**Community Case Management Member and Community Case Management Family Quarterly Call: June 12th, 2025**

AGENDA

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| **Topic** | **Time** |
| Updates on all CSN Service Delivery Enhancements | 5:30 – 6:00 pm |
| Feedback from CCM Members and CCM Families | 6:00 – 7:00 pm |

**CCM Member and CCM Family Feedback and Follow-up**

1. **CSN in Hospitals**

**CCM Families** asked MassHealth to consider paying for CSN while a member is in the hospital, raising concerns that members need more support in the hospital than is often being provided. A family member also asked whether we could compare in school nursing and hospital nursing, in terms of a family’s ability to bring their CSN nurse.

**OLTSS Response:** MassHealth has reviewed other state Medicaid programs and has not found any state that pays for CSN while a member is admitted in a hospital. Many states, including Massachusetts, consider this to be duplication since the hospital assumes complete care for the patient upon intake and is being paid to provide all care to the patient during their stay. Being inpatient in a hospital is very different from receiving care at home or in school, and a member’s CCM service record, which is specific to a home and community setting, is not applicable if the member is under the care of a hospital. Hospitals are paid to provide 24/7 care and have staff outside of nursing who are assigned to the member’s care as well. MassHealth appreciates that hospitalizations can be burdensome for families if the hospital where the CCM member is admitted is not adequately staffed; however, MassHealth is not able to authorize CSN services for members who are admitted to the hospital.

1. **Complex Care Assistant (CCA) program**

**CCM Families** asked whether CCAs may perform any tasks that were not included on the CCA assessment during their shifts.

**OLTSS Response:** You are only able to be paid as a CCA for tasks that are included in your assessment, which determines the number of hours on your authorization. If, while you are caring for your family member, a task comes up that wasn't on your assessment, you may perform it in your capacity as a parent, family member, etc. (if you are comfortable). Any additional time needed for this task would not be payable. This shouldn't result in parents having to do anything differently - as the authorization is based on the assessment, the only tasks that will be paid for are those included on the assessment.

**CCM Families** asked if there is any progress in developing a CCA option similar to the PCA option.

**OLTSS Response** In order to implement a CCA option, MassHealth must first have a way to track our current program, the PCA option, which is not currently possible. MassHealth has been working on identifying a way to distinguish between PCA option and straight PCA hours, which would help us to track the program. If we are successful in finding a way to track and have more oversight of the PCA option program, we can then consider a similar flexibility for CCA services. We would ultimately need MassHealth leadership approval to explore this option.

**CCM Families** shared that CCA option would have a huge positive impact on their lives.

1. **Comprehensive Care Coordination/Case Management (C4M)**

**CCM Families** shared that one of the things that can be challenging is that families are often connected with other services like DHS, DDS, PediPal, etc., but much of the burden still lies on families to figure out what services they need and how to access those services. Some kind of personalized, online and searchable portal would be so helpful.

**OLTSS Response:** We designed this new case management entity to coordinate with other services that families may be working with - so for example, your case manager for this new entity would be able to work directly with your DHS, DDS, PediPal, etc. point of contacts to coordinate services. The resource team and the case managers will do the heavy lifting to help each member/family with any care resource needs they may have from pharmaceutical research, DME, Education needs for youth, insurance and benefit information, community resources and to work with other state agencies that may have applicable services**.** MassHealth will provide additional information to CCM members and families once a bidder has been selected so that members and families can decide whether they’d like to opt into the program. This program will work collaboratively with CCM clinical managers.

1. **CSN Training Awards**

**CCM Families** asked if there is a summary of nurse training topics covered for complex care patients during the CSN training award programs.

**OLTSS Response:** Each CSN Training Contractor was required to provide a curriculum listing topics of their learning modules before they started the CSN Nurse training classes. **Both training programs** included the following topics:

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| * Introduction to complex care and CSN services;
* medication safety and administration;
* common conditions and care for different body systems (respiratory, cardiac, gastrointestinal, genitourinary, endocrine, neurological, and musculoskeletal);
 | * parenteral methods and care;
* wound care;
* safety;
* behavioral health;;
* lifespan considerations;
* pain management;
* charting & documentation;
* and working with families.
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1. **Independent Nurse Insurance Requirements**

**CCM Families** asked if there has been any follow-up into independent nurse insurance/workman’s comp/something that protects families when independent nurses work in the home?

**OLTSS Response**: MassHealthdid look into this issue. Regarding liability insurance, we found that no other independently contracted provider with MassHealth is required to have liability insurance. However, given this insurance is meant to protect the provider, it is in the independent nurse's best interest to have this type of coverage for themselves. Liability insurance would not provide protection to the family. For families interested in insurance to protect themselves, this could be part of your homeowner’s insurance - however, MassHealth cannot advise families regarding this type of insurance.

**CCM Families** asked if there are protections for them when they are using agency nurses and asked ifMassHealth is the employer of Independent Nurses?

**OLTSS Response:** Massachusetts requires businesses (with some exceptions) to carry worker’s compensation insurance for their employees. MassHealth requires CSN agencies to cover liability insurance for their businesses.

MassHealth is not the employer of independent nurses. They are considered self-employed individuals who contract with MassHealth in order to be reimbursed for CSN services.

**CCM Families** asked if there is a guide for comparing independent nurses and CSN agencies, particularly for new families who are just learning about CSN.

**OLTSS Response:** For information on the differences between independent nurses and CSN agencies, MassHealth recommends families visit the CCM member webpage at <http://mass.gov/ccm>. Specific information on independent nurses and CSN agencies can be found on the [**Provider Types**](https://www.mass.gov/info-details/masshealth-csn-provider-types) page, as well as in the [**CCM onboarding guide**](https://www.mass.gov/doc/ccm-onboarding-guide/download). Additionally, MassHealth encourages families to speak with their CCM clinical manager if they have questions about the two provider types.

1. **Independent Nurse Limit of Hours**

**OLTSS requested feedback** from families on the call about a request to extend the independent nurse limit of hours to allow independent nurses to work up to 80 hours in a consecutive 7-day period if:

* The member provides consent to MassHealth/CCM;
* The IN does not work for another member during the same 7-day period; and,
* The IN signs an attestation that they will not work or seek alternative employment for the remainder of the 7-day period

**CCM Families** had mixed feedback. Families expressed not wanting to prevent another family from filling more of their nursing if this number of hours could be provided safely by the nurse. Several families had concerns about a provider working 80 hours in a week.

**CCM Families** shared that they do not always know how to report a complaint about a provider. Families also asked for more transparency around the complaint process specifically for independent nurses.

**OLTSS Response:** If families are ever feeling unsure about where to report a complaint about an agency nurse or an independent nurse, families can always make these reports to their CCM Clinical Manager. CCM will investigate these complaints, by either following up with the agency or independent nurse as appropriate. Complaints may also be escalated to MassHealth for further action. Additional actions MassHealth may take include reaching out to the agency/independent nurse for further discussion of the complaint and follow up, auditing the provider, reporting the provider to the Board of Registration in Nursing, sanctioning the provider, and/or terminating the provider from MassHealth.

1. **Update to LTSS Assessments for Adults**

**CCM Families** shared that they like the two-year review process for adults and asked whether this would affect a member’s right to appeal. Would this mean adult members may only appeal every two years?

**OLTSS Response:** CCM members’ appeal rights will not be affected by this policy change.Appeals may be submitted regarding a member’s service record and/or prior authorization for services.You must submit a request for an appeal within 60 calendar days of receiving your service record and/or prior authorization from CCM. If you believe you or your family member’s medical condition has changed, you may request a new assessment by CCM at anytime, regardless of when your next assessment is scheduled.

1. **CCM Quarterly Call Summaries**

**CCM Families** asked if the summary and slides from quarterly calls could be shared with families sooner.

**OLTSS Response:** One of the causes for a delay is translation into the top six languages, which can take a significant amount of time given how lengthy the call notes are. However, MassHealth will try to send out a copy of the slides and a recording of the presentation faster. MassHealth will send an additional email when the summary has been translated. Additionally, MassHealth emphasized that any major updates provided during quarterly calls (such as the change to 2-year assessments for adults) will be emailed to families shortly after quarterly calls.

1. **Personal Care Assistant (PCA)**

**CCM Families** asked if there could be guidelines on how to use the PCA option only.

**OLTSS Response:** For questions on how to use the PCA option, please speak with your CCM clinical manager.

**CCM Families** shared that it is challenging to track their PCA option hours, as their statements from Tempus include hours for both straight PCA and PCA option.

**OLTSS Response:** Right now there is not an easy way for families to distinguish between straight PCA and PCA option hours on their statements from Tempus; this is also why MassHealth has difficulty tracking the PCA option program. Creating a modifier for PCA option hours will help families to also distinguish between the two on both their prior authorizations and statements from Tempus.

**CCM Families** shared that when PCA overtime is required, it is very challenging for families to get in touch with Tempus to submit the required overtime forms unless they go through CCM clinical managers. Families asked why overtime needs to be approved and whether it can just be included in the prior authorization.

**OLTSS Response**: MassHealth will follow-up with the team that manages the PCA program about this issue.

**CCM Families** asked if unusedPCA hours accumulate on a prior authorization if a member is

hospitalized?

**OLTSS Response:** Unused PCA hours do not accumulate on a prior authorization if a member is hospitalized; only unused CSN hours can accumulate.

1. **CSN Rates**

**CCM Families** advocated for a wage-pass through to be added to CSN rate regulations and shared concerns that the recent rate increases are not being reflected in agency nurse salaries.

**OLTSS Response:** MassHealth is looking into the possibility of incorporating a wage pass through or some other way to standardize nurse salaries in regulations. We are currently in the early stages of exploring this possibility.

1. **CCM Clinical Manager Turnover**

**CCM Families** shared concerns that families aren’t being notified in a timely manner when Clinical Managers are quitting, going on leave, etc. and would like a timelier notification process for these kinds of changes.

**CCM Response:** Ideally, CCM tries to do a warm hand off with members and families whenever there is a need for a transition to a new Clinical Manager. Sometimes in the case of things like medical leave or maternity leave, CCM does not have forewarning and there is not an ability to do this kind of warm handoff. CCM can continue to discuss further how these kinds of transitions can be better communicated to members and families.