's parent testified that it takes 2 people to dress Appellant for safety because he will thrash and kick. Appellant's parent testified that an adult must physically place Appellant's arms and legs into his clothing because he lacks motor planning and cooperation. Appellant will also remove his clothes inappropriately.

For bladder care, Appellant's PCMA requested 5 minutes, 6 times per day, 3 days per week (non-school days) and 5 minutes, 4 times per day, 4 days per week (school days). Exhibit 4 at 26. The MassHealth representative approved 3 minutes, 6 times per day, 3 days per week (non-school days) and 3 minutes, 4 times per day, 4 days per week (school days). For bowel care, Appellant's PCMA requested, and MassHealth approved, 5 minutes, 1 time per day, 7 days per week. *Id.*

Appellant's parent testified that Appellant is not toilet trained and fully dependent for diaper changes, clothing management, hygiene, and waste disposal. Appellant is resistant to diaper changes and will roll into a ball to avoid a change. Therefore, it takes two people to perform the task. Appellant scored a zero on the Vineland test for toileting. Exhibit 5 at 19. Appellant is nonverbal and cannot share when he needs a change.

Findings of Fact

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

1. Appellant is [REDACTED] years old with a primary diagnosis of autistic disorder and prior medical history of developmental delays, cognitive deficits, poor fine motor skills, and sensory disorder. Appellant lives with family and attends preschool four days per week, six hours per day, receives educational support, speech and language therapy, OT, and ABA. Appellant is non-verbal.
2. On October 31, 2025, the PCMA submitted an initial evaluation for PCA services on Appellant's behalf, requesting 7.75 hours per week of PCA services.
3. On November 12, 2025, MassHealth denied the request because the clinical record submitted did not support that Appellant requires physical assistance with two or more ADLs. Exhibit 1.
4. Appellant filed a timely appeal on December 8, 2025. Exhibit 2.
5. For assistance with bathing, the PCMA requested 15 minutes, 1 time per day, 7 days per week for physical assistance with bathing. Exhibit 4 at 20.
6. At hearing, MassHealth approved 10 minutes, 1 time per day, 7 days per week for a second

person to assist with the hands on task of bathing.

7. According to the *Schematics*, the age ranges at which a non-disabled child masters bathing tasks is as follows:
 - Tries wash: 1.5 years
 - Obtains soap and washcloth: 3 years
 - Washes body thoroughly: 3-3.5 years
 - Dries body thoroughly: 4.5-5 years
 - Washes/dries face thoroughly: 4.5-5.5 years.Exhibit 6 at 83.
8. For bathing, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 5 minutes of minimal PCA assistance, 10 minutes for moderate PCA assistance, 15 minutes for maximum PCA assistance, and 20 minutes for total PCA dependence. Exhibit 7 at 5.
9. For assistance with grooming, the PCMA requested 2 minutes, 2 times per day, 7 days per week for oral care and 2 minutes, 1 time per day, 7 days per week for hair care. Exhibit 4 at 22.
10. At hearing, MassHealth approved 1 minute, 2 times per day, 7 days per week for oral care and 1 minute, 1 time per day, 7 days per week for hair care.
11. According to the *Schematics*, the age ranges at which a non-disabled child masters relevant grooming tasks is as follows:
 - Brushes hair: 2-2.5 years
 - Managing Tangles/Parts: 6-6.5 years
 - Prepares toothbrush and thoroughly brushes teeth: 4.5 years.Exhibit 6 at 82.
12. For oral care, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 1 minutes of minimal PCA assistance, 2 minutes for moderate PCA assistance, 2 minutes for maximum PCA assistance, and 2 minutes for total PCA dependence. Exhibit 7 at 5.
13. For hair brushing, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 1 minutes of minimal PCA assistance, 2 minutes for moderate PCA assistance, 3 minutes for maximum PCA assistance, and 4 minutes for total PCA dependence. Exhibit 7 at 5.
14. For dressing, Appellant's PCMA requested 10 minutes, 1 time per day, 7 days per week. For undressing, the PCMA requested 5 minutes, 1 time per day, 7 days per week. Exhibit 4 at 24.

15. At hearing, MassHealth approved 5 minutes, 1 time per day, 7 days per week for dressing and 3 minutes, 1 time per day, 7 days per week at hearing.
16. According to the *Schematics*, a child Appellant's age has mastered the following dressing tasks: putting on socks, putting on elastic pants, removing pants, putting on a pullover shirt, and removing shirt. Exhibit 6 at 85.
17. For dressing, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 1 minutes of minimal PCA assistance, 3 minutes for moderate PCA assistance, 5 minutes for maximum PCA assistance, and 7 minutes for total PCA dependence. For undressing, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 1 minutes of minimal PCA assistance, 2 minutes for moderate PCA assistance, 3 minutes for maximum PCA assistance, and 5 minutes for total PCA dependence. Exhibit 7 at 6.
18. Appellant's Vineland test results show a score of zero for putting on and taking off pullover shirts and pulling up elastic pants. Appellant's test results show a score of 1 for taking off shoes and socks. Exhibit 5 at 19.
19. For bladder care, Appellant's PCMA requested 5 minutes, 6 times per day, 3 days per week (non-school days) and 5 minutes, 4 times per day, 4 days per week (school days). Exhibit 4 at 26.
20. At hearing, MassHealth approved 3 minutes, 6 times per day, 3 days per week (non-school days) and 3 minutes, 4 times per day, 4 days per week (school days).
21. According to the *Schematics*, a child Appellant's age has mastered bladder management by age 3.5-4.5. Exhibit 6 at 85.
22. For bladder care, MassHealth's PCA Guidelines for pediatric consumers between their third and fifth birthday allow for 1 minutes of minimal PCA assistance, 2 minutes for moderate PCA assistance, 3 minutes for maximum PCA assistance, and 5 minutes for total PCA dependence.
23. For bowel care, Appellant's PCMA requested, and MassHealth approved, 5 minutes, 1 time per day, 7 days per week. *Id.*

Analysis and Conclusions of Law

Pursuant to 130 CMR 422.403(C), MassHealth will pay for PCA services for members appropriately cared for at home when the following conditions are met:

- (1) The PCA services are authorized for the member in accordance with 130 CMR 422.416.
- (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 PCM agency, requires physical assistance with two or more of the ADLs as defined in 130 CMR 422.410(A).
- (4) The MassHealth agency has determined that the PCA services are medically necessary.

Pursuant to 130 CMR 450.204(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.

MassHealth covers assistance with the following tasks under the PCA program:

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:

- (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 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,¹ 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.

Under 130 CMR 422.412, MassHealth does not cover any of the following as part of the PCA

¹ A "family member" is defined as "spouse of the member, the parent of a minor member, including an adoptive parent, or any legally responsible relative." 130 CMR 422.402.

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.

Here, MassHealth had originally denied Appellant's request for PCA assistance because the documentation provided did not support the medical necessity for assistance with two or more ADLs given Appellant's age. At hearing, MassHealth received sufficient testimonial and documentary evidence to reverse the denial and approve time. Appellant's parent appreciated the adjustment but argued that the time approved by the MassHealth representative was insufficient given Appellant's delays as compared to other peers.

Given the testimony, documentary evidence, *Schematics*, MassHealth's PCA guidelines, and the restrictions on the PCA program specifically with regard to restraint, MassHealth's decision to approve the following time was not made in error:

Bathing: 10 minutes, 1 time per day, 7 days per week;

Hair care: 1 minute, 1 time per day, 7 days per week;

Bladder care: 3 minutes, 6 times per day, 3 days per week (weekend) and 3 minutes, 4 times per day, 4 days per week (school days); and

Bowel care: 5 minutes, 1 time per day, 7 days per week.

However, Appellant's parent has demonstrated a need for additional time for the following tasks, given Appellant's delays as compared to the ability of non-disabled peers to perform certain parts of the task:

Oral care: 2 minutes, 2 times per day, 7 days per week;
Dressing: 7 minutes, 1 time per day, 7 days per week; and
Undressing: 5 minutes, 1 time per day, 7 days per week.

Accordingly, this appeal is approved in part and denied in part.

Order for MassHealth

Rescind the November 12, 2026 denial and approve the following PCA time for dates of service December 18, 2025 through December 17, 2026:

Bathing: 10 minutes, 1 time per day, 7 days per week;
Hair care: 1 minutes, 1 time per day, 7 days per week;
Bladder care: 3 minutes, 6 times per day, 3 days per week (weekend) and 3 minutes, 4 times per day, 4 days per week (school days);
Bowel care: 5 minutes, 1 time per day, 7 days per week;
Oral care: 2 minutes, 2 times per day, 7 days per week;
Dressing: 7 minutes, 1 time per day, 7 days per week; and
Undressing: 5 minutes, 1 time per day, 7 days per week.

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, or 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.

Cynthia Kopka
Hearing Officer
Board of Hearings

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