



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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ELIZABETH CONNOLLY
Acting Commissioner

VALERIE HARR
Director

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES

D.B.,
PETITIONER,
v.
UNITED HEALTHCARE,
RESPONDENT.
ADMINISTRATIVE ACTION
FINAL AGENCY DECISION
OAL DKT. NO. HMA 03869-15

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the Initial Decision, the documents in evidence, the contents of the OAL case file, United Healthcare's exceptions to the Initial Decision and Petitioner's reply. Procedurally, the time period for the Agency Head to render a Final Agency Decision is August 17, 2015, in accordance with N.J.S.A. 52:14B-10 which requires an Agency Head to adopt, reject or modify the Initial Decision within 45 days of the agency's receipt. The Initial Decision was received on July 1, 2015.

Based upon my review of the record, I hereby MODIFY the Initial Decision modifying Respondent's reduction of Petitioner's Personal Care Assistant ("PCA") services from 20 to 10 hours per week and instead ordering the provision of 18 hours per week. For the reasons which follow, I find that a reassessment should be performed.

PCA services are non-emergency, health related tasks to help individuals with activities of daily living and with household duties essential to the individual's health and comfort, such as bathing, dressing, meal preparation and light housekeeping. The decision regarding the appropriate number of hours is based on the tasks necessary to meet the specific needs of the individual and the hours necessary to complete those tasks.

On November 3, 2014, D.B.'s HMO, United Healthcare, conducted a scheduled assessment. Using the PCA assessment tool, the HMO nurse considered ten categories of activities of daily living (ADLs) and assigned numerical scores based on D.B.'s need for assistance and determined that the needed services can be provided within 6 hours per week. However, after a review by United Healthcare's Medical Director, D.B. was approved for 10 hours per week. During the pendency of this appeal, United Healthcare performed a reassessment on April 20, 2015. Using the newly approved PCA assessment tool, the nurse determined that Petitioner needed 7 hours of services per week.¹ The Medical Director increased this number to 10 per week. Unfortunately, the nurses who performed the assessments did not testify at the hearing and thus Petitioner and the ALJ were unable to question them about their findings.

¹ The State approved this PCA tool on January 1, 2015.

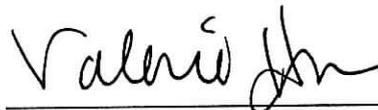
A subsequent review by United Healthcare's Medical Director, following both assessments, resulted in Petitioner being approved for additional hours per week. Thus, it is clear that the Medical Director took into account Petitioner's particular needs and circumstances as evidenced by the fact that he awarded an additional 4 and then 3 hours of PCA services per week. Despite this increase in hours, the ALJ nevertheless concluded that United Healthcare underestimated the extent of Petitioner's care needs and excessively reduced his hours. She concluded that an additional 8 hours should be restored. Unfortunately, the ALJ fails to specify how she arrived at an additional 8 hours-- i.e., what additional tasks are necessary to meet D.B.'s specific needs and the hours necessary to complete those tasks.

For this reason, coupled with the fact that neither of the assessing nurses testified at the hearing, I find that a new assessment is warranted. Should Petitioner disagree with the results of this assessment, he may request another fair hearing at that point.

THEREFORE, it is on this ^{5th} day of August 2015,

ORDERED:

That United Healthcare perform a reassessment. Petitioner's services shall be continued at 20 hours per week pending the reassessment.



Valerie J. Harr, Director
Division of Medical Assistance
and Health Services