

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON REFERRAL
BY THE COMMISSIONER OF HEALTH & SOCIAL SERVICES**

In the Matter of)
)
D L) OAH No. 21-0440-MDS
) Agency No.
_____)

NOTICE OF PARTIAL ADOPTION

On May 19, 2021, the Administrative Law Judge (ALJ) that heard this case issued a proposed decision. After a review of that proposed decision, the proposal for action submitted by the Division of Senior and Disabilities Services,¹ and the underlying evidence, including the testimony of the witnesses, the undersigned, by delegation from the Commissioner of Health and Social Services, in accordance with AS 44.64.060(e)(4), rejects one factual finding as follows:

Multi-level Locomotion._The proposed decision found that Ms. L should receive limited assistance (score of 2/2) with multi-level locomotion three times days. As pointed out by the Division, and subsequently acknowledged by the ALJ, assistance with multi-level locomotion has a regulatory limit of twice daily. Accordingly, the portion of the proposed decision that provides Ms. L with personal care services (PCS) for multi-level locomotion is revised. Ms. L is to receive limited assistance (score of 2/2) with multi-level locomotion twice daily, for a total weekly frequency of 14.

The remainder of the proposed decision is adopted without change. A review of the entire record, including listening to the recording of the hearing, shows that the Division, which had the burden of proof to reduce Ms. L’s PCS, did not meet its burden.

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 17th day of June, 2021.

By: Signed _____
Jillian Gellings
Project Analyst
Alaska Dept. of Health and Social Services

[This document has been modified to conform to the technical standards for publication. Names may have been changed to protect privacy.]

¹ Ms. L did not submit a proposal for action.

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DECISION

I. Introduction

D L was receiving 7.5 hours per week of Personal Care Services (PCS). On March 17, 2021, the Division of Senior and Disabilities Services (Division) notified Ms. L that those services were being eliminated in their entirety. Ms. L requested a hearing to challenge the termination of her PCS.

Ms. L’s hearing was held on May 12, 2021. Ms. L did not participate. She was represented by her son, and power-of-attorney, K L, who testified on her behalf. Terri Gagne, a Fair Hearing representative with the Division, represented the Division. Melissa Meade, a Health Program Manager I with the Division, testified for the Division.

The evidence provided at hearing demonstrated that it is more likely true than not true that Ms. L continues to be eligible for PCS, although with some slight changes. Accordingly, the termination of her PCS is reversed, and she is to receive PCS as specified in detail below.

II. The Personal Care Service Determination Process

The Medicaid program authorizes Personal Care Services (PCS) for the purpose of providing assistance to a Medicaid recipient whose physical condition causes functional limitations which “cause the recipient to be unable to perform, independently, or with an assistive device, the activities specified in 7 AAC 125.030.”² Those activities are broken down into eight specific “activities of daily living” (ADLs) – bed mobility, transfers, locomotion, dressing, eating, toileting, personal hygiene, and bathing³ -- and five specific “instrumental activities of daily living” (IADLs) – light meal preparation, main meal preparation, housework, laundry, and shopping.⁴ Some degree of hands-on assistance is required in order to qualify for

² 7 AAC 125.010(b)(1)(A)(iii).

³ 7 AAC 125.030(b).

⁴ 7 AAC 125.030(c). PCS are also provided for medication assistance, maintaining respiratory equipment, dressing changes, and wound care, medical escort, and passive range-of-motion exercises. 7 AAC 125.030(d). The regulation contains specific conditions that a recipient must satisfy to receive these specialized services.

PCS; PCS are not provided for activities that can “be performed by the recipient,”⁵ nor for “oversight and standby functions.”⁶

The Division assesses recipients by using the Consumer Assessment Tool (“CAT”) to score both eligibility for the PCS program and the amount of assistance needed for covered activities and services.⁷ For both ADLs and IADLs, the CAT provides recipients with a two-part numerical score to reflect the recipient’s ability to perform the activity and need for assistance in doing so. That score consists of a self-performance code, which rates a person’s ability to perform the activity, followed by a support code, which reflects the degree of assistance required to do so. These codes then dictate whether a recipient is eligible for PCS for the activity, and, if so, the amount of PCS time allocated to that activity.

The ADLs measured by the CAT are bed mobility, transfers, locomotion, dressing, eating, toilet use, personal hygiene, and bathing.⁸ For ADLs, the possible self-performance codes relevant to determining a PCS level are as follows:

0 – “Independent.” This code is used if help or oversight was provided no more than twice in the prior seven days.

1 – “Supervision.” This code is used if the person requires only “oversight, encouragement, or cueing” while performing the activity.

2 – “Limited Assistance.” This code is used if the person is “highly involved” in the activity” and “received physical help in guided maneuvering of limbs, or other nonweight-bearing assistance” three or more times in the last seven days or received physical help in guided maneuvering of limbs plus weight bearing assistance no more than twice in the last seven days.

3 – “Extensive Assistance.” This code is used where the person performed part of the activity, but over the past seven days received weight-bearing support and/or full caregiver performance of the activity three or more times.

4 – “Total Dependence.” This code is used where there has been full staff/care giver performance of the activity during the entire prior seven days.⁹

For ADLs, the possible support codes used to determine a service level reflect the “most support provided” over each 24-hour period during the prior seven days. The support codes are:

0 – The person required no set up or physical help.

1 – The person required only setup help.

⁵ 7 AAC 125.040(a)(4).

⁶ 7 AAC 125.040(a)(10).

⁷ See 7 AAC 125.020(a)(1). The CAT is itself a regulation, adopted in 7 AAC 160.900(d)(6).

⁸ Ex. D, pp. 17 – 20.

⁹ Ex. D, p. 17.

2 – The person required a one-person physical assist.

3 – The person required a physical assist from two- or more people.¹⁰

The independent activities of daily living (IADLs) measured by the CAT are light meal preparation, main meal preparation, light housekeeping, laundry, and shopping.¹¹ The CAT codes IADLs slightly differently than it does ADLs. The self-performance codes for IADLs are:

0 – “Independent either with or without assistive devices - no help provided.”

1 – “Independent with difficulty; the person performed the task but did so with difficulty or took a great amount of time to do it.”

2 – “Assistance / done with help - the person was somewhat involved in the activity, but help in the form of supervision, reminders, or physical assistance was provided.”

3 – “Dependent / done by others - the person is not involved at all with the activity and the activity is fully performed by another person.”¹²

The support codes for IADLs are also slightly different than the support codes for ADLs. The support codes for IADLs are:

0 – “No support provided.”

1 – “Supervision / cueing provided.”

2 – “Set-up help provided”

3 – “Physical assistance provided.”

4 – “Total dependence - the person was not involved at all when the activity was performed.”¹³

If an applicant/recipient has a self-performance code of 2 (limited assistance) in any of the ADLs of transfer, locomotion, eating, toilet use, dressing or bathing or a self-performance code of 1, 2, or 3 and a support code of 3 or 4 in any of the IADLs of light or main meal preparation, light housework, routine housework, grocery shopping or laundry, they are eligible for PCS.¹⁴

The codes assigned to a particular ADL or IADL determine how much PCS time a person receives for each occurrence of a particular activity. For instance, a person coded as requiring extensive assistance (code of 3) with bathing would receive 22.5 minutes of PCS time every day

¹⁰ Ex. D, p. 17.

¹¹ Ex. D, pp 37 – 38.

¹² Ex. D, p. 37.

¹³ Ex. D, p. 37.

¹⁴ Ex. D, p. 42.

he or she is bathed.¹⁵ The list of services, time allotted for each service based upon the severity of need, and the allowable frequencies for each service are all set out in the *Personal Care Services: Service Level Computation* instructions, which are adopted by reference into regulation.¹⁶

III. Introductory Facts

Ms. L is 93 years old. She lives with her son K L, his wife and their child, and several other people in the same house.¹⁷ Ms. L lives on the third floor of the home, where she has her own bedroom and bathroom, which she does not share. The common living areas in the home are located on the second floor of the home, as are some of the other bedrooms.¹⁸

Ms. L was receiving 7.5 hours of PCS based upon a 2017 assessment. She was receiving assistance with locomotion, both multi-level and to access medical appointments, bathing, and assistance with main meal preparation, housework, shopping, and laundry.¹⁹ There are two other PCS recipients in the home, one of whom receives full assistance with IADLs.²⁰

Ms. L was reassessed on August 24, 2020 to determine whether she continued to qualify to receive PCS and if so, the amount. That assessment was conducted by a Division employee, who did not testify at the hearing. The assessment found that Ms. L no longer required physical assistance with any form of locomotion, or bathing, and that she no longer needed physical assistance with meal preparation, and that she continued to need some physical assistance with housework, shopping, and laundry. However, the Division found that Ms. L was not eligible to receive PCS with any of the IADLs (main meal preparation, housework, shopping, and laundry) regardless of need because another person in the household also received PCS for IADLs.²¹ Following that assessment, the Division notified Ms. L on March 17, 2021, that she was no longer eligible for PCS.²²

Mr. L disagreed with the elimination of PCS. He testified that Ms. L actually needed an increase in certain services. The facts regarding the specific areas in dispute are addressed in detail in the Discussion portion below.

¹⁵ See Ex. D, p. 6.

¹⁶ Ex. D, pp. 6 – 7; 7 AAC 125.024(a); 7 AAC 160.900(d)(29).

¹⁷ Ex. D, pp. 12 – 13; Mr. L's testimony,

¹⁸ Mr. L's testimony.

¹⁹ Ex. D, p. 10; Ex. G.

²⁰ Mr. L's testimony; Ms. Meade's testimony.

²¹ Ex. D, pp. 1 – 3, 10, 18, 20, 37 – 38; Ms. Meade's testimony.

²² Ex. D, pp. 1 – 10.

Ms. L's recent medical records from March 24, 2021²³ show diagnoses of normocytic anemia, hypertension, osteoporosis, and gastroesophageal reflux disease. They also show that she has musculoskeletal symptoms but can walk with a slow gait. There is an April 16, 2021 Verification of Diagnosis form completed by Dr. W X which provides that Ms. L has diagnoses of osteoporosis, hypertension, osteoarthritis, and a thyroid nodule.²⁴

IV Discussion

A. Burden of Proof

Ms. L was previously approved for 7.5 hours of PCS per week. Because the Division is seeking to completely eliminate her PCS, it has the burden of proof for any reduction or termination of the PCS benefits. Because Ms. L not only opposes the elimination of her PCS, but maintains that she should receive additional PCS, she bears the burden of proof for any of the ADLs or IADLs for which she requests an increase. The burden of proof is by the preponderance of the evidence.²⁵ The parties can meet their burden of proof using any evidence on which reasonable people might rely in the conduct of serious affairs,²⁶ including such sources as written reports of firsthand evaluations of the patient. The relevant date for purposes of assessing the state of the facts is, in general, the date of the agency's decision under review.²⁷

B. Areas of Dispute

The disputed areas are the ADLs of multi-level locomotion, locomotion to access medical appointments, and bathing, and the IADLs of light meal preparation, main meal preparation, light housework, shopping, and laundry. Each of the disputed areas are addressed below. Prior to addressing each of the disputed items, it must be noted that the assessor was not a witness at the hearing, so there is no testimony to supplement or explain the written statements contained in the CAT. Mr. L, who testified about his mother's care needs, is knowledgeable about them because she has been residing in his home for about four years.

1. ADL - Locomotion – Multi-level and to Access Medical Appointments

Locomotion has several components, moving on a single level within the home, moving between levels in a multi-level home, and moving outside the home to access medical

²³ April 21, 2021 Fax from Business A Services, pp. 13 – 14, 17.

²⁴ April 21, 2021 Fax from Business A Services, p. 2.

²⁵ 7 AAC 49.135.

²⁶ 2 AAC 64.290(a)(1).

²⁷ See 7 AAC 49.170; *In re T.C.*, OAH No. 13-0204-MDS (Commissioner of Health & Soc. Serv. 2013) (<http://aws.state.ak.us/officeofadminhearings/Documents/MDS/HCW/MDS130204.pdf>).

appointments.²⁸ The assessor determined that Ms. L did not require assistance with any of these. It is undisputed that Ms. L does not need assistance with single-level locomotion.

Multi-level locomotion is disputed. Ms. L's bedroom is located on the third floor of the home. The home common areas are located on the second floor. In order to eat meals or spend time with other household members, Ms. L must go up and down the stairs. There is no stair glide or elevator. Ms. L's prior assessment from August 10, 2017 found that while Ms. L could walk without assistance on the single level of the home, she required balance assistance for going up and down the stairs. It provided Ms. L with limited assistance (self-performance code 2, support code 2) with multi-level locomotion twice daily, seven days per week.²⁹

Ms. L's August 24, 2020 assessment found that she was independent with multi-level locomotion. The only statement contained in the assessment under locomotion does not specifically address multi-level locomotion. It reads "CK denied use of any assistive devices. Walks independently both in the home and in the community. POA confirmed."³⁰ The Division determined that Ms. L should no longer receive PCs with multi-level locomotion.³¹

Mr. L testified that Ms. L experiences hypertension and vertigo and is frequently dizzy when she stands up. He initially testified that he stands at the bottom of the stairs and just watches to see if she needed help. He followed up by stating that she needed hands-on physical assistance approximately half of the time, which consisted of his essentially steadying her by holding onto her. He did not describe providing any weight-bearing assistance. He further testified that she makes about six trips up and down the stairs daily, which were for meals, spending time with other residents, and to get ready to leave the house for trips to the senior center. He also stated that she does not always come down for breakfast, which would mean one less round trip per day.

The thrust of Mr. L's testimony was that Ms. L needs hands-on stabilizing assistance about half of the time for transiting the stairs and that she makes as many as six trips up and down the stairs. On the other hand, there is nothing specifically addressing multi-level locomotion in the Division's 2020 assessment. As a result, the Division has not met its burden of proof to eliminate the PCS for multi-level assessment, and Ms. L has met her burden of proof

²⁸ Ex. D, pp. 17 – 18.

²⁹ Ex. G, p. 7.

³⁰ Ex. D, pp. 17 - 18.

³¹ Ex. D, pp. 2, 10, 18.

to increase her PCS for that task. Mr. L testified that she makes as many as six trips per day up and down the stairs. 50% of that would be assistance three times per day, seven days per week. Because the evidence shows only stabilizing hands-on physical assistance, rather than weight-bearing assistance, the assistance level remains the same, limited assistance (self-performance code 2, support code 2).

Ms. L was also receiving locomotion to access medical appointments two times per week based upon her August 2017 assessment.³² The Division's August 2020 assessment found that she no longer required assistance with that task and eliminated it.³³ Per Mr. L's testimony, leaving the house requires the use of either exterior stairs or a ramp, although he said that Ms. L uses the stairs with him when he is present. Because Ms. L only requires assistance with stairs, she can utilize the ramp for access without assistance. Even though she broke her wrist in a fall on the ramp approximately three years ago,³⁴ given that she can walk on a level surface without assistance, the weight of the evidence shows that she can utilize the ramp to leave the home for medical appointments. As a result, the Division has met its burden of proof to eliminate PCS for this task.

2. ADL - Bathing

Bathing includes transfers in and out of the tub/shower and the bathing of the body, excluding washing the hair and the back.³⁵ Ms. L was receiving limited assistance (self-performance code 2, support code 2) for this task based upon the August 2017 assessment which found that she needed help transferring in and out of the shower as a result of her vertigo.³⁶ The August 2020 assessment, under the activity of bathing, does not address transfers into the shower. It only addresses Ms. L's range of motion, her ability to stand, and grip strength. The assessment concluded that she is independent with bathing, and the Division removed PCS for that task.³⁷

Mr. L testified that Ms. L continues to require assistance with transfers into the shower due to her vertigo. This is consistent with his earlier testimony about her need for balance assistance on the stairs. Given the very limited evidence in the assessment, the weight of the

³² Ex. D, p. 10; Ex. G, p. 7.

³³ Ex. D, pp. 2, 10, 18.

³⁴ Mr. L's testimony.

³⁵ Ex. D, p. 16.

³⁶ Ex. D, p. 10; Ex. G, p. 11.

³⁷ Ex. D, pp. 2, 10, 20,

evidence shows that Ms. L still requires assistance transferring into the shower. Mr. L also spoke at length about the bathing process, however, there is insufficient evidence to justify a finding that Ms. L should receive any bathing assistance other than with transfers. Accordingly, Ms. L should continue to receive limited assistance (self-performance code 2, support code 2) for bathing, specifically transfers into the shower, once daily, seven days per week.

3. IADL – Light and Main Meal Preparation

Light meal preparation is the preparation of “breakfast and light meals;” main meal preparation is the preparation of a “main meal.”³⁸ The regulations provide that meal preparation, for both light and main meals includes not only the actual preparation of the meal but also its “service, and cleanup.”³⁹ Ms. L was not previously receiving assistance with light meal preparation. She was receiving a moderate level of assistance with main meal preparation (self-performance code 2, support code 3) seven days per week.⁴⁰

Mr. L testified that Ms. L needed help with preparing both light meals and main meals. He stated that Ms. L could do very light items such as making toast or coffee, but that she was not capable of doing more. She makes a mess of the kitchen when she attempts to cook, spills items, drops items, and has difficulty handling anything much heavier than her own bowl. Given the limited nature of making a light meal and the lack of any medical information from which to extrapolate, Ms. L has not met her burden of proof to show that she requires assistance with preparing a light meal. She is not eligible to receive PCS for that task.

Ms. L was receiving PCS for the main meal preparation, specifically a moderate level of hands-on physical assistance (self-performance code 2, support code 3), meaning that she was not completely dependent with this task and could help with the main meal preparation.⁴¹ The 2020 assessment found that she no longer needed hands-on physical assistance with that task, just some setup help, and eliminated that assistance. While there is scant medical information regarding Ms. L’s physical functionality, notably that she has musculoskeletal symptoms and osteoarthritis, there is no showing that her medical condition or her physical functionality have improved since she was provided PCS for main meal preparation. In addition, Mr. L’s testimony demonstrated that Ms. L is not capable of preparing a main meal by herself. As a result, the

³⁸ Ex. D, p. 37.

³⁹ 7 AAC 125.030(c)(1) and (2).

⁴⁰ Ex. D, p. 10.

⁴¹ Ex. D, p. 10.

Division has not met its burden of proof to establish that Ms. L does not need assistance with main meal preparation.

The Division asserted an alternate reason to disallow Ms. L main meal preparation assistance, which is that providing it would constitute duplication of services, which is not allowed under the PCS regulations:

(a) Personal care services do not include

* * *

(14) assistance with an IADL under 7 AAC 125.030(c) that

* * *

(B) duplicates services that other recipients living in the same residence as assistance with IADLs under this section or similar services under 7 AAC 130.245, and those services are sufficient to maintain a clean, sanitary, and safe environment for all recipients in that residence; however, the department may authorize assistance with an IADLs that duplicates services if it is justified as necessary for the health, safe, and welfare of a recipient.⁴²

The Division has the burden of proof on this point because it is seeking to eliminate PCS for this task. It would therefore have to show that services were duplicated “and those services are sufficient to maintain a clean, sanitary, and safe environment.” The only evidence presented by the Division is that another recipient in the household receives meal preparation services. There is a dearth of evidence showing that the meal preparation services for Ms. L actually duplicate those provided the other recipient, or that the other meal preparation “services are sufficient to maintain a clean, sanitary, and safe environment” or that they are not necessary to safely provide Ms. L with healthy nutrition. This means that the Division has not met its burden of proof and Ms. L is to continue to receive the same amount of PCS with main meal preparation as she was provided previously (self-performance code 2, support code 3), once daily seven days per week.

4. IADL – Housework

PCS for housework includes cleaning a recipient’s living space, cleaning a recipient’s bathroom, and making the recipient’s bed.⁴³ Ms. L was previously provided with a moderate level of physical hands-on assistance (self-performance code 2, support code 3), meaning that she was not completely dependent with this task and could help with housework.⁴⁴

⁴² 7 AAC 125.040(a).

⁴³ 7 AAC 125.030(c)(3).

⁴⁴ Ex. D, p. 10.

Light housework consists of doing housework such as “dishes, dusting ... making own bed.”⁴⁵ Routine housework consists of tasks such as “vacuuming, cleaning floor, trash removal, cleaning bathroom.”⁴⁶ After the 2020 assessment, the Division determined that Ms. L continued to need hands-on physical assistance with housework, albeit at a lesser level (self-performance code 1, support code 3).⁴⁷ Regardless, the Division eliminated this task in its entirety, because another household member is receiving IADL assistance with this task.⁴⁸

As with main meal preparation, there is no evidence showing that Ms. L’s medical condition or physical functioning have improved since she was approved for housework. As a result, she should still receive the same level of assistance (self-performance code 2, support code 3). And there is no evidence that the housework services provided the other PCS recipient duplicates the services provided Ms. L. The evidence instead shows the opposite. Ms. L has her own bedroom and bathroom which she does not share with anyone. Because housework PCS are for cleaning a recipient’s bathroom, living space, and making a recipient’s bed, the IADL housework services provided to one of the other household members do not duplicate those provided to Ms. L. Consequently, Ms. L is to continue to receive housework PCS at the moderate assistance level (self-performance score of 2, support score of 3).

5 IADL - Shopping

This task is shopping. It does not include transportation.⁴⁹ By regulation it includes “shopping for items required for the health and maintenance of the recipient, including groceries, household items, prescribed drugs, and medical supplies.”⁵⁰ Ms. L was receiving a moderate level of assistance (self-performance score of 2, support score of 3) with this task. The Division’s 2020 assessment concluded that she still required physical assistance with this task, at a reduced level (self-performance code 1, support code 3).⁵¹ Regardless, the Division eliminated this task in its entirety, because another household member is receiving IADL assistance with this task.⁵²

⁴⁵ Ex. D, p. 37.

⁴⁶ Ex. D, p. 37.

⁴⁷ Ex. D, pp. 2, 37.

⁴⁸ Ex. D, p. 3.

⁴⁹ Ex. D, p. 37.

⁵⁰ 7 AAC 125.030(c)(5).

⁵¹ Ex. D, pp. 2, 10, 37.

⁵² Ex. D, p. 3.

In order to go shopping, a recipient would need to be able to move within the store and be able to bend and lift to some degree. Mr. L testified that Ms. L liked to go shopping. He described her as holding on to the cart for support and said that she could reach and grab items. Construing this with his earlier testimony about her kitchen skills, the evidence shows that she cannot grab or hold onto heavier items. As such, she would still need a moderate level of hands-on physical assistance with shopping (self-performance score of 2, support score of 3). Regarding the duplication of services argument, Mr. L testified that shopping did not duplicate services because the shopping trips would occur as needed for a particular individual, specifically referencing medications and clothing items. Because shopping is not limited merely to groceries, Mr. L's testimony shows that there is no duplication of services. The Division did not present any evidence showing any duplication of services, merely the assertion that a duplication existed. Given the evidence, the Division has not met its burden of proof to eliminate PCS for this task. Ms. L should therefore receive continue to receive assistance at the moderate level (performance score of 2, support score of 3).

6 IADL - Laundry

PCS for laundry is defined by regulation as being allowed for "(A) changing a recipient's bed linens; or (B) laundering a recipient's linens and clothing."⁵³ Ms. L was receiving a moderate level of assistance (self-performance score of 2, support score of 3) with this task. The Division's 2020 assessment concluded that she still required physical assistance with this task, but at a reduced level (self-performance code 1, support code 3).⁵⁴ Regardless, the Division eliminated this task in its entirety, because another household member is receiving IADL assistance with this task.⁵⁵

As with the other IADLs of main meal preparation, housework, and laundry, the Division did not present any evidence of Ms. L's medical condition or physical functioning had improved. In addition, Mr. L's testimony showed that the laundry is located on the second floor of the home. Ms. L's bedroom is located on the third floor. The evidence shows, since she requires both supervision and some physical assistance on the stairs, that she cannot safely transport either dirty or clean laundry up and down the stairs without assistance. Mr. L's testimony did

⁵³ 7 AAC 125.030(c)(4).

⁵⁴ Ex. D, pp. 2, 10, 37.

⁵⁵ Ex. D, p. 3.

show that she can fold clothes and is not completely dependent with the activity of laundry. This means that the Division has not met its burden of proof to reduce the degree of assistance required for laundry from moderate (self-performance code of 2, support code of 3).

With regard to the duplication effort, it should be noted that laundry assistance is normally only provided for one load of laundry per week. Two loads of laundry are only allowed in the event of bladder or bowel incontinence.⁵⁶ A recipient's clothing and linens easily comprise at least one load of laundry and providing laundry services to Ms. L would not be a duplication of services. This conclusion might well be different if Ms. L had a spouse or partner who was also authorized to receive PCS with laundry. However, she has her own unshared bedroom and bathroom, which means she has her own unshared linens. She also, obviously, has her own clothing. Under these circumstances, the fact that another person in the home receives PCS for laundry is not a duplication of services. Consequently, Ms. L should therefore continue to receive assistance at the moderate level (performance score of 2, support score of 3).

V. Conclusion

Ms. L's physical condition is such that she requires hands-on physical assistance with both ADLs and IADLs. She is therefore eligible for PCS. As discussed in detail above, she is to receive the following PCS:

<u>Task</u>	<u>Assistance Level</u>	<u>Weekly Frequency/Minutes</u>
Locomotion – Multi-Level	Limited (2/2)	21 times
Bathing	Limited (2/2)	7 times
Main Meals	Moderate (2/3)	7 times
Housework	Moderate (2/3)	67.5 minutes
Shopping	Moderate (2/3)	45 minutes
Laundry	Moderate (2/3)	22.5 minutes

Dated: May 19, 2021

Signed

Lawrence A. Pederson
Administrative Law Judge

⁵⁶ Ex. D, p. 7.