

**CCA Info Sessions with Families July 13<sup>th</sup> and July 26<sup>th</sup> 2023**  
**Chat questions**

1. If you have the new assessment for complex care assistant services but decide you do not want the service, can you decline it?

Yes. Complex care assistant (CCA) services are optional. Families can cancel their CCA services at any stage in the process, whether after the assessment or at a later time.

2. Will adding complex care assistant services prevent a family from having PCA services?

No. However, in order for a MassHealth member to remain eligible for PCA services, they must have at least two activities of daily living (ADLs) on their PCA assessment and prior authorization. Families have the choice of moving all ADL services to their CCA authorization or dividing them between their PCA and CCA authorization. CCM clinical managers will work with families to make this determination, based on the family's needs/preferences.

3. Can the CSN Agency nurse providing CSN services in a family's home also provide the CCA supervision requirement?

Yes, if the CSN agency nurse providing CSN services is an RN. Additionally, MassHealth will clarify with CSN agencies providing CCA services that CSN nurses who are RNs and who are already in the home may provide supervision to the complex care assistant during their regularly scheduled CSN visit.

4. What information can you provide on the CCA assessment, and when will the CCA assessment be implemented?

CCM is developing a tool for the CCA assessment to determine the amount of hours of CCA enhanced care services a member requires. As part of this process, CCM will be using the existing home health aide assessment to determine the number of hours of personal care services a member requires. Families who have already had the home health aide assessment will not need to redo this assessment unless the member's condition has changed significantly. CCM has begun completing home health aide assessments for families who are interested in CCA but who have not previously had the assessment.

CCM will begin assessments for the enhanced care services for CCA in mid-August, as CCM needs to complete development of the assessment tool and train their staff to provide the assessment. This training is important to ensure that the assessment is completed in a consistent way for all members interested in CCA services. CCM is finalizing the tool for the CCA assessment, and have begun training their staff to use it. Given that most families will have had their home health aide assessment completed, CCM hopes to complete the remaining enhanced care services portion of the assessment more efficiently. CCM will schedule assessments first for members who have an identified complex care assistant who has been hired by a CSN agency. CCM anticipates they will be able to complete 20 assessments/week to start, with the goal of increasing to 30-40/week as staff become more familiar with the process.

5. Will CSN agencies be able to align their documentation systems with the retroactive PA process? For example, some CSN agency nurses have had issues logging into their online system when the office did not schedule their shift.

MassHealth will work with CSN agencies providing CCA services to clarify how they can update their systems to handle the retroactive PA process. If a family has a change in their schedule that

requires them to adjust their PAs across services, their CSN agency and CCM need to be notified. The CSN agency should work with the family to make any needed scheduling changes ahead of receiving the updated PA.

6. How will the CSN authorization be affected by adding CCA services?

Some of the enhanced care tasks that a CCA are able to perform overlap with CSN services, though this overlap is very minimal. Ultimately, if a family is assessed for CCA and there are tasks that overlap with their CSN authorization, the family can choose where they would like those services to sit. If they decide to keep the services on their CSN authorization, their CSN hours will not be impacted. If the family decides to move those services to their CCA authorization, the time for those services would be subtracted from their CSN authorization.

7. Would CCA hours be adjusted if a member receives day habilitation services or adult foster care services?

For members who receive day habilitation services, CCA hours may be adjusted to account for time that a member is at a day habilitation program. For members who are in adult foster care (AFC), their AFC placement is authorized to perform all activities of daily living (ADLs). This means that for members in AFC, their CCA authorization can not include any ADLs or other personal care services already provided by the AFC.

8. If a family adds CCA services, can they continue to seek a CSN nurse?

Yes. Families do not need to stop looking for nursing/ask their CCM clinical manager for assistance finding nursing if they access complex care assistant services. We encourage families to continue seeking CSN nurses and we are also encouraging CSN agency providers to continue recruiting more nurses to the workforce.

9. How can CSN agencies pay for CCA overtime?

CSN agencies are required to pay overtime in accordance with applicable federal and state wage laws. This includes paying overtime to a CCA employed by the CSN agency that is scheduled by the CSN agency to work more than 40 hours per week.

10. Will CCAs be able to fill unutilized CSN hours, and if so, how?

If a family has unutilized CSN hours that they would like to have filled by a CCA, a family can work with their CCM clinical manager to move applicable hours from their CSN authorization to their CCA authorization. Only hours for tasks that can be performed by both a CSN nurse and a complex care assistant can be moved between the two authorizations.

11. If a member is currently utilizing all CSN hours but having difficulty filling PCA hours, can they transfer PCA hours to their CCA authorization?

Yes, families can choose where they want applicable tasks that overlap with complex care assistant tasks to sit – whether that means moving authorized PA hours from CSN or PCA. If you have complex care assistant tasks that overlap with CSN or PCA, it is up to the family to decide whether they want to move any of those tasks – it does not matter whether the hours are filled or not, it will always be the family's choice.

11. Will tasks that are considered nursing tasks currently change?

No. At this time, there is no change to the CSN nursing assessment process and the amount of time that will be authorized for each nursing intervention. Authorized CSN services would only be decreased if a Member/Family chooses to move any eligible Enhanced Care Tasks to the CCA.

12. Can a person working as a PCA become a CCA if they get trained and assessed?

Yes, so long as the person meets the qualifications to be a complex care assistant described in regulation at 130 CMR 438.415(C)(1). Additionally, they will need to be hired by a CSN agency providing CCA services and complete any necessary training and competency requirements.

13. Will CSN agencies be required to report their wages to CCM members and families up front? If a CSN agency is not able to provide CSN services to a member, can the CSN agency be required to provide CCA services?

No, as MassHealth does not have oversight of CSN agency hiring practices. Regarding wages, MassHealth has established a wage pass through of 65%, which translated to a gross wage floor of \$29.25/hour for complex care assistants. A CSN agency may choose to provide complex care assistant services, but MassHealth cannot require any agencies to provide this new service type.

14. Can a family member who does not have immigration status in the US be a CCA?

No. In order to be hired by a CSN agency, an individual must be legally authorized to work in the United States. See 130 CMR 438.415(C)(1) (setting forth required qualifications for complex care assistants).

15. How soon can we reach out to our CCM manager to start the process?

CCM members and families may reach out to their clinical managers to let them know they are interested in complex care assistant services at any time. CCM is anticipating that they will start assessments in mid-August.

16. Are CCA services available to CCM members who are receiving day habilitation services?

Yes, CCA services are available to CCM members who are receiving day habilitation services.

17. How many hours can a CCA work per week? Will a CCA get paid Overtime?

There is no MassHealth regulation establishing a cap on the number of hours a complex care assistant can work in a week. Complex care assistants that are scheduled to work more than 40 hours per week by their employer may be entitled to overtime in accordance with federal and state wage law requirements.

18. Can all unfilled nursing hours be flexed to CCA services?

CSN hours cannot be converted 1 to 1 for complex care assistant services. Complex care assistants may only perform ADLs and the tasks included under Enhanced Care Services. CSN hours can be moved to a complex care assistant authorization for tasks that are applicable to both services – for example, support with G/J tube feeding is a task that both a CSN nurse can perform and a complex care assistant can perform.

19. Will the agencies be recruiting for non-family members to be CCAs? Is there a detailed job description?

MassHealth does not know whether CSN agencies are planning to recruit for non-family members to serve as complex care assistants. This is ultimately a CSN agency decision. MassHealth has heard

from some CSN agencies that they have been creating job descriptions as part of their standard hiring process.

20. Please walk through the following example: A member has been authorized for 50 hours of CSN and 20 hours of CCA/week. A nurse calls out for an 8 hour shift. Can those 8 hours be transferred to the CCA authorization, so the CSN authorization would be for 42 hours and the CCA authorization would be 28 hours?

Only tasks that both a CSN nurse can perform and a CCA can perform may be moved between the two authorizations. So, if there are 8 hours of tasks on the CSN authorization that can also be performed by a CCA, then yes – those 8 hours could be moved to the CCA authorization. However, if there are only 4 hours of tasks on the CSN authorization that a CCA can perform, only 4 hours could be moved to the CCA authorization. In this scenario, the hours would be adjusted to 46 hours on the CSN authorization and 24 hours on the CCA authorization. Families will be told when they complete their CCA authorization the maximum number of hours of CCA services they could have in one week, if all overlapping tasks were moved to their CCA authorization.

21. Can I have a PCA help with G/J tube care in the morning but have a nurse provide G/J tube care in the evening?

If a member requires care interventions multiple times a day, such as G/J tube care ordered multiple times per day, members can divide tasks across multiple authorizations. In this example, time for the PCA to provide G/J- tube care can be identified on the PCA evaluation and authorized on the PCA PA and time for a nurse to provide G/J tube care can be identified on the CSN assessment and authorized on the CSN PA . As another example, if a member requires assistance eating three times a day for 20 minutes each time for a total of 60 minutes, a family could decide to allocate 20 minutes to their CCA authorization and 40 minutes to their PCA authorization.

22. Can parents with an RN or LPN licensure provide CSN services to their children?

Yes, MassHealth does allow for family members who have an RN or LPN licensure to provide CSN services to their family member; this includes parents. Family members can serve as CSN nurses by either working for a CSN agency or enrolling with MassHealth as an Independent Nurse.

23. Can CCAs attend school?

MassHealth does not have restrictions on complex care assistants attending school with their CCM member; however, this decision is ultimately up to individual school districts and CSN agencies.

24. Can CCAs only be authorized transportation time for driving to medical appointments or to the pharmacy?

Yes. Time for transportation in a member's authorized hours for complex care assistant services may only include time for driving the CCM member to medical appointments or for driving to the pharmacy to pick up prescriptions.

25. Can you clarify why CCAs can only perform tasks that do not require the skills, judgement or assessment of a nurse?

Nursing is a licensed profession in Massachusetts and only licensed nurses may perform tasks that require the skills, judgement, or assessment of a nurse. Complex care assistants are able to perform activities of daily living and the identified tasks under Enhanced Care Services, so long as none of these tasks require the skills, judgement, or assessment of a nurse. Situations where one of the

listed enhanced care tasks may require the skills, judgement, or assessment of a nurse might occur due to a member's particular medical complexity. This distinction is based on the Massachusetts Nurse Practice Act at 244 CMR 3.00.

26. What is the minimum number of hours a CSN agency will take on for a CCA case?

MassHealth does not dictate a minimum number of hours for a CSN agency to provide CCA services. This is a CSN agency's decision and may differ from CSN agency to CSN agency.

27. Is there any guidance to agencies on how to handle seasonal help? Specifically, I'd like my college-bound son to work as a CCA when he's home.

MassHealth does not have guidance on seasonal employment; however, MassHealth is aware that many CSN agencies work with per diem nurse employees who have less regular nursing schedules.

28. Is there a complete list of tasks that each role can do?

**Home Health Aides** can perform the following activities:

(1) personal-care services; such as bathing, dressing, grooming, caring for hair, nail, and oral

hygiene, which are needed to facilitate treatment or to prevent deterioration of the member's

health, changing the bed linen, shaving, deodorant application, skin care with lotions and/or

powder, foot care, ear care, feeding, assistance with elimination, routine catheter care, and routine colostomy care;

(2) simple dressing changes that do not require the skills of a registered or licensed nurse;

(3) medication reminders for medications that are ordinarily self-administered and that do not require the skills of a registered or licensed nurse;

(4) assistance with activities that are directly supportive of skilled therapy services; and

(5) routine care of prosthetic and orthotic devices.

**Complex Care Assistants** can perform all the same activities as a home health aide, as well as Enhanced Care Services. The list of enhanced care services is included on the CCM webpage at [www.mass.gov/ccm](http://www.mass.gov/ccm), and can be found here: [Enhanced Care Services](#).

For a complete list of all the tasks that a **PCA** can perform, please view the [PCA regulations at 130 CMR 422](#), under section 410: "Activities of Daily Living and Instrumental Activities of Daily Living," which can be found on page 7.

To review the tasks that a **CSN nurse** can perform, please refer to the CSN Standards Tool, which is included on the CCM member webpage at [www.mass.gov/ccm](http://www.mass.gov/ccm) and can be found here: [CSN Standards Tool](#).

29. If a family actually elected to move hours to a complex care assistant authorization, can they move them back to CSN if they lose their complex care assistant?

Yes. Hours that are moved from a CSN authorization to a complex care assistant authorization can be moved back to the CSN authorization, at any time.

30. Will the total of both CSN and CCA authorized hours equal what the CSN authorization was on its own previously?

No. Complex care assistants can be authorized to perform both ADLs and enhanced care services. CSN nurses are not authorized to perform ADLs, and they are also not authorized time for transportation to medical appointments or to pick up prescriptions, which is included as an enhanced care service. If a member includes ADLs and transportation on their complex care assistant authorization, the total of their CSN and complex care assistant hours would likely be higher than their previous CSN authorization alone.

31. Do PCA services and home health aide services cover time for transportation?

No. Only PAs for PCA services and complex care assistant services may include time for transporting a member to medical appointments or for time driving to the pharmacy. Home health aide services do not cover transportation time.

32. Can CCAs be paid for providing care while a member is in the hospital?

No. Complex care assistants cannot be paid to provide care to a member while the member is under the care of a facility, as this would be considered a duplication of services. See 130 CMR 438.419(A) (specifying that CSN agency services provided to a member while under the care of an institution is a duplication of services and not covered by MassHealth.)

33. How was it determined that only one RN supervisory visit could be done via telehealth/zoom?

This allowance is based off of the Centers for Medicare and Medicaid Services (CMS) guidance and requirements for home health aide supervision. CMS has only allowed one telehealth visit every 60 days for the 14-day RN supervisory visit for home health aides. MassHealth is currently reviewing this process based on family and provider feedback and is considering whether changes can be made for complex care assistants. If MassHealth makes a change to this process, the change will be made through an updated CSN Agency Provider Bulletin that will be sent to all CSN agencies and communicated to members and families.

34. If a caregiver is already providing home health aide services, will they switch all those hours to CCA or do they lose some hours?

If a CCM member and their family would like to switch to complex care assistant services from home health aide services, all of their home health aide hours can be transferred over directly to complex care assistant services. Their hours for these home health aide tasks will not be decreased, as a complex care assistant is able to perform all the same tasks as a home health aide. CCM will use your existing home health aide assessment to inform your complex care assistant assessment.

35. If CCAs are only authorized to do certain tasks, what happens if there is an emergency while a parent is acting as the complex care assistant? For example, if a member has a seizure, a CCA cannot technically respond with rescue medication. What happens in this scenario?

MassHealth understands that family members serving as complex care assistants will be completing tasks that are outside the scope of complex care assistant services, based on the CCM member's needs and the availability of other caregivers. MassHealth is not prohibiting families from performing these tasks if they are a member's complex care assistant; however, complex care

assistants can only be authorized time to perform for tasks that are within their scope, and likewise, complex care assistant services can only be reimbursed for services that are within scope. So in the example provided in this question, the individual would be responding to their child's seizure as a parent, not as a complex care assistant.

36. Can CCAs only be reimbursed for tasks on the enhanced care services list?

Yes. MassHealth will reimburse for complex care assistant services that are in scope, which includes personal care services (ADLs and incidental services) and enhanced care services.

37. Will the CCA assessment by the CCM CM determine where there are overlapping tasks between services and who can provide each task?

Yes. CCM Clinical Managers will work with families to determine applicable hours for complex care assistants, based on the tasks listed in our regulations. They will also work with families to identify any overlapping tasks with other services, and where families would like any overlapping tasks to sit.