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State Plan under Title XIX of the Social Security Act **State: Massachusetts** Amount, Duration, and Scope of Medical and Remedial Care and Services **Provided to the Categorically Needy**

Item 26. Personal Care Services

Personal care services provided through the state plan are provided either through Personal Care Attendant Services or Transitional Living Services.

Personal Care Attendant (PCA) Services

All personal care services provided by a Personal Care Attendant (PCA) through the state plan are consumer directed, and the consumer (the MassHealth member) is the employer of his/her PCAs.

PCA services furnished under the state plan are limited to "employer authority" only. all PCA funds under the PCA state plan must be used solely to pay for employer required tasks, and cannot be used for any other purpose, such as the purchase of products and services other than those provided by a PCA to meet the consumer's personal care needs. Personal care services provided by PCAs are performed by Medicaid enrolled providers. The state will ensure the requirements for provider agreements found at 42 CFR 431.107 are met prior to initial payment of Personal Care Attendants (PCAs) being hired as PCAs.

All consumers are responsible for recruiting, screening, hiring, firing, training and scheduling PCAs, as well as submitting activity forms (PCA timesheets) to the fiscal intermediary (FI) for processing and payment. If the consumer is not able to perform these activities on his/her own, the consumer must appoint a surrogate to assist him/her to manage PCA services.

The state contracts with fiscal intermediaries (FIs) in accordance with the requirements of 42 CFR 434.10 to perform employer required tasks and administrative tasks on behalf of consumers. The FI receives and processes the PCA timesheet, and submits a claim for PCA services through the state's MMIS system. The state processes the claim and pays the FI to perform all employer required tasks on behalf of the consumer, including filing and paying employer required taxes, withholding PCA taxes, purchasing workers' compensation insurance on behalf of each consumer, and sending a check in the PCA's name to the consumer to pay the PCA, unless the PCA has elected direct deposit.

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11 Supersedes: N/A

- For the state to pay for personal care services provided by a PCA to a consumer (the MassHealth member), the consumer must be able to be appropriately cared for in the home and the following conditions must be met:
 - a. The personal care services must meet the state's medical necessity criteria and must be authorized by the state prior to being provided in accordance with a state approved service plan.
 - b. The personal care services must, in accordance with 42 CFR 440.167, be authorized for an individual in accordance with a service plan approved by the state.
 - c. The consumer, as authorized by the state under a state approved service plan,, must require physical assistance in two or more of the following ADLs:
 - 1). mobility physically assisting a consumer who has a mobility impairment that prevents unassisted transferring, walking, or use of prescribed durable medical equipment;
 - 2). assistance with medication physically assisting a consumer to take medications prescribed by a physician that otherwise would be self-administered;
 - 3). bathing or grooming physically assisting a consumer with basic care such as bathing, personal hygiene, and grooming skills;
 - 4). dressing physically assisting a consumer to dress or undress;
 - 5). passive range-of-motion exercises physically assisting a consumer to perform range-of-motion exercises;
 - 6). eating physically assisting a consumer to eat; and
 - 7). toileting physically assisting a consumer with bowel and bladder needs.

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11 Supersedes: N/A

- If the conditions in 1 above are met, the state will pay for a consumer to receive physical assistance with the ADLs identified in 1.c above and the IADLs listed below.
 - a. household services physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping;
 - b. meal preparation and clean-up physically assisting a member to prepare meals;
 - c. transportation accompanying the member to medical providers; and
 - d. special needs assisting the member with:
 - the care and maintenance of wheelchairs and adaptive devices. This includes, but
 is not limited to, charging the batteries on a powered wheelchair and cleaning and
 sanitizing medical equipment (wheelchairs and wheelchair accessories, walkers,
 hoya lifts, and standers). The state assures that routine maintenance performed by
 PCAs does not duplicate repair services covered under the DME benefit and
 provided by DME providers
 - 2). completing the paperwork required for receiving personal care services. This includes the paperwork required by the PCA program, such as employer forms required by the fiscal intermediary. If the consumer has a surrogate, the state expects the surrogate to complete the paperwork required by the PCA program.
 - 3). other special needs approved by the state as being instrumental to the health care of the member.

B. Transitional Living Services

Personal care services provided by a Transitional Living provider are provided in a community-based setting operated by the Transitional Living provider and delivered by direct care staff of the Transitional Living provider. Transitional Living services are not provided in an Institute for Mental Disease servicing individuals 22-64.

A member who is eligible to receive personal care services provided by a Transitional Living provider may obtain those services from a qualified Transitional Living provider participating in MassHealth. Personal care services are provided by Transitional Living provider's direct care staff and in accordance with a written individual service plan that is developed with the participation of the member (and the member's surrogate, if applicable), describing in detail the responsibilities of the member, the member's surrogate, if applicable, and the Transitional Living provider.

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11

Supersedes: N/A

- 1. For the state to pay for personal care services provided by a Transitional Living provider to a member, the member must be able to be appropriately cared for in the provider's Transitional Living provider setting and the following conditions must be met:
 - a. The personal care services provided to the member by the Transitional Living provider's direct care staff must meet the state's medical necessity criteria and must be authorized by the state prior to being provided in accordance with a state approved service plan.
 - b. The personal care services provided by the Transitional Living provider's direct care staff must, in accordance with 42 CFR 440.167, be authorized for an individual in accordance with a service plan approved by the state.
 - c. The member, as authorized by the state under a state approved service plan, must require physical assistance in two or more of the following ADLs:
 - 1). mobility physically assisting a consumer who has a mobility impairment that prevents unassisted transferring, walking, or use of prescribed durable medical equipment;
 - 2). assistance with medication physically assisting a consumer to take medications prescribed by a physician that otherwise would be self-administered:
 - 3). bathing or grooming physically assisting a consumer with basic care such as bathing, personal hygiene, and grooming skills;
 - 4). dressing physically assisting a consumer to dress or undress;
 - 5). passive range-of-motion exercises physically assisting a consumer to perform range-of-motion exercises;
 - 6). eating physically assisting a consumer to eat; and
 - 7). toileting physically assisting a consumer with bowel and bladder needs.

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11

Supersedes: N/A

- If the conditions in 1 above are met, the state will pay for a member to receive physical assistance with the ADLs identified in 1.c above and the IADLs listed below.
 - a. household services physically assisting with household management tasks that are incidental to the care of the member, including laundry, shopping, and housekeeping;
 - b. meal preparation and clean-up physically assisting a member to prepare meals;
 - c. transportation accompanying the member to medical providers; and
 - d. special needs assisting the member with:
 - the care and maintenance of wheelchairs and adaptive devices. This includes, but
 is not limited to, charging the batteries on a powered wheelchair and cleaning and
 sanitizing medical equipment (wheelchairs and wheelchair accessories, walkers,
 hoya lifts, and standers). The state assures that routine maintenance performed by
 a Transitional Living Services provider does not duplicate repair services covered
 under the DME benefit and provided by DME providers
 - 2). other special needs approved by the state as being instrumental to the health care of the member and ability to manage PCA services once transitioned to independent living.

(C) Provider qualifications:

- 1. Personal Care Attendant Services. The state has established the following minimum qualifications for PCAs:
 - a. PCAs cannot be the consumer's family member, surrogate or foster parent;
 - b. PCAs must be legally authorized to work in the United States;
 - c. PCAs must be able to understand and carry out directions given by the consumer or the consumer's surrogate;
 - d. PCAs must be willing to receive training and supervision in all PCA tasks from the consumer or the consumer's surrogate; and
 - e. A PCA cannot be listed on the Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE)
- 2. Transitional Living Services. The state has established the following minimum qualifications for Transitional Living Services providers:
 - a. To provide Transitional Living Services a provider must:
 - 1) Submit a proposal for review by the state in accordance with the state's proposal

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11 Supersedes: N/A

requirements for transitional living.

- 2) Obtain written approval from the state to become a MassHealth provider of transitional living services
- 3) Demonstrate the appropriate licensure or program accreditation by a recognized body for the provider's type of program (if applicable); and
- 4) Obtain a MassHealth provider identification number.
- b. Direct care staff employed by a Transitional Living Services Provider and providing personal care services to a member:
 - 1) Cannot be the member's family member, surrogate or foster parent;
 - 2) Must be legally authorized to work in the United States;
 - 3) Must be able to understand and carry out directions given by the Transitional Living Services provider or the member, or the member's surrogate;
 - 4) Must be willing to receive training and supervision in all personal care services tasks from the Transitional Living Provider or the member, or the member's surrogate; and
 - 5) Cannot be listed on the Office of Inspector General's (OIG) List of Excluded Individuals and Entities (LEIE)

TN: 011-011 Approval Date: 07/08/13 Effective Date: 10/01/11 Supersedes: N/A