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## **IMPORTANT NOTICE**

### **Requirement for Clinical Documentation Prior to All PCA Evaluations**

The PCA Program Regulations (130 CMR 422.416) outline the documentation requirements for Prior Authorization submissions. Effective January 1, 2026, clinical documentation must be submitted with all Initial Evaluations and Re-Evaluations. Clinical documentation can be in the form of the MassHealth PCP Summary Form or an Electronic Medical Record (EMR).

#### **When to Submit the Clinical Documentation:**

- 1. PCP Summary Form - *PCP signature required***
  - All Initial Evaluations
  - All Re-Evaluations that include Complex Care tasks
- 2. Electronic Medical Record (EMR) – *No PCP signature required***
  - All Re-Evaluations that do not include complex care tasks

#### **What to do as a Consumer/Surrogate:**

- 1. Be prepared to contact your PCP Office in regards to this required documentation. This documentation must be provided to your PCM agency prior to completion of your evaluation.**
- 2. If you have access to your online patient portal, you may be able to download your EMR and send it directly to your PCM agency. Documentation that does not meet the requirements can lead to disruption in services. EMRs must include the following information:**
  - Chronic disabling condition(s) that require you to need PCA Services
  - Any medications for chronic disabling condition(s) that require you to need PCA Services
  - At least 2 consumer identifiers (ex. Name, date of birth, MassHealth ID, etc.)
  - Date of most recent visit with PCP or specialist related to the chronic disabling condition (must be within the last 2 years)

3. Respond promptly to all PCM outreach as they attempt to schedule any visits or obtain required clinical documentation. Your timely response will help to prevent any disruption in your PCA services.

For more information regarding the submission requirements for an EMR, please see the EMR FAQ document that is attached to this mailing. As a reminder, the PCA Program is a self-directed program, and Consumers and Surrogates are responsible for managing their PCA services.

The below websites provide additional resources for PCA Program Consumers.

- <https://www.mass.gov/masshealth-personal-care-attendant-program>
- <https://www.mass.gov/info-details/pca-complex-care>
- <https://www.mass.gov/doc/pca-consumer-employer-handbook-effective-january-1-2026>

## **Electronic Medical Record Clinical Documentation Frequently Asked Questions**

The PCA Program Regulations (130 CMR 422.416) outline the documentation requirements for Prior Authorization submissions. Effective January 1, 2026, PCMs must request a PCP Summary Form prior to completing any Initial Evaluation or submitting any Re-evaluation with Complex Care tasks. For Re-Evaluations that do not include any Complex Care tasks, 130 CMR 422.416(C) allows PCMs to submit an Electronic Medical Record (EMR) clinical documentation in lieu of the PCP Summary Form. Any evaluation completed after January 1, 2026, will be required to have a PCP Summary Form or EMR clinical documentation included with the PA Submission. PCMs must plan to request this documentation for any evaluation that is scheduled for after January 1, 2026. EMR clinical documentation must be consistent with the findings of the re-evaluation. Documentation that does not meet the requirements can lead to deferrals and/or modifications.

Below you will find some FAQs to clarify the requirements for submitting an EMR clinical documentation in place of a PCP Summary Form.

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### **What needs to be included in the record?**

- The EMR clinical documentation does not mean the PCM needs to provide the Consumer's entire medical history. A clinical summary (can be multiple different documents) that details the following information is required:
  - Chronic disabling condition(s) that require them to need PCA Services
  - Any medications for chronic disabling condition(s) that require them to need PCA Services
  - At least 2 consumer identifiers (ex. Name, date of birth, MassHealth ID, etc.)
  - Date of most recent visit with PCP or specialist related to the chronic disabling condition (must be within the last 2 years)

### **Who can provide the PCM with the EMR clinical documentation?**

- The consumer, PCP office, or specialist can submit the EMR clinical documentation to the PCM. This clinical summary should be available in one or more documents in the Consumer's patient portal.

### **Is an after-visit summary acceptable?**

- After visit summaries are acceptable if the visit date is within the last two years and includes the following information:
  - Chronic disabling condition(s) that require them to need PCA Services
  - Any medications for chronic disabling condition(s) that require them to need PCA Services
  - At least 2 consumer identifiers (ex. Name, date of birth, MassHealth ID, etc.)
  - Date of most recent visit with PCP or specialist related to the chronic disabling condition (must be within the last 2 years)

### **Is a PCP/specialist signature needed for the EMR clinical documentation to be submitted to the PCM?**

- No, a PCP/specialist signature is not required for the EMR clinical documentation

### **Does the date of the consumer's last physical need to be included?**

- The consumer needs to have been seen for something related to their chronic disabling condition(s) that requires them to need PCA Services in the last two years. This could be an annual physical or a visit with their PCP or specialist.

### **Does a consumer's entire medical record need to be submitted?**

- No, a consumer's entire medical record does not need to be submitted. The EMR clinical documentation must include:
  - Chronic disabling condition(s) that require them to need PCA Services
  - Any medications for chronic disabling condition(s) that require them to need PCA Services
  - At least 2 consumer identifiers (ex. Name, date of birth, MassHealth ID, etc.)
  - Date of most recent visit with PCP or specialist related to the chronic disabling condition (must be within the last 2 years)

### **Can an EMR clinical documentation be used for an adjustment (no complex care tasks), or will a PCP Summary Form be required?**

- For an adjustment, PCMs must submit the Adjustment form (with the PCM signature) along with:
  - An EMR clinical documentation, but it must include additional information that was not included in the previous Prior Authorization request that supports the adjustment request (i.e. hospitalization, change in functional status, etc.);
  - A PCP Summary Form; or
  - A letter from the PCP or specialist
- For consumers who are seeking an adjustment due to reasons that are not identified in the EMR clinical documentation (i.e. change in caregiver), a letter from the PCP is required for submission.

### **Is the Personal Care Attendant (PCA) Evaluation Signature Verification Form still required for re-evaluations that result in an increase or decrease of 14 hours or less?**

- No, the PCP Summary Form and EMR clinical documentation replace the need for PCMs to submit the Evaluation Signature Verification Form