

## Community Case Management (CCM) Member and CCM Family Member Quarterly Call

October 2025

## Agenda

Topic	Time
Introductions, Logistics, and Meeting Guidelines	1:30 – 1:40
CSN Service Delivery Updates on Initiatives	1:40 – 2:10
CCM Member and CCM Family Feedback	2:10 – 2:50
Summary & Action Steps	2:50 – 3:00

## Quarterly Call Format

The CCM Member and CCM Family Quarterly Calls are intended to be a space for MassHealth to provide updates to Members and families, and for MassHealth to hear feedback and questions from Members and families.

MassHealth aims to use the first half of the meeting to provide updates, reserving the second half of the meeting to hear from Members and families.

## Quarterly Call Guidelines

- Mute your phone/computer audio when not speaking. If you are calling in using your phone you may use \*6 to either mute or unmute. Everyone has been muted upon entry.
- Please only join using one method (computer audio or phone audio) to prevent feedback noise which can be disruptive.
- Speak up, "raise hand" when you would like to speak during the listening session. Please lower your "raised hand" after. If you have joined using your phone, you will need to unmute yourself. If you are calling in using your phone, you may use \*9 to raise hand or lower hand.
- You may also use the "chat" feature to type comments in.
- You will be able to view the full "Live Transcription" during the call. In the ZOOM meeting window first click on the CC button and select view full transcription. This meeting also has a separate Zoom channel with Spanish interpreter services.
- MassHealth will share a summary with all individuals invited.
- Please be advised that recording meetings, by any means, including the use of any A.I.
   applications, without prior permission is strictly prohibited.

## Quarterly Call Guidelines

- Feedback is welcomed following the presentation on CSN Service Delivery Updates on Initiatives.
- Please keep comments, respectful, constructive, and concise.
- To be able to provide an equitable amount of time to everyone participating, please limit comments to under 2 minutes.

## Follow Up from June 2025 Call

- During the last CCM quarterly call in June the last call, a family shared that they struggle to get in touch with their PCM (Tempus) when requesting overtime without first going through CCM. The MassHealth PCA team shared the following:
  - The PCM is supposed to supply the consumer with an Overtime Approval Request Form and submit those to MassHealth within one business day of receipt of the completed forms.
  - If families are experiencing challenges getting in touch with their PCM about requesting overtime or delays in having the request submitted, please let your CM know, who can escalate the case to MassHealth. The MassHealth PCA team will reach out to the individual PCM to resolve.

## **CCM Member Experience Survey 2025**

## **Methodological Overview**

Who?

The survey sample **included 967 CCM members who were enrolled in the program** as of November 25, 2024. The sample frame was narrowed to one member per household, and addressed to the CCM member or their parent, guardian or family member.

When?

The survey was conducted from January 3 – March 24, 2025.

How?

All families received a mailed copy of the survey, with a postage paid reply envelope. Any families with an email address on file received an emailed version of the survey as well. CCM and OSR conducted several reminder calls and emails over the course of the survey period.

## **General Survey Specifics**

- Of the 967 families invited to participate, **481 completed the survey with an overall response** rate of **50.3%**. This response rate is high for surveys.
- This response rate is comparable to previous surveys, 2018 = 52% and 2022 =51%

Results from this survey should be taken with consideration of the response rate. The following does not reflect the perspective and/or experience of all CCM members and their representatives.

### General

92% of respondents report being very satisfied or satisfied with CCM overall.

### **Needs Assessment**

- 97% of respondents noted that the Nurse Clinical Manager (NCM)
  - Prepared them very well for what to expect during the assessment,
  - Gathered the information necessary for the needs assessment,
  - Explained the service record well, including their right to appeal.
- 16% of respondents report a reduction of nursing
  - Of these respondents, 96% report that the NCM clearly explained the reduction.
- 91% of respondents reported being satisfied with their most recent assessment process.
  - Respondents also had critical feedback of the assessment process, notably that the
    assessment does not take into account all relevant information, the assessment
    process is lengthy, and CCM does not allocate enough time per nursing intervention
    or task.

## **Assistance with Unfilled Hours**

- 52% of respondents **report having consistently unfilled nursing hours**, which is a decline from 63% in 2022.
  - 55% of respondents reported asking NCM for help, a decrease since 2022 (64%).
- 98% of those who asked for help report that the NCM assisted families through these actions:
  - 81% sending-them a list of Independent Nurses and Agencies,
  - 64% offering alternatives such as CCA, PCA, HHA Services, or skilled nursing visits,
  - 59% offering guidance on enrolling in the CCM Nurse Directory,
  - 37% making phone calls to providers on their behalf,
  - 21% explaining and discussing co-vending.
- 74% of respondents that asked for help report that they were able to at least partially fill their nursing hours, which increased significantly from 58% in 2022.
  - Many respondents found it helpful to fill hours using provider lists, CCM Nurse
     Directory and other alternative sources shared by NCM.

<u>Actions Taken</u>: MH developed initiatives to help with attracting providers to address unfilled hours. This includes, Increasing Nursing Rates, Providing tuition reimbursement, Retention Bonuses, and the CSN Training Initiative, and continuing outreach and education about CSN to nursing schools.

## Other Services and CCM staff

- 62% of respondents needed assistance with medical equipment and supplies.
  - Of these respondents, 71% report that CCM staff provided some form of assistance.
- 42% of respondents needed assistance with PT, OT, or speech therapy services.
  - Of these respondents, 40% report that CCM staff provided some form of assistance including answering questions, making calls to providers, helping with reimbursement issues, and making home visits,

<u>Action Item</u>: MassHealth and CCM will improve outreach messaging to members to make them aware that they can also reach out to CCM for help, publish DME office hours schedule, and about weekly meetings occurring between MH DME team and CCM to discuss timely issues that come up.

## Other Services and CCM staff-Continued

- 24% of respondents report having **contact with the CCM Pharmacy team**, which is significantly higher than prior years, up from 13% in 2022.
  - 67% of respondents rated the pharmacy team as "very helpful."
- Contact with CCM social worker has significantly increased since prior years (27%), up from 19% in 2022.
  - 94% of respondents found CCM social workers to be helpful.
- Overall, 88% of respondents were very satisfied or satisfied with CCM staff's coordination of services

## **Action Item:**

- We believe more CCM members had contact with CCM SWs related to increased eligibility issues that families have faced; the CSN team has been meeting with CCM and the MassHealth eligibility team to identify possible solutions for common challenges.
- MassHealth and CCM will work together to help raise awareness and remind families of how CCM can help member connect with therapy and other services.

## **CCM Nurse Directory Registration**

- 90% of respondents are aware of the CCM Nurse Directory, and of these respondents, almost two-thirds have registered.
- Respondents reported the primary reason for not registering is because they did not need to search for a nurse, followed by not having the time to register.
  - Other barriers include that the registration is too time-consuming, heard the Directory isn't helpful, had difficulty registering, prefer to recruit through nursing agencies, etc.

## **Action Item:**

- CCM, OSR team developed a series of surveys such as pop-up intercept and follow up emails encouraging the user to share their experience in real time or shortly after they used it.
- Digital Solutions team continued to work on platform and usage enhancements based on feedback from families and providers. Final enhancement October 2025.
- Educational outreach campaign developed to bring awareness of Nurse Directory, its usage, and value in searching for CSN or agencies to help with unfilled hours.
- Assistance provided to members and providers to help complete or update profiles.

## **Suggestions for Improvements**

- Take a more comprehensive approach to allocating nursing hours for unexpected changes, caregiver relief, and non-typical treatments.
  - Response: The CSN Standards Tool, which is used for LTSS assessment, does include allowances
    for "outliers" to adjust time authorized outside of the typical range when clinically supported.
    CCM would also take into consideration skilled nursing interventions not included on the CSN
    Standards tool if medical necessity for a nurse to perform the task is established.
- Enhance/simplify the assessment process
  - Action Item: MassHealth and CCM have recently switched to allow for 2-year assessments for members over the age of 18.
  - Action Item: MassHealth and CCM are working on reviewing the timeline for completing assessments and will be trying to identify ways to improve/streamline.
- Enhance nurse recruitment strategies
  - Action Item: MassHealth, in collaboration with the CSN Advisory Council, has begun presenting
    to nursing schools on CSN services. We are continuing this work with HCA and a member of the
    council.
  - Action Item: MGH IHP is also using leftover funds from the CSN training program to provide a sample curriculum to nursing schools on CSN services.

## **Suggestions for Improvements**

- Allow greater flexibility in using nursing hours such as moving hours between services, carrying hours over from the end of the prior authorization, or assistance in tracking hours.
  - Action Item: MassHealth is working to develop an optional tracking tool for families to use for CSN, PCA, and CCA services.
- Enhance communication and support.
  - Action Item: MassHealth is currently working on improving the CCM member webpage in terms
    of digital accessibility and overall user friendliness. We are always open to feedback on how to
    improve communication with members and families.
- Provide help with additional services, such as DME, therapies, and pharmacy.
  - Action Item: MassHealth has been working with the Clinical Pharmacy Services (CPS) team and
    the MassHealth Pharmacy team to address common pharmacy issues families face, that were
    raised by the CSN Advisory Council. These include expiring PAs and being asked to pay copayments on products covered by MassHealth.

## CCM Member Perceptions of Complex Care Assistant Services

## Complex Care Assistant Services Qualitative Interviews

## What?

MassHealth tasked the Office of Survey Research (OSR) through ForHealth Consulting (UMass) to conduct qualitative interviews with CCM members and families about their experiences with CCA services and potential areas for improvement.

## Who?

A total of 17 in-depth interviews were conducted:

- 11 interviews were for CCM members with an active CCA services PA.
- 6 interviews were for CCM members who were assessed for CCA services but did not have a PA for CCA services at the time of the interview.
  - OSR recommended this sample size to focus on depth of responses. Similarly structured qualitative interviews typically have sample sizes between 10 -20.

## When?

Interviews were conducted from May 29 to July 15, 2025.

## How?

OSR interviewed a sample of families to ensure a representative mix of members along variables such as age, gender, race/ethnicity, region, tenure in CCM, and length of time using CCA services.

Participants were sent a \$30 gift card in appreciation of their time.

MassHealth and OSR developed the questions based on feedback from members and families and from the CSN Advisory Council.

## **Interview Content**

The interviews included questions covering several different topics, but also allowed flexibility for families to provide responses about their experience with CCA services generally.

In analyzing the data, OSR pulled out main trends, but also provided specific quotes to accurately capture feedback from participants.



## Source of Awareness and Reasons for Interest in CCA Services

## Awareness of CCA services:

- Most interviewees found out about CCA services from CCM, a CSN agency provider, or another care provider. Some specific examples include:
  - A call with their clinical manager/annual A MassHealth stakeholder call assessment
  - An email communication

- Current CSN nursing agency
- Pediatric Palliative Care
- Some interviewees learned about CCA from another parent or a parent advocacy group
- From the CCM member experience survey, ~80% of respondents were aware of CCA services, and of them, 62% are current users, while 4% are past users

Financial Support	More Options for Care	
<ul> <li>Allow parents to get paid for the care they provide for their child</li> <li>Empower parents with the choice to work outside the home, care for their child, or a combination of both</li> <li>Provide financial support to offset household expenses</li> <li>Provide a safety net if parents must take time off work</li> </ul>	<ul> <li>More options for care providers beyond nurses</li> <li>To alleviate unfilled nursing hours</li> <li>Higher rate of pay provides a greater incentive, making it easier to find care</li> <li>Provide back-up for when nurses aren't available</li> <li>More options for those living in more remote areas</li> <li>Some feel that parents or family members can provide the best care</li> </ul>	

## CCA Assessment and Authorization of Hours

Most interviewees perceive the assessment for CCA services as easy to request and similar in structure to other CCM assessments. Many specifically shared that:

- Clinical Managers are supportive and helpful
- Clear, step-by-step information is provided
- Many describe the overall process as easy

Most interviewees are satisfied with their number of approved CCA hours; however, some interviewees expressed a need for more hours/more flexibility.

- Some interviewees specifically asked for CCAs to be authorized time to administer medications
- Several families shared that they want to have the flexibility to use CCA whenever they have unfilled CSN or PCA hours

Several families asked whether the authorization process can be simplified, such as by:

- Not requiring different prior authorizations for each provider
- Not having to modify prior authorizations when families want to change hours between services

## Positive Experiences with CCA Services

"[It is] a big help financially, as well as emotionally. We do not know how to thank this program."

emotional benefits more time with member

"It's helped me to stay with my kids more, without any worries."

# financial benefits gratitude for CCA more options for care support from NCM

"I see this program as only a positive addition for CCM members. I really hope MassHealth continues to support it."

> "...it is a 'plus' point in my knowledge and education for keeping my child safe."

"Before the program existed, what were your options? If you couldn't find a nurse, you couldn't find a nurse. So, it allows different options."

personal development

"[Supervision] every two weeks...and then every two months...just sounded very awful to me."

"I think CCM managers would be more helpful if they could quide the parents in the initial hiring process."

## less frequent supervision flexing hours & tasks

expense reimbursement

"I feel like if there is a PCA 'flex' program, where you can use your unused nursing hours as PCA [hours], you should also be able to use those unused nursing hours as CCA [hours]."

"... traveling to therapy, to doctor's appointments ... should be considered as part of compensation ... all of that can certainly add up to be incredibly costly."

## **Topic: CCA Assessment Process**

- Some families asked that the assessment process be made more streamlined, given other assessments families also go through
  - MH Response: CCM reviews existing assessments before conducting the CCA
    assessment to cut down on duplicative information; however, an assessment is
    needed for tasks that have not been assessed recently (example: Enhanced care
    services are unique to CCA and can not necessarily be pulled from another
    assessment)
- Request for more digestible information on CCA and the assessment process
  - Action Step: MassHealth and CCM will work together to create visuals for CCA services, including a graphic that explains the differences between CCA, PCA, and home health aide, and a timeline for the assessment and authorization process.

## **Topic: Finding a CSN Agency**

- Some families had difficulty finding a CSN agency to work with, especially if they
  weren't already receiving CSN services from an agency providing CCA
  - Action Step: MassHealth will work with CCM to increase support for families around identifying a potential CCA provider, especially for families who are not already working with an agency providing CCA
- Some families wish there was a central place to find information about agency hiring practices, such as training requirements or whether an agency would hire a non-family member as a CCA
  - Action Step: MassHealth is surveying CSN agencies to confirm which agencies provide CCA and specifics about their practices, including whether they will hire family and non-family members. This information will be added to the list of providers on the CCM member webpage and will be shared with CCM.



## **Agencies Providing CSN Services**

Find a list of agencies providing Continuous Skilled Nursing (CSN) services and their contact information.

\* Indicates the service area has been determined based on claims data and has not been confirmed by the agency

CSN Agency Name	Service Area	Agency Provides CCA Services	CCA Hiring Policies	Contact
Affordable Home Health Care, Inc.	Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk & Parts of Worcester Counties	Yes	<ul> <li>Hires legal guardians and primary caregivers as CCAs</li> <li>Requires member to receive CSN services from the agency in order to receive CCA services</li> <li>CCAs can complete competency evaluation only</li> <li>CCAs required to complete new hire orientation or training outside of the home</li> </ul>	Website: www.affordablepriorityhhs.com Email: Affordablepriorityhomecare@gmail.com Phone: (617) 327-4000
All-At- Home Health Care, LLC	Norfolk & Suffolk Counties	No		Website: https://allathomehealth.com/ Email: olsa.rusha@allathomehealth.com Phone: (617) 782-9900 x 114
Aveanna Healthcare	Statewide	Yes	<ul> <li>Hires legal guardians and primary caregivers as CCAs</li> <li>Does not require but prefers member to receive CSN services from the agency in order to receive CCA services</li> <li>CCAs can complete competency evaluation only</li> </ul>	Website: https://www.aveanna.com Email: credentialing@aveanna.com Phone: Brockton Office: (508) 856-9700 Needham Office: (857) 576-6924 Plymouth Office: (508) 591-4113 Shrewsbury Office: (508) 842-5809 Springfield Office: (413) 731-3050 Waltham Office: (781) 373-1113

## **Topic: Hiring and Onboarding with a CSN Agency**

- Several families shared challenges and frustration with CSN agency hiring processes, such as: lack of guidance/communication, inconsistency between agencies, timeconsuming nature of fulfilling medical requirements
  - Action Step: MassHealth has shared this feedback with CSN agencies and will continue to encourage them to think about how to streamline their hiring and onboarding processes for CCAs

## **Topic: CCA Supervision Requirements**

- Many families asked about reducing/streamlining supervision requirements for the CCA program
  - Action Step: MassHealth is proposing changes to CCA supervision requirements, including:
    - Removing the 14-day supervision requirement
    - No longer requiring the CCA to be present for the 60-day supervision visit
    - Allowing LPNs to supervise CCAs in addition to RNs

## **Summary & Action Steps**