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| Executive Office of Health and Human Services |
| **Massachusetts** **Personal Care Attendant Quality Home Care Workforce Council** |
| **Annual Report** |

**Reporting Period: State Fiscal Year 2021 through State Fiscal Year 2022**

CHARLES D. BAKER

Governor

KARYN E. POLITO

Lieutenant Governor

MARYLOU SUDDERS

Secretary

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# EXECUTIVE SUMMARY

In state fiscal years 2021 and 2022, the Personal Care Attendant Quality Home Care Workforce Council continued efforts to support the COVID-19 response for PCAs and consumers, conducted collective bargaining sessions and joint committee meetings with 1199SEIU, the Union representing PCAs, negotiated a one-year contract with 1199SEIU, effective July 1, 2022, oversaw a service contract with both the 1199SEIU Training and Upgrading Fund (“TUF”), and the University of Massachusetts Medical School’s Commonwealth Medicine division (“UMass”).

The Council and the Executive Office of Health and Human Services (EOHHS) engaged in several critical COVID-19 response efforts to support consumers and PCAs throughout the pandemic. The Council partnered with 1199SEIU to distribute PPE and free at-home COVID-19 rapid antigen tests to PCAs throughout the COVID-19 pandemic. The federal American Rescue Plan Act (ARPA) provided time-limited funding to enhance, expand and strengthen certain Medicaid HCBS services-- including PCA services. Through the federal ARPA investments, EOHHS provided a 10% rate enhancement for PCAs -- increasing the collectively bargained PCA wage as of July 1, 2021, from $16.10/hr to $17.71/hr.

In addition to the wageincreases, the accomplishments of the most recent CBA include a commitment to:

* Prioritizeracial justice and equity in the PCA Program through the formation of a Racial Justice and Equity joint sub-committee with the Union to convene and initiate focused conversations with members of the Council, consumers, and the PCA workforce to identify racial and ethnic disparities at all levels of the PCA program and inform a list of concrete initiatives and actionable steps to address systemic racial disparities with a focus on those that fall within the scope and defined responsibilities of the Council.
* Discuss an Advanced Aide program through the establishment of a committee to researchand explore training, certification and pay differential.
* Form a committee to evaluate retirement counseling included within the Employee Assistance Program (EAP) and explore other possible retirement options.
* Supply PPE and COVID-19 rapid antigen tests to PCAs through Union partnership.

During the reporting period, The Council continued to manage two vendor service contracts to support the Council’s mission:

1. Commonwealth Medicine at the University of Massachusetts Medical School (UMass) - to collect and analyze PCA and consumer data; manage an online PCA New Hire Orientation; develop and manage recruitment and retention initiatives, and support consumer and PCA studies.
2. MA 1199SEIU Training & Upgrading Fund (TUF) - to deliver skills enhancement classes and the PCA New Hire Orientation to PCAs across the state,

In calendar year 2023, the Council will work with 1199SEIU to convene the committees and carry out the provisions included in the CBA, and continue to work with UMass to implement statewide PCA recruitment and retention strategies.

# LEGISLATIVE MANDATE AND SCOPE OF REPORT

**The Personal Care Attendant (PCA) Quality Home Care Workforce Council**

The following report is hereby issued pursuant to Section 75 of Chapter 268 of the Acts of 2006.

*Section 75. (a) The council shall conduct a performance review every 2 years, submit a report of the review to the legislature and the governor and make the report available to the public upon submission to the governor and the legislature.*

*(b) The performance review and report shall include an evaluation of the health, welfare and satisfaction with services provided of the consumers receiving long -term in-home personal care services from personal care attendants under sections 70 to 75, inclusive, including the degree to which all required services have been delivered, the degree to which consumers receiving services from personal care attendants have ultimately required additional or more intensive services, such as home health care, or have been placed in other residential settings or nursing homes the promptness of response to consumer complaints and any other issue considered to be relevant.*

*(c) The performance review report shall provide an explanation of the full cost of personal care services, including the administrative costs of the council, unemployment compensation, Social Security and Medicare payroll taxes paid and any oversight costs.*

To view the PCA Quality Workforce Council enabling Act of 2006 MGL § 71-74 of Chapter 268, see **Appendix 2**: MA General Laws.

# I. INTRODUCTION AND BACKGROUND

Personal Care Attendant (PCA) services are a vital resource for more than 35,000 older adults and people with disabilities living in Massachusetts (MA). PCA services enable consumers to live independently in their homes and communities, as opposed to a nursing home or other facility-based setting.[[1]](#footnote-2) In Massachusetts, eligible Medicaid members access PCA services through MassHealth’s fee-for-service PCA Program or through a One Care or a senior care options (SCO) plan. There are over 50,000 PCAs that work an average of 20 hours per week providing services to consumers within MassHealth’s PCA program.[[2]](#footnote-3) Since the inception of the Personal Care Attendant Quality Home Care Workforce Council (“the Council”)in 2008, the number of consumers and PCA providers in Massachusetts has more than doubled.

### **MassHealth Personal Care Attendant Program**

The MassHealth PCA program is a consumer-directed model; the consumer is the employer and is fully responsible for recruiting, hiring, scheduling, training, and, if necessary, terminating PCAs. The Executive Office of Health and Human Services (EOHHS) administers the MassHealth fee-for-service (FFS) PCA program through contracts with 18 personal care management agencies (PCMs). PCM agencies conduct clinical assessments and submit prior authorization requests to MassHealth, which recommend the specific number of PCA hours for which a member may be eligible. PCM agencies also provide functional skills training to consumers to support them in their roles as PCA employers.

PCM agencies are required to submit regular quality assurance reports to MassHealth, which include agencies’ annual consumer satisfaction surveys. In FY2021, PCM agencies surveyed 23,512 consumers and received feedback from 2,248 respondents. In FY2022, PCM agencies surveyed 25,953 consumers and received feedback from 2,442 respondents. Highlights from these surveys include: the vast majority of Consumers indicating their satisfaction with PCM functions, specifically that questions were answered correctly and timely by PCM staff (84% in FY21, 93% in FY22); that Consumers were treated with respect (92% in FY21 and 97% in FY22); and overall, Consumers are satisfied with their PCM agency (92% in FY21 and 95% in FY22).

EOHHS also contracts with a single Fiscal Intermediary (FI), which performs certain employer-required tasks on behalf of the PCA consumers, such as processing payroll, completing state and federal tax withholding, generating W-2s, and more. As of January 1, 2022, the MassHealth PCA program transitioned from three active Fiscal Intermediaries (FIs) down to one. Throughout the transition to a single FI, the Council provided feedback to, and collaborated with, EOHHS and 1199SEIU to address transition-related issues and ensure the continuity of services for PCA consumers.

The full cost of fee-for service personal care services in the state fiscal years 2021 and 2022 are illustrated at **Appendix 7**. To view additional or more intensive services received by PCA Consumers, please see **Appendix 7**: Additional Services Used in SFY 2021 and **SFY** 2022.

### **Council Members and Mission**

The Councilconsists of nine appointed members (See Appendix 3: PCA Quality Workforce Council Members) and was established within EOHHS to *“…ensure the quality of long-term, in home, personal care by recruiting, training and stabilizing the work force of personal care attendants (Chapter 268 of the Acts of 2006).”*

In 2009, in support of this mission, the Council established a vision statement:[[3]](#footnote-4)

1. Ensuring consumer control of the PCA program and the training and employment of PCAs; control by consumers being essential to the independence, dignity and self-sufficiency the PCA program is meant to achieve.
2. Diligently represent the interests of consumers as employers and further those interests by assisting to resolve policies and procedures brought to the Council’s attention that create impediments for consumers as employers.
3. Supporting and implementing training methods and policies that increase the skills and knowledge base of PCAs and consumers.
4. Assisting PCAs to achieve increased wages, benefits, advancement opportunities and other benchmarks of respected, dignified employment.
5. Promoting policies that ensure that consumers exercise their rights with integrity and in a responsible manner.
6. Making a continuing dialogue with the consumer community a priority.

### **Council Budget and Administration Overview**

In SFY 2021, a budget of $2.791 million was included in the General Appropriation Act (GAA) to support the Council’s effort to build and sustain a quality PCA workforce. In SFY 2022, the Council received $2.796 million through the GAA[[4]](#footnote-5) to continue these efforts (see Appendix 4 PCA Council Budget).

During SFY 2021 and during part of SFY 2022, the Council office employed one full-time staff and a program coordinator who was employed until January 2022. An EOHHS program coordinator subsequently stepped in to manage day-to-day Council office activities, and coordinate Council meetings. The Chair of the Council had been carrying out the functions and responsibilities of the Council, including overseeing strategic initiatives developed by the Council, directing and managing contractual agreements, managing Council office staff, and managing Council matters relating to collective bargaining and labor management in accordance with applicable state laws. In September 2022, the Council hired a full-time executive director who is dedicated to overseeing and carrying out the Council’s administrative functions and operational responsibilities, including managing the Council’s initiatives and contracts.

### **Council Contractual Agreements**

The Council managed two vendor service contracts to support the Council’s mission:

1. Commonwealth Medicine at the University of Massachusetts Medical School (UMass) - to collect and analyze PCA and consumer data; manage the online PCA New Hire Orientation learning system; develop and manage recruitment and retention initiatives, and support consumer and PCA studies.
2. MA 1199SEIU Training & Upgrading Fund (TUF) - to deliver skills enhancement classes and the PCA New Hire Orientation to PCAs across the state.

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# II. ACTIVITY SUMMARY

### **Responding to the Pandemic**

The Council and the Executive Office of Health and Human Services engaged in several critical COVID-19 response efforts to support consumers and PCAs throughout the pandemic. The Council partnered with 1199SEIU to distribute PPE and free at-home COVID-19 rapid antigen tests to PCAs throughout the COVID-19 pandemic.

On March 11, 2021, President Biden signed into law the American Rescue Plan Act (ARPA). Section 9817 provides enhanced federal funding for Medicaid home and community-based services (HCBS) and certain behavioral health services through a one-year 10% increase to the share of state Medicaid spending that is paid for by the federal government. This one-year increase in federal matching funds resulted in new, time-limited dollars invested to enhance, expand and strengthen certain Medicaid HCBS and behavioral health services-- including PCA services through March 2024. Through the federal ARPA investments, EOHHS provided a 10% rate enhancement for certain HCBS providers, including PCAs -- increasing the collectively bargained PCA wage as of July 1, 2021, from $16.10/hr to $17.71/hr.

### **2022-2023 Collective Bargaining Agreement**

In the spring of 2022, the PCA Workforce Council negotiated with 1199SEIU a one-year collective bargaining agreement (CBA), effective July 1, 2022. The current one-year agreement maintains the 10% increase originally supported by ARPA, allowing PCA wages to remain at $17.71/hr for the first two quarters of SFY23, and further increases PCA wages to $17.80/hr as of January 1, 2023, and $18.00/hr as of April 1, 2023.

In addition to the wage increases, the accomplishments of the most recent CBA include commitments to:

* Prioritize racial justice and equity in the PCA Program through the formation of a Racial Justice and Equity joint committee with the Union to convene and initiate focused conversations with members of the Council, consumers, and the PCA workforce to identify racial and ethnic disparities at all levels of the PCA program and inform a list of concrete initiatives and actionable steps to address systemic racial disparities with a focus on those that fall within the scope and defined responsibilities of the Council.
	+ Discuss an Advanced Aide program through the establishment of a commitment to research and explore training, certification and pay differential aspects.
	+ Acknowledge the importance of retirement planning to PCAs through establishment of a committee to explore retirement counseling and other possible retirement options.
	+ Establish a process to ensure timely payment when there are certain payment issues not due to the fault of the PCA.
	+ Supply PPE and COVID-19 rapid antigen tests to PCAs through Union partnership.

### **Skills Training and New Hire Orientations**

The 1199SEIU Training and Upgrading Fund (TUF), whose mission is to provide quality training to PCAs throughout the Commonwealth, administers the Homecare Training Benefit (HTB). Created in 2012 to provide new hire orientation (NHO), skills enhancement workshops and educational opportunities to PCAs, the HTB is overseen and directed by the Labor Management Committee and all programming is reviewed and approved by the committee. TUF provides training services and required reporting to the Council in accordance with the CBA and its contract with the Council.

Starting in the Fall of 2012, TUF offered skills enhancement workshops and Digital Literacy to all currently employed PCAs. In 2013, English as a Second Language (ESOL), Nurse Assistant training vouchers, and college tuition vouchers were made available to all currently employed PCAs. For the Nurse Assistant and college tuition vouchers, an additional requirement of being employed for at least one year prior to enrollment is required. As of 2022, there are 10 skills enhancement workshops, 3 levels of English as a Second Language (ESOL), Tech Goes Home and digital literacy classes, and a Citizenship program that provides ESOL/Civics classes, referral to legal assistance for the application process and financial assistance in the form of a reimbursement for $500.00 of the application fee. Additionally, in FY20 there were 65 PCAs enrolled in college programs and in FY21 there were 74 PCAs enrolled in college programs and PCAs enrolled in three colleges/agencies receive nurse assistant vouchers. For more details see **Appendix 1**: 1199SEIU TUF PCA Skills Enhancement Classes and Vouchers for FY21.

In Spring 2014, TUF began piloting a 3-hour New Hire Orientation (NHO) curriculum for PCAs in three areas; Greater Boston, Worcester, and Springfield. The Pilot was expanded to an additional nine cities in Summer 2014 and then expanded to the entire state in the Fall of 2014. In March 2020, due to the pandemic, all group facilitation was suspended and TUF reconfigured both the skills enhancement workshops and NHO sessions to offer the trainings on a remote basis. In Fall 2020, the Labor Management Committee agreed to expand the NHO from 3 to 4 hours to include Infection Control. As of the Fall of 2022, in-person NHO/skills enhancement workshops are being offered again.

Currently, PCAs can take NHO through either a Consumer Taught (CT) model or a Group model. For the CT model, PCAs attend two hours of NHO with their consumer-employer through the online portal and attend an additional two hours of NHO (Worker’s Rights and Infection Control) through the Group model. Access to the online portal is provided through the MassHealth Fiscal Intermediary. Later this year, consumer-employers will also be able to provide NHO to their PCAs via an updated paper curriculum.

If the consumer-employer and PCA choose the NHO Group model approach, PCAs then register for either one 4-hour session or two 2-hour sessions. These sessions are either in-person or online via Zoom. Registration for the Group model is completed either by pre-registering online or calling TUF to register by phone. TUF provides NHO sessions in English and Spanish as well simultaneous interpretation for PCAs who speak limited or no English and in-person sessions are scheduled in 21 locations throughout the Commonwealth. During the period from January 1, 2021, through September 30, 2022, TUF conducted NHOs for 4,749PCAs.

### **Orientation, Recruitment and Retention**

The Council contracts with Commonwealth Medicine, the consulting division of UMass Chan Medical School (UMass), to manage the PCA Orientation, Recruitment, and Retention (ORR) activities and initiatives under the direction of the Council. The four objectives for the PCA ORR Project include:

1. Update, maintain, and conduct periodic quality assessments of the PCA new hire orientation (NHO) curriculum.
2. Administer a marketing and outreach campaign to recruit new PCAs and support consumer-employers seeking to hire workers.
3. Provide oversight and customer service for the Council’s PCA Directory website, call center, and PCA Directory Facebook page.
4. Research PCA consumer-employer needs with related to recruitment and retention challenges.

### ***Objective 1****:* *Update, Maintain, and Conduct Periodic Quality Assessments of the PCA NHO Curriculum*

UMass’ work updating, maintaining, and assessing the PCA NHO curriculum focuses in two areas: The first area involves updating the NHO curriculum as required by the program and Council. The second is the technical management of the NHO learning management system, the curriculum stored within the environment and resolution of issues related to its use.

During the reporting period, UMass updated the NHO to requested changes and managed the translation of the facilitator guide into Spanish and revised curriculum handouts into Spanish, Brazilian-Portuguese, Haitian Creole, and Khmer.

***Objective 2****: Administer a Marketing and Outreach Campaign to Recruit New PCAs and Support Consumer-Employers Seeking to Hire Workers*

To administer a marketing and outreach campaign to recruit new PCAs and support consumer-employers seeking to hire workers, UMass collaborates with state agencies and community organizations providing workforce support and training to implement recruitment strategies for unemployed or underemployed individuals. Additionally, UMass designed PCA recruitment resources in English and translated them into additional languages. See Appendix 8 for a list of UMass PCA ORR Recruitment Partners.

#### During the reporting period, UMass leveraged different marketing and outreach strategies including:

* Social Media: Leveraged social media such as Facebook to target job seekers, PCAs, consumer-employers and workforce development organizations.
* Video Production: Produced seven videos for dissemination on social media and the directory website encouraging job seekers to consider applying for PCA work in their area and addressing their potential questions.
* Hardcopy: Designed information flyers to support consumer-employer PCA recruiting activities as well as six new PCA documents for job seekers and career advisors for use on www.MAdirectcare.com.
* E-Newsletter: Launched a Directory e-newsletter targeting job seekers, PCAs, consumer-employers and workforce development organizations.
* Feedback Group: Increased the geographic diversity of consumer-employer feedback by expanding consumer-employer feedback group to include representation from each state region including the following counties: Barnstable, Berkshire, Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Suffolk, and Worcester.
* Recruitment Pilot Project: Launched a PCA recruitment pilot project in Worcester County in advance of a comprehensive statewide recruitment program. Activities include kick-off event for workforce development partners, development of marketing materials, training session for pilot partners, virtual weekly office hours, data collection and best practice sharing.
* State Agency and Community Organization Collaboration: Collaborated with the Executive Office of Labor and Workforce Development and the Massachusetts Rehabilitation Commission as well as ran remote in-person directory trainings and information sessions on PCA roles and responsibilities for state agencies and community organizations providing workforce training and support.
* Job Board: Created an account on Handshake, the premier nationwide job board supporting college and university student job searches. The PCA job opportunity is promoted at 30 colleges and universities throughout Massachusetts and Rhode Island.

***Objective 3:*** *Provide Oversight and Customer Service for the Council’s PCA Directory Website, Call Center and PCA Directory Facebook Page*

To meet the responsibility to provide oversight of, and customer service for, the PCA Directory Website, Call Center, and PCA Directory Facebook page, UMass maintains and promotes the PCA Directory website and the companion website, MAdirectcare.com. UMass also manages the PCA Directory customer call center and maintains the PCA Directory Facebook page and an e-newsletter.

During the reporting period, UMass convened a group of Council members to perform a PCA Directory requirements analysis to identify functional, navigation, and data storage improvements. Additionally, UMass managed implementation of numerous PCA Directory enhancements aimed at increasing the user-friendly nature of the directory. Ongoing quality assurance activities and user feedback drove the choice of enhancements. Examples ranged from the addition of texting as a user communication method to allowing users to select their preferred language of communication. In response to Council’s COVID-19 concerns, UMass also added COVID related enhancements including a question on vaccination status and site-based PCA notifications on new COVID-19 reporting requirements. Additional customer service activities included the production of videos to support improved ease of registration, account creation and communication with users, creation of handouts for skill trainers on the use of Counselor accounts and enhancements to MA Direct Care, the Mass PCA Directory’s companion website.

***Objective 4****: Research PCA Consumer-Employer Needs Related to Recruitment and Retention Challenges*

### To research PCA consumer-employer recruitment and retention needs, UMass collects and analyzes data from the PCA Directory, the PCA Directory Call Center, and the fiscal intermediary to identify regional trends in employment.

### During the reporting period, UMass monitored and analyzed the PCA Directory data for utilization including directory usage by job seekers and consumer-employers.

Graph 1 illustrates the number of job seekers and consumer-employers on the PCA directory between January 2021 and October 2022

Graph 2 illustrates the number of open jobs posted on the PCA directory between January 2021 and October 2022

The directory solicits voluntary feedback from PCAs and consumers in three areas: establishing contact, hiring candidates, and recommending the directory to others. Graphs 3 and 4 illustrate the outcomes of the Consumer-employer and PCA surveys, respectively, between January 2021 and October 2022

Additionally, the directory includes a question for job seekers to learn how they heard about the directory. The available data collected during this time period indicates that the top three ways job seekers learn about the Mass PCA directory are:(1) friends and family, (2) some other way, and (3) online.

During the reporting period, UMass also monitored and analyzed the PCA Directory Call Center data. The call center was established to field technical questions from directory users around how to operate the directory. In addition, if a user calls with a non-technical concern or question unrelated to the directory then the Call Center is able to efficiently streamline calls to the fiscal intermediary, the PCMs, or MassHealth. The top three reasons for calls include (1) assistance with password changes, (2) questions related to how consumer-employers can request additional PCA hours, and (3) questions related to how PCAs can find more work as a PCA.

Graph 5 illustrates the average number of calls per month received by the PCA Directory Call Center between January 2021 and October 2022



Beginning in July 2022, UMass began receiving a monthly data report to analyze the total number of PCAs and the number of new PCAs hired each month. In September of 2022, data showed 54,043 PCAs received payment for providing PCA services. Graph 6 illustrates the number of new PCAs each month for July, August, and September of 2022.



# III. FUTURE PLANS IN 2023

Throughout 2023, the jointly established Council and Union sub-committees will work to research and discuss their critical topics of focus.

* The Racial Justice and Equity joint sub-committee will continue to convene and conduct focused conversations with members of the Council, consumers and the PCA workforce to identify racial and ethnic disparities at all levels of the PCA program and inform a list of concrete initiatives and actionable steps to address systemic racial disparities with a focus on those that fall within the scope and defined responsibilities of the Council.
* The Advanced Aide joint sub-committee will continue to research and explore training, certification and pay differential aspects.
* The Retirement Counseling and Related Options joint sub-committee will research and report on the quality of EAP Retirement Counseling, benefit of EAP retirement counseling and its 401K related advice and other potential 401k or related plans.
* The Electronic Visit Verification (EVV) joint sub-committee will support the Council in its goal to implement EVV in a manner that protects the privacy of, and provides maximum flexibility for PCAs and consumer-employers while following state and federally mandated requirements and in doing such will assist with, monitor, and explore enhancements to the use of EVV.

In calendar year 2023, the Council, with support from UMass, will review the results of the UMass pilot and further refine and implement a comprehensive recruitment and retention plan for the PCA workforce including: any necessary enhancements to the PCA referral directory and call center based on user feedback, virtual events to bring PCA candidates together with PCA employers, and deployment of a comprehensive marketing strategy for the PCA referral directory.

**Appendix 2: MA General Laws**

**Massachusetts General Laws Chapter 268, § 71-74**

*Section 71. (a) There shall be a PCA quality home care workforce council which shall be within the executive office of health and human services but shall not be subject to the control of the executive office, to ensure the quality of long -term, in-home, personal care by recruiting, training and stabilizing the work force of personal care attendants.*

 *(b) The PCA quality home care workforce council shall consist of 9 members appointed under this section. A majority of the members of the council shall be consumers as defined in this chapter. In making appointments to the council, the governor shall appoint the secretary of the executive office of health and human services or a designee, who shall serve as chair, the secretary of labor and workforce development or a designee and 1 member from a slate of*

*3 consumers recommended by the governor's special advisory commission on disability policy.*

*The auditor shall appoint 1 member from a slate of 3 consumers recommended by the developmental disabilities’ council, 1 member from a slate of 3 consumers recommended by the Massachusetts office on disability, and 1 member from a slate of 3 consumers recommended by the statewide independent living council. The attorney general shall appoint*

*1 member from a slate of 3 consumers or consumer surrogates recommended by the*

*Massachusetts home care association, 1 member from a slate of 3 consumers or consumer surrogates recommended by the Massachusetts council on aging and 1 member chosen by the attorney general. The secretary of health and human services or a designee and the secretary of labor and workforce development or a designee shall be permanent members during their term in office. Appointees to the council shall serve 3 -year terms. If a vacancy occurs, the executive officer who made the original appointment shall appoint a new council member to serve the remainder of the unexpired term or, in the event that the vacancy occurs as the result of the completion of a term, to serve a full term, and such appointment shall become immediately effective upon the member taking the appropriate oath. If the departing council member was appointed under a recommendation made under this paragraph, the executive officer shall make the new appointment from a slate of 3 recommendations put forth by the entity that originally recommended the departing council member. Members of the council may serve for successive terms of office. A majority of the council shall constitute a quorum for the transaction of any business. Members of the council shall not receive compensation for their council service but members shall be reimbursed for their actual expenses necessarily incurred in the performance of their duties.*

*Section 72. (a) The workforce council shall carry out the following duties:*

*(1) Undertake recruiting efforts to identify and recruit prospective personal care attendants;*

*(2) Provide training opportunities, either directly or through contract, for personal care attendants and consumers;*

*(3) Provide assistance to consumers and consumer surrogates in finding personal care attendants by establishing a referral directory of personal care attendants; provided that before placing a personal care attendant on the referral directory, the workforce council shall determine that the personal care attendant has met the requirements established by the executive office in its applicable regulations and has not stated in writing a desire to be excluded from the directory;*

*(4) Provide routine, emergency and respite referrals of personal care attendants to consumers and consumer surrogates who are authorized to receive long-term, in-home personal care services through a personal care attendant;*

*(5) Give preference in the recruiting, training, referral and employment of personal care attendants to recipients of public assistance or other low -income persons who would qualify for public assistance in the absence of such employment; and*

*(6) Cooperate with state and local agencies on health and aging and other federal, state and local agencies to provide the services described and set forth in this section.*

*Section 73. (a) Consumers or the consumer’s surrogate shall retain the right to select, hire, schedule, train, direct, supervise and terminate any personal care attendant providing services to the consumer or consumer’s surrogate.*

*(b) Personal care attendants shall be considered public employees, as defined by and solely for the purposes of, chapter 150E and section 17J of chapter 180. The PCA quality home care workforce council shall be the employer, as defined by and solely for the purposes of said chapter 150E and said sections 17A, 17G and 17J of said chapter 180 and deductions under said sections 17A, 17G and 17J may be made by any entity authorized by the commonwealth to compensate personal care attendants through the MassHealth personal care attendant program.*

*Section 74. (a) The PCA quality home care workforce council may make and execute contracts and all other instruments necessary or convenient for the performance of its duties or exercise of its powers, including contracts with public and private agencies, organizations, corporations and individuals to pay them for services rendered or furnished.*

**Appendix 3: PCA Quality Workforce Council Membership**

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| Name | Council Seat Represented/Appointing Authority |
| Council Chair: Lauren Peters, Undersecretary  | Ex officio, Executive Office of Health and Human Services, Governor  |
| Council Vice Chair:Chris Hoeh | Consumer Representative, State Auditor |
| Joe Tringali, | Consumer Representative, Governor |
| Tamara Huntley | Consumer Representative, Attorney General |
| Timothy Kunzier | Consumer Representative, State Auditor |
| Cindy Purcell | Consumer Representative, State Auditor |
| Kristen McCosh | Consumer Representative, Attorney General |
| Justin Graceffa | Consumer Representative, Attorney General |
| Karen Shack | Ex officio Executive Office of Labor and Workforce Development, Governor |

**Appendix 4****: PCA Council Budgets for State Fiscal Years 2021 & 2022**

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| 4000-0050 | SFY21 PCA Workforce Council  | A&F Approved Budget |
| AA | Regular Employee Compensation | $107,148 |
| DD | Fringe Benefits | $2,079 |
| EE | Administrative Expenses | $500.00 |
| HH | Consultant Services | $2,677,137 |
| JJ | Operational Services | $4,268.00 |
| Total Expenses |  | **$2,791,131.00** |

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| 4000-0050 | SFY22 PCA Workforce Council  | A&F Approved Budget |
| AA | Regular Employee Compensation | $99,294 |
| DD | Fringe Benefits | $2,079 |
| EE | Administrative Expenses | $500.00 |
| HH | Consultant Services | $2,690,798 |
| JJ | Operational Services | $4,268.00 |
| Total Expenses |  | **$2,796,939.00** |

**Appendix 5: 1199SEIU TUF PCA Skills Enhancement Classes and Vouchers for FY21**

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| --- | --- | --- |
| Skills Enhancement Workshops | Sessions | Attended |
| Alzheimer's and Dementia Care  | 59  | 257  |
| Communication & Boundary Setting  | 56  | 230  |
| Emergency Preparedness  | 41  | 135  |
| Infection Control  | 10  | 35  |
| Medication Safety  | 56  | 242  |
| Mental Health First Aid  | 13  | 77  |
| Nutrition & Diabetes  | 58  | 252  |
| Stress Management  | 38  | 111  |
| Universal Precautions  | 29  | 105  |
| Total Workshops by Topic | **360** | **1444** |

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| Vouchers and Continuing Education | Element | Number |
| C.N.A Voucher | Enrollments | 40 |
|  | Comp | 34 |
|  | Students Who Took Exam | 6 |
| Total | **Students Passed Exam** | **5** |
| Tuition Voucher | SP semester enrollments | 74 |
|  | C (Grade) or higher  | 135 |
|  | C (Grade) - or lower  | 3 |
|  | No Grade Yet | 26 |
| Total |  **Graduates to date**  | **51** |
| Adult Education Courses | Sessions | 20 |
|  | Locations | Virtual |
| Total | **Enrollments** | **115** |

**Appendix 6: PCM, FI and Payroll Costs for PCA Services**

Expenses in the tables below include fee-for-service payments to PCM agencies and payments to the FIs in SFY2021 and SFY2022, plus the total payroll costs (as reported by each Fiscal Intermediary) for calendar years 2020 and 2021.

|  |
| --- |
| 1. **PCM Agencies: Fiscal Year Expenditures**
 |
|  | **SFY2021** | **SFY2022** |
|  | **Members** | **Expenditures** | **Members** | **Expenditures** |
| **Skills Training**  | 28,920 | $16,082,135.36 | 29,350 | $17,993,365.76 |
| **Intake & Orientation** | 5,320 | $1,082,810.50 | 5,051 | $922,135.92 |
| **Initial Evaluations** | 4,207 | $1,028,335.36 | 6,290 | $1,664,916.93 |
| **Re-Evaluations**  | 20,582 | $2,907,077.88 | 17,509 | $2,722,686.46 |
| **PCM Admin.** | 28,920 | $16,082,135.36 | 29,350 | $17,993,365.76 |
| **Total PCM Expenditures** | **31,116** | **$24,758,554** | **31,708** | **$27,356,559.28** |

|  |
| --- |
| 1. **Fiscal Intermediaries: Fiscal Year Expenditures**
 |
|  | **SFY2021** | **SFY2022** |
|  | **Members** | **Expenditures** | **Members** | **Expenditures** |
| **FI Administrative Fee** | 27,893 | $16,927,764.88 | 28,646 | $15,855,128.24 |

|  |
| --- |
| 1. **Payroll Costs: Calendar Year Expenditures\***
 |
|  | **CY2020** | **CY2021** |
| **Gross PCA Payroll** | $714,099,117.26 | $752,843,031.86 |
|  |  |  |
|  **SUTA Withholding** | $12,231,080.08 | $15,338,825.12 |
|  **FUTA Withholding** | $1,550,454.50 | $1,584,434.79 |
|  **FICA/Medicare Withholding** | $52,222,070.59 | $52,199,481.05 |
|  **Workers' Compensation Withholding** | $7,703,401.98 | $8,198,211.38 |
|  **PFML Withholding** | $2,641,362.73 | $3,144,216.43 |
|  |  |  |
| **Net PCA Payroll** | $571,568,621.48 | $602,782,546.04 |

\*Payroll information is tracked by calendar year, not fiscal year, for tax reporting purposes. The values in this table represent gross wages, state and federal tax withholding, and net wages paid by Fiscal Intermediaries for both “regular” PCA payroll, in addition to overtime and travel time payments. Note that overtime and travel time payments are attributable to the PCA Quality Homecare Workforce Council. The previous legislative report did not include overtime and travel time payments; however, this report has been updated to reflect these amounts for CY2020 and CY2021.

**Appendix 7: Additional Services Used in SFY 2021 and SFY 2022**

Expenses in the tables below include other, more acute (or “more intensive”), MassHealth services provided to fee-for-service PCA Consumers within the same state fiscal year.

|  |
| --- |
| **SFY2021** |
| **Servicing Provider Type Code and Description** | **Unduplicated Member Count** | **# of Paid Claims** | **Amount Paid** | **Claims per Member** | **Expenditure per member** |
| 09 - NURSING FACILITY |  1,554  |  34,043  | $25,034,586.35 |  22  | $16,109.77 |
| 35 - STATE AGENCY SERVICES |  2,365  |  111,386  | $59,936,108.08 |  47  | $25,342.96 |
| HOME HEATLH *(not including Home Health Aide)* |  3,296  |  483,163  | $31,234,390.47 |  147  | $9,476.45 |
| 69 - HOSPICE CARE |  197  |  5,455  | $2,135,118.12 |  28  | $10,838.16 |
| 70 - ACUTE INPATIENT HOSPITAL |  6,573  |  20,975  | $63,792,946.74 |  3  | $9,705.30 |
| 71 - CHRONIC INPATIENT HOSPITAL |  597  |  3,976  | $28,146,839.13 |  7  | $47,147.13 |
| 73 - PSYCHIATRIC INPATIENT HOSPITAL |  57  |  95  | $205,537.55 |  2  | $3,605.92 |
| 74 - SUBSTANCE ADDICTION DISORDER INPATIENT HOSPITAL |  25  |  34  | $2,960.00 |  1  | $118.40 |
| **Total:** | **10,954** |  |  |  |  |

|  |
| --- |
| **SFY2022** |
| **Servicing Provider Type Code and Description** | **Unduplicated Member Count** | **# of Paid Claims** | **Amount Paid** | **Claims per Member** | **Expenditure per member** |
| 09 - NURSING FACILITY |  1,597  |  38,844  | $30,075,057.79 |  24  | $18,832.22 |
| 35 - STATE AGENCY SERVICES |  2,206  |  129,008  | $52,800,627.18 |  58  | $23,935.01 |
| HOME HEATLH *(not including Home Health Aide)* |  3,024  |  446,485  | $31,374,854.42 |  148  | $10,375.28 |
| 69 - HOSPICE CARE |  144  |  3,921  | $1,636,002.03 |  27  | $11,361.13 |
| 70 - ACUTE INPATIENT HOSPITAL |  6,318  |  20,030  | $55,686,195.07 |  3  | $8,813.90 |
| 71 - CHRONIC INPATIENT HOSPITAL |  525  |  4,484  | $29,323,012.35 |  9  | $55,853.36 |
| 73 - PSYCHIATRIC INPATIENT HOSPITAL |  48  |  68  | $107,042.98 |  1  | $2,230.06 |
| 74 - SUBSTANCE ADDICTION DISORDER INPATIENT HOSPITAL |  26  |  73  | $273,006.30 |  24  | $18,832.22 |
| **Total:** | **10,561** |  |  |  |  |

**Appendix 8: Total Fee-For-Service Costs of the PCA Program for SFY 2021 and SFY 2022**

The following table reflects the combined total of all fee-for-service costs for the MassHealth PCA program. Note that the below values do not reflect expenses attributable to PCA services covered by managed care plans (Senior Care Options and One Care), except for those attributable to the overtime premium and travel time.

|  |  |  |
| --- | --- | --- |
| Personal Care Attendant Program Cost (Fee-For-Service) | SFY 2021 | SFY 2022 |
| PCM expenses (from Appendix 5) | $24,758,554 | $27,356,559.  |
| FI expenses (from Appendix 5) | $16,927,765. | $15,855,128  |
| PCA payroll expenses (from Appendix 5)\* | $714,099,117. | $752,843,032.  |
| Total cost of fee-for-service PCA program | **$755,785,436** | **$796,054719** |

\*PCA payroll information is tracked by calendar year, not fiscal year, for tax reporting purposes. Please see Appendix 5 for additional information.

##

## Appendix 8: PCA ORR Project’s Recruitment Partners

|  |
| --- |
| **Massachusetts State Agencies** |
| MA Department of Transitional Assistance | MA Department of Youth Services |
| MA Department of Veterans Services | MA Department of Mental Health |
| MA Department of Elementary and Secondary Education | MA Department of Labor and Workforce Development |
| MA Office Immigrants and Refugees | MA Department of Education |
| MA Rehabilitation Commission | MA Executive Office of Elder Affairs |
| MA Office on Disability |  |
|  |
| **Personal Care Management Agencies** |
| AdLib | Independence Associates |
| Arc of The South Shore | Lifepath |
| Boston Center for Independent Living | Northeast Arc |
| Center for Living and Working | Northeast Independent Living Program |
| Coastline Elderly Services | Stavros |
| Elder Services of Merrimac Valley (AgeSpan) | Tempus Unlimited |
| Elder Services of Worcester Area | Tri-Valley Elder Services |
| Ethos | United Cerebral Palsy of Metro Boston |
| Greater Springfield Senior Services | West Mass Elder Care |
|  |
| **Workforce Development Partners** |
| Ascentria Care Alliance | 1199 SEI Union |
| Worcester Community Action Council | Commonwealth Corporation (Comm Corp) |
| Riverside Employment Collaborative | You, Inc. |

1. Office of Long-Term Services and Supports and PCA Expenditures, FY19-20 [↑](#footnote-ref-2)
2. University of MA Medical School PCA data report to the PCA Workforce Council [↑](#footnote-ref-3)
3. Passed by the Council on October 15, 2009 [↑](#footnote-ref-4)
4. <http://budget.digital.mass.gov/bb/gaa/fy2018/app_18/act_18/h40000050.htm> [↑](#footnote-ref-5)