

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

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Personal Care Attendant Bulletin 17

DATE: June 2025

TO: Members, Surrogates, Administrative Proxies, Personal Care Management Agencies,

and MassHealth Primary Care Providers

FROM: Mike Levine, Assistant Secretary for MassHealth With Lewise

RE: Primary Care Provider Summary Form Requirement for Personal Care

Attendant Complex Care

Introduction

Beginning January 1, 2026, MassHealth is implementing the personal care attendant (PCA) complex care add-on. PCA providers who work for certain MassHealth members approved for PCA complex care tasks may receive a different payment (referred to in this bulletin as a payment differential).

Beginning June 1, 2025, MassHealth members who need a PCA complex care task performed by a PCA, and who do not have that task approved in their PCA assessments, should work with their primary care providers (PCPs) to have a PCP Summary Form completed to add a complex care task to their PCA assessment. The PCP Summary Form, available at mass.gov/masshealth-personal-care-attendant-program, documents that it is clinically appropriate for a PCA provider to perform those tasks under the member's guidance.

This bulletin applies to certain services covered by the MassHealth PCA Program on a fee-forservice basis.

This bulletin is effective June 1, 2025.

Background

The collective bargaining agreement for 2023–2026 between the PCA Quality Home Care Workforce Council and 1199SEIU United Healthcare Workers East has provisions for PCA wages. It states that PCAs who work for consumer employers that MassHealth calls "complex care consumers" will receive a pay differential when giving those consumers personal care services.

Eligibility Criteria

Eligibility for PCA complex care requires the following.

- Members must have a PCA evaluation in accordance with 130 CMR 422.422(C) and (D) and 130 CMR 422.416(A) and (B).
- In accordance with 130 CMR 422.422(C) and (D), MassHealth or its designee must have determined that the member requires physical assistance with digital rectal stimulation (DRS) or feedings via enteral tube (G & J), and these tasks must be reflected in the member's PCA assessment.
- Members must have a PCP Summary Form showing the clinical need for assistance with
 these tasks and whether the tasks are appropriate for a PCA provider to perform. PCA
 complex care tasks cannot be approved when they are considered a skilled service under
 the following circumstances.
 - Enteral tube (G & J): MassHealth does not approve PCA time for this task, for either children or adults, when there is an aspiration risk.

Requirements for Consumers

New Consumers

Fee-for-service members who want to enroll in the PCA Program must tell their personal care management (PCM) agency if they need assistance with either DRS or feeding via enteral tube (G & J).

Current PCA Program Consumers

If a fee-for-service member does not have time authorized in their PCA assessment to complete at least one of the complex care tasks above, they are responsible for asking their PCM agency to adjust their PCA assessment. In addition, members should work with their PCP and their PCM agency to get a PCP Summary Form that states clinical need for PCA complex care.

Requirements for PCM Agencies

Helping Consumers and Getting a PCP Summary Form

The PCM functions contract between the Executive Office of Health and Human Services and a PCM agency requires the PCM agency to engage with members during intake and orientation sessions, reassessments, and other member encounters, as well as when the member requests it. PCM requirements include identifying whether the member needs assistance with DRS or feeding via enteral tube (G & J), obtaining a PCP Summary Form if necessary, and submitting PA requests or adjustments to MassHealth as necessary.

Requirements for MassHealth Providers

When applicable, MassHealth providers must fill out and return the PCP Summary Form to the PCM agency and/or the member. The form should contain the member's diagnoses,

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medications, and conditions that require the member to have physical assistance with DRS and/or feeding via enteral tube (G & J).

To ensure the member's safety, the form must also state that it is clinically appropriate for a PCA provider to complete these tasks.

Please note that MassHealth does not authorize tube feedings on the PCA assessment for members with aspiration risk.

MassHealth Website

This bulletin is available on the <u>MassHealth Provider Bulletins</u> web page.

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Questions?

If you have questions about the information in this bulletin, please contact:

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