



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

January 2026

Agenda

Topic	Time
Introductions, Logistics, and Meeting Guidelines	1:00 – 1:05
Overview of the CCA program and proposed changes	1:05 – 1:30
MassHealth will respond to questions and comments about CCA services	1:30 – 2:00
MassHealth will provide any other updates on CSN services	2:00 – 2:10
CCM Member and Family Feedback	2:10 – 2:30

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 Continued



- 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.

Overview of CCA Services and Proposed Changes



CCA Topics

1. What are Complex Care Assistant Services?
2. What Tasks Can a Complex Care Assistant Do?
3. What Are Enhanced Care Services?
4. I'm Interested in CCA. What do I do first?
5. What is the CCA Assessment?
6. How do I Adjust Hours for CCA services?
7. How do I become a CCA?
8. What are the Training and Competency Requirements?
9. What are the CCA Supervision Requirements?
10. Additional Resources

What are Complex Care Assistant Services?

MassHealth began authorizing **Complex Care Assistant (CCA) services in September of 2023.**

CCA services are in-home services provided to qualifying MassHealth members, which include personal care tasks and enhanced care tasks.

CCA Services were created to:

- Provide an additional avenue of support for CCM members.
- Provide a pathway to pay family caregivers for some elements of specialized care to medically complex MassHealth members.
- Complement CSN services and provide an additional care option.

CCA services do not:

- Replace continuous skilled nursing (CSN) services.

What are Complex Care Assistant Services? Cont'd

Who can have complex care assistant services?

- MassHealth members who meet the medical necessity criteria for CSN services.
- This primarily includes members in the Community Case Management (CCM) program

Who can provide complex care assistant services?

- MassHealth-enrolled CSN agencies.
- Complex care assistants are either employed or contracted by the CSN agency to provide the service.
- Complex care assistants can be:
 - **Family members**, including parents, spouses, and legal guardians.
 - **Nonfamily members**, including friends, neighbors, or individuals not connected to the CCM member.

What Tasks Can a CCA Perform?

- **Personal Care Services:** Includes all the same tasks that a home health aide can perform.

Activities of Daily Living (ADLs): activities related to personal care, specifically bathing, grooming, dressing, toileting/continence, transferring/ambulation, and eating.

Incidental Services: Additional services that may be needed when ADLs are performed (for example, light cleaning, preparing a meal, removing trash).

- **Enhanced Care Services:** Additional tasks that a CCA can perform that do not require the skills, judgement, or assessment of a nurse.

What are Enhanced Care Services?

1. **Enteral G-tube/J-tube feedings** – includes pump set up/discontinuation and/or administering bolus feeds; does not include changing or replacing of equipment.
2. **Skin care including application of OTC products or routine G-tube/J-tube care** – application of non-medicated over-the-counter products or routine G-tube/J-tube care, or stomas requiring care, or simple dressing changes that do not require application of medications, medicated, or specialized dressing products.
3. **Oxygen therapy** – provides assistance to replace oxygen tubing or nasal cannula and set oxygen at ordered flow rate so long as the care is not in response to a respiratory event requiring the judgement and assessment of a nurse.
4. **Oral (dental) suction to remove superficial oral secretions** – provides suctioning of superficial secretions in the oral cavity, includes set up and cleaning of suction device.
5. **Ostomy and catheter care** – empties/changes ostomy bag or urinary collection devices and cleans skin where there is no need for skilled skin care, recording, observation or reporting required. Does not include the replacement of catheters.
6. **Modified meal preparation** – prepares diets that do not require nurse oversight to administer. This may include modification of meal consistency as directed.
7. **Equipment management and maintenance** – (wheelchair, CPAP/BiPAP, oxygen and Respiratory care equipment), such as simple cleaning, and monitoring for and reporting any equipment issues to RN supervisor and CSN agency, including associated agency paperwork.
8. **Application and removal of braces, splints, and/or pressure stockings.**
9. **Transportation to medical providers / pharmacy** - by driving the member or going alone.

What should members/families interested in CCA do first?

For CCM members, their first step would be to **reach out to their CCM clinical manager**.

Their **clinical manager will explain**:

- what CCA services are.
- how they compare to other services like home health aide (HHA) or personal care attendant (PCA) services.
- who can become a CCA.
- how to apply to become a CCA.

If a member/family decides they would like to have CCA services, their clinical manager will work with them to set up an **assessment for CCA services**.

What is the CCA Assessment?

The assessment for CCA services considers the amount of time needed to perform qualifying CCA tasks for the CCM member. The assessment has two components:

- **Personal Care Services**

- For members who have had a recent assessment for home health aide (HHA) and/or personal care attendant (PCA) services, CCM can use the existing assessment(s) to determine the amount of time the member requires for activities of daily living.
- For members who do not have an existing HHA and/or PCA assessment, CCM will conduct an HHA assessment.

- **Enhanced Care Services**

- CCM will evaluate which enhanced care services the member requires and how much time is medically necessary for those services based on discussions with the member/family.

What is the CCA Assessment?

CCM will then go over with the family if any care tasks **overlap with over services the member is receiving**, such as PCA or CSN. For example:

- Both a **CCA and a PCA** can perform **activities of daily living** and **transportation**.
- Both a **CCA and a CSN nurse** can provide support with **G/J tube feedings**.

Members and families will then decide where they would like any overlapping services to sit. For example:

- A family could decide to keep time for bathing on their PCA authorization, while moving support with eating to their CCA authorization.
- A family could move g-tube feedings from CSN to their CCA authorization.

CCM will make adjustments to the CCA and any other existing prior authorizations **as discussed by and agreed to** by the member/family.

Can I Move Hours Between Services?

A member or family could choose to adjust their hours between CSN, PCA and CCA services due to:

- A nurse being unavailable due to vacation, illness, or leaving the workforce.
- A nurse becoming available to fill more CSN hours.
- Family preference.

If a member or family chooses to adjust their hours, CCM will adjust the member's PA to reflect this change.

- This adjustment will take some time to implement.
- Requires adjustments to the PA and the assessments for CSN and CCA services, and in some cases, the PCA eval as well.
- For CCA and CSN services, this adjustment can be retroactive to the date of the actual change, to ensure no gaps in billing/care.
- For PCA services, adjustments over 14 hours require an MD's signature; PCA adjustments to PAs cannot be dated retroactively.
- Additionally, to continue to access PCA services, a minimum of two ADLs must remain on the PCA eval.

Please note, CSN services are not 1:1 with CCA services.

- CCA's may not provide tasks that require the skills of a nurse.
- Likewise, nurses may not be reimbursed for personal care tasks.

How Does a Family Member Become a CCA?

Step One: Identify a CSN Agency who will be providing CCA services in the member's geographic area.

- There is list on Mass.gov of all CSN agencies, which agencies provide CCA services, and their hiring/onboarding practices (<https://www.mass.gov/info-details/agencies-providing-csn-services>).
- If the family is already receiving CSN services from an agency who provides CCA services, the family can tell their agency that they are interested in CCA services.
- If the family is not working with a CSN agency who provides CCA services, their CCM clinical manager can help to identify other agencies to contact.

Agencies Providing CSN Services

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

Information in this table was self-reported by CSN Agencies to MassHealth. The information is subject to change and should be confirmed with the agency.

**Information from claims data. Please reach out to the agency to confirm*

CSN Agency	Provides CCA Services	CCA Hiring Policies
Affordable Home Health Care, Inc. Email: Affordablepriorityhomecare@gmail.com Phone: (617) 327-4000 Service area: Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk & Parts of Worcester Counties	Yes	<ul style="list-style-type: none">• Hires legal guardians and primary caregivers as CCAs• Hires non-family members as CCAs• Requires member to receive CSN services from the agency in order to receive CCA services• CCAs can complete competency evaluation only• CCAs required to complete new hire orientation or training outside of the home
All-At-Home Health Care Email: olsa.rusha@allathomehealth.com Phone: (617) 782-9900 ext. 114 Service area: Norfolk & Suffolk Counties	No	
Aveanna Healthcare Email: credentialing@aveanna.com Phone:	Yes	<ul style="list-style-type: none">• Hires legal guardians and primary caregivers as CCAs• Hires non-family members as CCAs• Does not require but prefers member to receive CSN

How Do I Become a CCA?

Step Two: The family member(s) will complete hiring/onboarding process for their CSN Agency.

- Hiring and onboarding may be different for each agency.
- Hiring and onboarding requirements are often dictated by an agency's accrediting body; for example, many agencies may require all direct-care employees to have a TB test prior to working.

Step Three: Complete the training and/or competency requirements for CCA services.

- MassHealth has established competency training and comprehension requirements for complex care assistant services in our regulations at 130 CMR 438.000 and in CSN agency bulletin 15.

Step Four: Notify your CCM Clinical Manager once these steps are completed. CCM will issue the CCA prior authorization to the CSN agency the family will be working with for CCA services.

What are the Training & Competency Requirements?

In order to provide CCA services, an individual must complete a **competency training and comprehension program** provided by a CSN agency or other organization that meets MassHealth requirements.

1. Personal Care Services, Training and Competency Requirements

- a) The CCA must meet the training and competency evaluation program standards for home health aides, established at [42 CFR 484.80](#). This includes:
 - 1. Completing a training and competency evaluation (75-hour training); or
 - 2. Completing a competency evaluation; or
 - 3. Being a CNA

2. Enhanced Care Services, Training and Competency Requirements

- a) The CCA must demonstrate proficiency in safely providing the enhanced care services specific to the complex care member's needs. An assistant may meet the competency training and comprehension requirements for enhanced care services by:
 - 1. Completing at least 10 hours of direct training on the enhanced care services specific to the member they will serve and proficiency in each care task has been evaluated and documented; or
 - 2. Completing an evaluation that demonstrates and documents the assistant's proficiency in the enhanced care services specific to the member they will serve

What are the Supervision Requirements for CCA services?

Currently, MassHealth requires the following supervision for CCA services:

- RN supervisor must make an **onsite or telehealth visit** to the member's home **no less frequently than every 14 days** to assess the quality and safety of the CCA services provided.
- RN supervisor must make an **onsite visit** to the member's home *while the assistant is providing services* **once every 60 days**.
- A **12-month evaluation** to review the member-specific enhanced care tasks the CCA performs. The CCA's **proficiency must be evaluated** and new training provided as necessary.

MassHealth is in the process of amending the CSN agency regulations at 130 CMR 438.000. Those proposed amendments include the following changes to CCA supervision requirements:

- No longer requiring CSN agencies to conduct a biweekly supervisory visit.
- No longer requiring the CCA(s) to be present during the 60-day supervisory visit.
- Allowing CSN agencies to have agency LPNs provide CCA supervision.

MassHealth will inform CCM members and families when these changes go into effect.

How Will Families Be Paid for Being a CCA?

CSN agencies will pay their employed CCAs.

MassHealth reimburses CSN agencies for CCA services at \$11.25/15-minute unit or \$45/hour.

- CCA services have a **wage passthrough of 65%**.
 - This requires that CSN agencies pay a **gross wage of ~\$29.25/hour** for CCA services. **Gross wages** include **employee contributions** such as employee responsible taxes, employee contributions to fringe benefits, and optional employee benefits (i.e. 401K, short term disability).
- The **remaining 35% of the reimbursement rate** to CSN agencies is for overhead costs, such as **state mandated employee benefits**, like PTO and basic healthcare coverage, and **employer responsible taxes**, such as payroll taxes.

MassHealth **does not have a limit** on the number of hours a CCA may work in a calendar week. However, MassHealth **does not currently have an overtime rate** for CCA services established.

MassHealth understands that many agencies will not schedule individual CCAs to work more than 40 hours/week as they are not able to cover overtime. MassHealth would require **additional funding** to be able to implement an overtime rate for CCA.

Additional Resources

Complex Care Assistant Services webpage, which includes:

- Frequently Asked Questions
- A list of Enhanced Care Services
- A link to the list of CSN agency providers
- Complex Care Assistant Infographic
- Comparison of CCA, HHA, and PCA

<https://www.mass.gov/info-details/complex-care-assistant-services>

CCA Infographic

Accessing Complex Care Assistant Services for Community Case Management Enrolled Members

Are you interested in learning about CCA services?

Would you like to have a CCA evaluation?

Would you like to learn more about CCA Services?

YES →

Contact your CCM CM

Your CM will explain what CCA services are, how they compare to HHA and PCA services, who can become a CCA, and how to apply to become a CCA.

Who can become a CCA?

A CCA is an employee of a CSN Agency. You or another identified caregiver can pursue employment by a CSN Agency, or you can request that a CSN Agency provide a CCA for you.

Would you and/or another identified caregiver(s) like to become a CCA?

Or are you interested in having a CSN Agency provide a CCA for you?

YES →

Talk to your CM about your current providers

Your CM can share a list of CSN Agencies who offer CCA services.

Are you currently filling CSN hours with an agency who offers CCA services?

YES. Reach out to your CSN Agency to let them know you are interested in accessing CCA Services. Let the agency know if you would like to be hired as the CCA or have them provide a CCA to you.

NO. That's ok. Some CSN Agencies will hire and/or offer CCA services even if they are not currently providing your CSN services. Your CM can help you identify other agencies to contact.

If you or another identified caregiver are interested in becoming a CCA, you will work directly with the CSN agency. You will follow their hiring, on-boarding, and training requirements.

Let your CM know once the hiring, on-boarding, and training process is completed.

If you are having a hard time finding a CSN Agency to hire you or your identified caregiver(s), reach out to your CM and they can direct you to other agencies.



CCA Evaluation Process

How to get started?

Contact your CCM CM. They will explain what CCA services include and how to proceed with an evaluation.

CCA Services include all HHA and some PCA tasks, as well as Enhanced Care Tasks which may or may not already be authorized on your existing assessments.



Have you had a recent PCA and or HHA evaluation?

YES. Your CM can pull your ADL tasks from your evaluation.

NO. Your CM will make a referral to a CCM OT who will conduct an HHA evaluation to determine your ADL tasks for CCA services.

Once your ADLs have been determined, your CM will talk with you about scheduling a CCA evaluation to review what qualifying ADL and Enhanced Care tasks you would like to include in your CCA services.

Tell your CM when the CSN Agency has hired you or your identified caregiver(s), all agency requirements for training and on-boarding are finished, **OR** the agency has identified a CCA for you, **AND** you/they are ready to begin work.



Your CM will write a PA for CCA Services with your identified CCA provider and CCA services can begin!

Reach out to your CM to request PA modifications if you would like to move qualifying personal care and/or CSN tasks to/from your CCA services.



Abbreviations

ADL: Activities of daily living
CCA: Complex care assistant
CCM: Community Case Management

CM: Clinical manager
CSN: Continuous skilled nursing
HHA: Home health aide

OT: Occupational therapist
PA: Prior authorization
PCA: Personal care attendant

Comparison of CCA, PCA, and HHA



Comparison of Services

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Tasks	Description of Tasks	Home Health Aide (HHA)	Personal Care Attendant (PCA)	Complex Care Assistant (CCA)	Continuous Skilled Nursing (CSN) ***
Activities of Daily Living (ADLs)	Activities related to personal care, specifically bathing, grooming, dressing, toileting/continence, transferring/ambulation, and eating.	✓	✓	✓	
Incidental Services	Additional services that may be needed when ADLs are performed (for example, light cleaning, preparing a meal, removing trash).	✓	✓	✓	
Instrumental Activities of Daily Living (IADLs)	Activities that are instrumental to the care of the member's health and are performed by a PCA, such as meal preparation and clean-up, housekeeping, laundry, shopping, maintenance of medical equipment, transportation to medical providers, and completion of paperwork.		✓		
Enhanced Care Services	Enteral G-tube/J-tube feedings, including pump set up/discontinuation and/or administering bolus feeds; does not include changing or replacing of feeding tube.		✓*	✓	✓
	Skin care, including application of OTC products or routine G-tube/J-tube care - application of non-medicated over-the-counter products or routine G-tube/J-tube care, or stomas requiring care (including cleaning, application of OTC products to enhance adherence of the appliance, application of the appliance) or simple dressing changes that do not require application of medications, medicated, or specialized dressing products.	✓	✓	✓	✓
	Oxygen therapy, including replacing oxygen tubing or nasal cannula and setting oxygen at ordered flow rate so long as the care is not in response to a respiratory event requiring the judgement and assessment of a nurse.			✓	
	Oral (dental) suction to remove superficial oral secretions, the removal of superficial secretions in the oral cavity; includes set up and cleaning of suction device.			✓	
	Ostomy and catheter care to empty/change ostomy bag or urinary collection devices and clean skin where there is no need for skilled skin care. Does not include the replacement of catheters.	✓	✓	✓	✓
	Modified meal preparation to prepare diets that do not require nurse oversight to administer. This may include modification of meal consistency as directed.		✓	✓	
	Equipment management and maintenance (wheelchair, CPAP/BiPAP, oxygen and respiratory care equipment) and paperwork, including simple cleaning, monitoring for and reporting any equipment issues to the RN supervisor and CSN agency, such as associated agency paperwork.			✓	✓
	Braces, splints, and/or pressure stockings, including donning and doffing of stockings, splints, orthotics. Also the application of braces, splints, and/or pressure stockings.	✓	✓	✓	
Transportation to medical providers/pharmacy, such as driving the member or going alone to the pharmacy or transporting of member to medical providers.			✓**	✓	

*Only Complex Care PCAs with MD signed PCP Summary form can administer enteral feedings
** PCAs can only provide transportation to medical providers and accompany members to medical providers.
*** Portions of these tasks may be assigned to CSN when they take place during a skilled nursing visit.

Differences across service types	HHA	PCA	CCA	What does this mean?
Authorized Services	ADLs and Incidental Services that may be needed when ADLs are performed (for example, light cleaning, preparing a meal, removing trash).	ADLs and IADLs. The PCA Program allows for rounding up of hours for tasks that take place between 12 am and 6 am.	ADLs and CCA Enhanced Care Services for MassHealth members who meet the medical necessity requirements for Continuous Skilled Nursing (CSN) services.	Typically, HHA authorizations may have less per week hours than PCA or CCA since HHA only includes time for ADLs. PCA is the only service that allows for rounding up of time for overnight tasks. CCA is only available to MH members who qualify for CSN.
Supervision	HHAs are employed by Home Health Agencies and supervised by agency nurses; they cannot perform services that require the judgment of a nurse. They must meet HHA training requirements of the Home Health Agency.	The PCA program is consumer-directed, meaning the member is the employer. PCAs may perform tasks at direction of the consumer.	CCAs are employed by a CSN Agency and supervised by a CSN agency nurse. They must abide by the individual CSN Agency policies and procedures and must meet HHA training and/or competency evaluation requirements as well as training and/or competency requirements for CCA enhanced care services.	HHAs are much more limited in the tasks they can perform. HHAs and CCAs are employed and supervised by agencies while PCAs are employed by the consumer.
Family Eligibility	Family members, including a parent, spouse, or legal guardian can provide HHA services. Members may also work with HHAs who are not associated with the member/family.	Federal law does not allow a parent of minors, spouse, or legal guardian to be a PCA. Another family member, friend, or individual can serve as a PCA.	CCA services can be provided by individuals who are hired by a CSN agency to provide these services. CCAs can be family members, including parents, spouses, and legal guardians. Non-family, including friends, neighbors, or individuals not connected to the CCM member, are also able to become CCAs.	A parent of minors, spouse, or legal guardian may be a member's HHA or CCA but cannot be the member's PCA.

Regulations and Provider Bulletins

CSN Agency Regulations at 130 CMR 438.000

- These are the program regulations for CSN agencies, which includes requirements they must follow as providers of CCA services

<https://www.mass.gov/regulations/130-CMR-438000-continuous-skilled-nursing-agency>

CSN Provider Bulletins related to CCA services:

- CSN Agency Bulletin 15: Complex Care Assistant Training and Comprehension Program and Supervision Requirements – Amended

<https://www.mass.gov/doc/continuous-skilled-nursing-agency-bulletin-15-complex-care-assistant-training-and-comprehension-program-and-supervision-requirements-amended/download>

Questions?

Other MassHealth Updates



Programmatic Changes

Interoperability Rule

- In January of 2024, the Centers for Medicare & Medicaid Services (CMS) issued the Advancing Interoperability and Improving Prior Authorization final rule.
- The rule requires MassHealth to process *provider submitted* prior authorization (PA) request under the medical benefit within seven calendar days, and expedited PA requests within 72 hours, effective January 1st, 2026.
- If the PA request is incomplete or missing information, the timeline may be extended for up to 14 days from the date of the deferral.
- For CCM members, this new rule/timeline only applies for PAs for durable medical equipment, prosthetics, orthotics, and oxygen. This rule does not apply to the PAs that CCM creates, including the PAs for CSN, CCA, home health services, and PCA services.

Independent Nurse Plan of Care Submission

- Starting January 1st, 2026, INs seeking a PA to work with a CCM member for the first time must submit a copy of a signed plan of care to the member's clinical manager in order to receive their CSN PA.
- INs who have already been working with CCM members on an existing PA will not need to submit a signed plan of care for CCM's review in order to have a new PA established with the same member.

CSN Nurse Training Awards

MGH Institute of Health Professionals:

- Extended work due to remaining funds from MH contract
- CSN Training Program date extended to June 30, 2027
- Provided FREE continuing education materials integrating home-based complex care nursing across nursing curriculum to nursing schools throughout the state
- Made materials available to agencies for training their CSN nurses
- Offering CSN training online to INs who didn't take the earlier course through June 2027

Nightingale's Northern Nest:

- Has used all initial MH funds, however, has decided to continue conducting outreach/raising awareness locally
- Provides outreach to local nursing schools for CSN program awareness and to recruit graduates
- Attends conferences as panelist or guest speaker
- Mentors school nurses seeking per diem work and nurses interested in home care
- Participates in healthcare podcasts and media programs
- Starting July 1, 2025, online training for free became available for an additional year

Additional Outreach to Nursing Schools

MassHealth worked with the CSN Advisory Council to develop presentation materials that can be widely distributed and used when agencies, families, and others present to nursing schools about CSN

- MassHealth has presented the slide deck three times with MGH IHP, with the next scheduled presentation for April 2026
- We are also speaking with Simmons to host a presentation in April 2026, and UMass Amherst to present later in the spring
- The Home Care Alliance and members of the subcommittee are helping to lead future nursing school presentation efforts.

As part of these presentation materials, MassHealth would like to create a video representing the member/family experience. If anyone is interested in volunteering to be a part of a member/family testimonial video, please reach out to anne.Kazarnovsky@mass.gov.

CCM Nurse Directory – Reminders

- If you are having difficulty finding providers on the directory or have had providers not respond to outreach, please reach out to the Nurse Directory Project Coordinator for assistance. CSNAccessSupport@umassmed.edu

All About Surveys--Online surveys are questionnaires – generally fillable forms completed online – that are created for the purpose of gathering feedback from you, our CCM Nurse Directory user. Your feedback helps us analyze your experience and review with our digital solutions team, what works or if changes need to be made.

- The directory offers two survey types: an intercept (pop-up) during use, and a follow-up emailed shortly after. Surveys also appear on mobile devices.
- We encourage your feedback to help improve the directory. Watch for informative emails reminding you of the survey's value.