

CCM Member and Family Listening Session Summary: December 15th, 2022

TOPIC	TIME
Introductions, Logistics, and Guidelines	3:00 – 3:10
CSN Service Delivery Updates on Initiatives	3:10 – 3:30
CCM Member and CCM Family Feedback	3:30 – 4:15
Summary & Action Steps	4:15 – 4:30

MassHealth (MH) CSN Service Delivery Updates on Initiatives

- CCM Temporary Pause on LTSS Reassessments
- Proposed Regulations: Complex Care Assistant
- CCM Natural Caregiver Relief Funds
- Proposed Procurement: Comprehensive Care Coordination/Care Management
- CSN Advisory Council
- CCM Nurse Directory
- CCM Member Webpage on mass.gov
- Proposed Amendments to Independent Nurse Regulations

CCM Member and CCM Family Feedback and Follow up

1. **CCM families asked questions regarding the Temporary Pause on LTSS Reassessments.**

- i. Is data being collected regarding the outcomes of current outreach to CSN providers during the pause?

Response from OLTSS: Since early December, CCM has been sending OLTSS regular reports which include data on the number of members who have received outreach, the number of calls made to providers, the outcomes of those calls, and the number of other services and referrals that Clinical Managers have made for members and families.

- ii. Are CCM Clinical Managers able to reach out to both agencies and Independent Nurses (INs) to find available nurses?

Response from OLTSS: CCM Clinical Managers who are making calls to nursing providers are calling both agencies and INs.

- iii. How many members does each CCM Clinical Manager follow?

Response from OLTSS: Clinical Managers each follow between 40 and 45 members.

- iv. When a new prior authorization (PA) is issued, can we use our “unused hours” from our prior PA?

Response from OLTSS: No, because prior authorizations are based on the member’s assessed need during the period covered by the prior authorization. Accordingly, any unused hours from a prior PA period do not roll over to the new PA period.

2. CCM families asked questions regarding Natural Caregiver Relief Funds.

- i. How do you know if your paperwork was received? How do you know if it was completed correctly?

Response from OLTSS: After an attestation form has been received by UHealthSolutions, it will be reviewed for accuracy. MassHealth will send an email once a week to families whose attestations have been received so far. Please note, this email only confirms that your mailed attestation form has been received by UHealthSolutions; it does not confirm whether your attestation form has been approved or processed. If there are issues with your attestation form that need to be corrected, you will receive a call from either UHealthSolutions or an OLTSS staff member. For families who have an Authorized Representative Designee (ARD) or Permission to Share Information (PSI) form on file with MassHealth, you may call UHealthSolutions directly to ask about the status of your attestation.

- ii. When can families expect to receive these funds?

Response from OLTSS: After your attestation form is complete and requires no further review, it will take on average between 7-10 business days for funds to be deposited in your bank account.

- iii. Have any payments been distributed yet?

Response from OLTSS: As of January 18th, UHealthSolutions has received 546 forms. Of those, 546 forms have been approved and sent to finance for processing.

- iv. Will future relief funds be based on whether members have fewer than 84 hours or more than 84 hours?

Response from OLTSS: OLTSS is planning to provide additional relief payments in 2023. The eligibility criteria will be based on the number of nursing hours in a member's most recent CCM service record.

3. CCM families asked questions regarding the proposed Complex Care Assistant Services.

- i. What rate is being proposed for the Complex Care Assistant?

Response from OLTSS: Complex Care Assistant services are a proposed amendment to the Continuous Skilled Nursing (CSN) Agency program regulations. The proposed amendments can be found at [130 CMR 438.000](#). The proposed rates for these services were also added to the Continuous Skilled Nursing rate regulations, which can be found at [101 CMR 361.00](#).

- ii. Have CCM families been able to provide feedback on these draft regulations, prior to the public hearing?

Response from OLTSS: OLTSS appreciates the importance of having members and families provide feedback on proposed regulation amendments. The proposed amendments to both of these regulations were posted online on December 23rd, with the [public hearings](#) on January 20th, giving CCM members and families the opportunity to provide comments until January 20th, or provide testimony during the public hearing, which is the method for the public to comment on proposed regulatory amendments.

- iii. Will there be two tracks for “training” for this new position, which recognizes that many family members are already trained and skilled in providing these services and don’t need in-depth training?

Response from OLTSS: There will not be two tracks. The proposed regulations include training and competency requirements that all Complex Care Assistants will need to meet in order to provide these services. Complex Care Assistants will be required to complete all training and/or demonstrate competency in all tasks provided by a Complex Care Assistant.

- iv. How will this position operate? Will it be through an agency model or a consumer-directed model like the PCA program?

Response from OLTSS: Complex Care Assistant services will be provided by CSN agencies. The Complex Care Assistant will be an employee of the agency, and they will receive regular supervision from a nurse who is employed by that agency.

4. CCM families asked questions regarding the proposed Comprehensive Care Coordination/Care Management Procurement.

- i. Will this program be available for all CCM members?

Response from OLTSS: Under the proposed procurement, the Care Management entity would be available for all CCM members, regardless of age. There is another proposed Care Management program, CARES for Kids, which will be available for a larger population of MassHealth members under the age of 21, including CCM members under 21. The CARES for Kids program is expected to be effective July 5, 2023.

- ii. Why can’t families have both this new entity and CARES for Kids?

Response from OLTSS: CARES for Kids and the proposed new Care Management entity would be performing the same care management functions; accordingly, it would be considered a duplication of services to receive both care management through CARES for Kids AND the proposed new Care Management entity.

- iii. Can you give examples of what care coordination would look like? Will it include collaboration with pediatric palliative care and pediatric hospice providers?

Response from OLTSS: The proposed Comprehensive Care Coordination/Care Management procurement would have an entity provide care coordination and care management activities which may include working with schools, health-related social needs, primary and specialty care providers, hospitals, CCM, and all other systems of care such as pediatric palliative care and pediatric hospice providers. The proposed CCM-specific care management entity would also provide support for finding nurses and other in-home LTSS services such as PCAs, Home Health Aides, etc.

- iv. What does “high touch” case management look like?

Response from OLTSS: The proposed procurement for a CCM-specific care management entity would be able to provide “high touch” case management support, as their caseloads would be between 20 and 25 members. Having a smaller caseload will allow case managers to have more regular contact with members and families.

- v. How is care coordination between specialists, nurses, and hospitals being handled currently? Will this care coordination change?

Response from OLTSS: Currently, CCM Clinical Managers are able to provide some support with care management activities, however, this is not their primary role. With the proposed procurement for a Comprehensive Care Coordination/Care Management entity and CARES for Kids, CCM will continue to focus on assessing and authorizing CSN services and other LTSS needs for the CCM population. Your CCM Clinical Manager will still work with you to complete the LTSS needs assessment (your nursing assessment) and to establish authorizations for your chosen providers.

5. CCM families asked questions regarding the CSN Advisory Council.

- i. How many CCM families will be on the council?

Response from OLTSS: We have recommended 10 CCM family members to be on the council.

6. CCM families asked questions regarding the CCM Member Webpage.

- i. Could a guide for families on how to work with Independent Nurses be included?

Response from OLTSS: The CCM Member Webpage includes comprehensive information about the CCM program and links to other helpful resources for families. MassHealth intends to include a fact sheet for families on how to work with Independent Nurses.

- ii. Can there be a listserv via mass.gov for families to receive announcements (regulations, rates, the Public Health Emergency (PHE), etc.) on updates that apply to the CCM population?

Response from OLTSS: There is a link to join a [listserv](#), which includes options to receive updates about regulations, rate changes, the PHE, and other topics. There is no CCM-specific listserv. OLTSS plans to have the CCM Member Webpage provide updates on changes that affect the MassHealth CCM program.

7. CCM families asked questions regarding the Independent Nurse (IN) Program.

- i. How can CCM families participate in conversations about the IN program?

Response from OLTSS: We welcome CCM member and family feedback on the IN program. We are currently updating the IN program regulations and we invited families to provide feedback in an email sent on 12/15/22.

- ii. Are INs required to complete both Criminal Offender Record Information (CORI) and Sex Offender Registry Information (SORI)?

Response from OLTSS: INs are required to complete a CORI check when they enroll as a provider, and then again each year. They are not required to complete a SORI check.

- iii. Who do we call if we have an issue with an IN? What if it is overnight?

Response from OLTSS: The current set-up for the MassHealth Independent Nurse program does not include an agency or other employer supervisors. INs are not MassHealth employees and are considered self-employed practitioners that are MassHealth enrolled, and are required to follow MassHealth regulations. Oversight of their compliance with MassHealth regulations is provided through MassHealth audits.

Families can call CCM to let them know that an issue took place so that CCM can follow up with the IN. Depending on the severity of the incident, CCM will also provide the incident report to MassHealth. Families can also reach out to the member's doctor's office if they have questions about the plan of care and want to discuss any care that was provided by the IN.

Some families raised concerns about what to do if there was an altercation with an IN, particularly overnight. If there is an emergency situation or if immediate medical attention is required to address a life-threatening medical emergency, the family should call 911.

8. CCM families asked questions regarding the CSN rate setting process.

- i. Does the Center for Health Information and Analysis (CHIA) look at hospital nursing rates, and within hospitals, specifically at rates for nurses in the NICU, PICU, or MICU?

Response from OLTSS: The Executive Office of Health and Human Services (EOHHS) contracts with CHIA to review MassHealth's provider rates, including CSN rates. CHIA also conducts an environmental scan on rates and salaries paid to comparable providers in other MassHealth programs and in comparable Medicaid programs in other states.

- ii. Is MassHealth considering establishing a high acuity rate?

Response from OLTSS: OLTSS has begun a rate review for CSN services with CHIA which may result in the development of a proposed high acuity rate. Rates for MassHealth services are established in regulation after a public hearing and opportunity for public comment.

- iii. Information was presented by agencies in July 2021 regarding CSN rate setting. Why hasn't that been incorporated?

Response from OLTSS: Agency feedback is always a part of a rate review. During a rate review, CHIA uses annual financial reports provided by agencies to aid in the analysis and determine the rates for services. Additionally, MassHealth engages with agencies and Independent Nurse Providers to solicit their feedback. Agencies and Independent Nurse Providers are also able to submit testimony during the public hearing process. Information from all of these sources is considered as part of the rate review.

- iv. Can American Rescue Plan Act (ARPA) funds be used to increase CSN rates?

Response from OLTSS: Federal funds available through Section 9817 of ARPA) are limited and temporary in nature. EOHHS did use ARPA Section 9817 funds for a temporary 30% rate increase to CSN services effective July 1, 2021, through June 30, 2022. However, as the ARPA Section 9817 funds are temporary, they are not an available source of funding for permanent rate increases.

9. CCM families asked questions regarding LTSS Assessment and LTSS Services.

- i. Can a PCA and a nurse work at the same time, if they are not providing the same services? If so, can this be communicated to PCA and nursing agencies?

Response from OLTSS: Yes. While Medicaid prohibits duplication of services, because PCA services are for the provision of personal care and CSN services are for the provision of skilled nursing, there is no duplication of services when a CSN nurse and PCA are both

in a member's home, to the extent the nurse is providing CSN services and the PCA is providing personal care services.

- ii. Are Home Health Aides part of the CCM assessment?

Response from OLTSS: CCM Clinical Managers can conduct a Home Health Aide Assessment, and then create a PA for Home Health Aide services that are medically necessary for the CCM member. If you would like to have a Home Health Aide evaluation, please let your CCM Clinical Manager know.

- iii. Can the nursing assessment include nursing time to meet families' needs such as overnight care or providing care while families are working?

Response from OLTSS: No, the assessment is based on medical necessity for the number of nursing interventions required in a 24-hour period and the length of time it takes to complete those interventions.

10. CCM families asked questions regarding MassHealth OLTSS Structure.

- i. Can ARPA funds be used to fund a full-time compliance position within OLTSS to audit programs and measure compliance and success?

Response from OLTSS: No, OLTSS cannot use ARPA Section 9817 funds to develop a full-time compliance position to audit the CSN program because it does not align with the federal rules on how states may use the funds.

- ii. Can families have access to an organizational chart for both CCM and OLTSS?

Response from OLTSS: MassHealth intends to include OLTSS and CCM key contacts on the webpage.