

Keeping or Getting Coverage through MassHealth and the Health Connector

Executive Office of Health and Human Services







Overview for Today's MassHealth Member Webinar

Every year, MassHealth members need to renew their coverage, so they can receive the best benefit they qualify for.

During this webinar, staff from MassHealth will explain the renewal process and provide helpful information to members about staying covered.

Some people may find out they don't qualify for MassHealth anymore, so staff from the Health Connector will explain how someone can get coverage and may get help paying for it through the Massachusetts Health Connector.

Agenda



Today, we will:

- ✓ Explain what a MassHealth renewal is
- ✓ Give you information about submitting your renewal
- ✓ Show you how to get help, if you need it
- ✓ Tell you how to prepare for your next renewal.
- ✓ Explain how to get coverage through the Health Connector

What is the Relationship between MassHealth and Health Connector?

Overview of MassHealth: Massachusetts' state Medicaid and CHIP program

MassHealth provides health benefits and help paying for them to qualifying children, families, seniors, and people with disabilities living in Massachusetts.



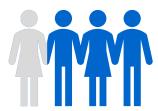
67%

2 in 3 people in lowincome families



25%

1 in 4 MA residents



42%

2 in 5 children of all incomes



including ~250K seniors (individuals 65 years or older) and ~300K individuals with disabilities MassHealth covers services comparable to commercial insurance <u>and</u> services not covered by other insurers (e.g., long term services & supports; certain behavioral health services)

Overview of the Health Connector: Massachusetts' State Health Insurance Exchange

The Massachusetts Health Connector is the State's health insurance Marketplace. It offers individuals, families, and small employers access to affordable health insurance coverage.

- People transitioning from MassHealth or who don't get health insurance through their job or other sources may apply
- Many people who apply qualify for help paying, some may even be eligible for \$0 monthly premium payments
- People can also buy dental insurance through the Health Connector
- Small employers with less than 50 full-time employees can offer health and dental plans through Health Connector for Business

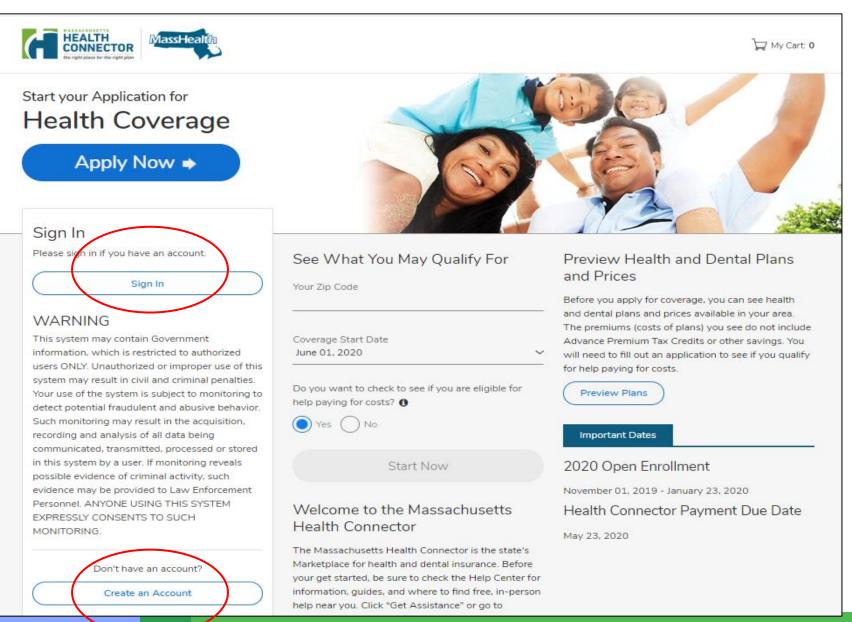


Application for Individuals and Families

One application for MassHealth, the Health Connector and help paying (for those under 65)

Apply online at MAhealthconnector.org

Spanish MAhealthconnector.org/es/



Overview of MassHealth Renewals

What is a MassHealth renewal?



- Every year, MassHealth must check if members are still eligible for coverage. This check is called a "renewal."
- If you are a MassHealth member, you need to renew your MassHealth coverage every year.

When it is your turn to renew:

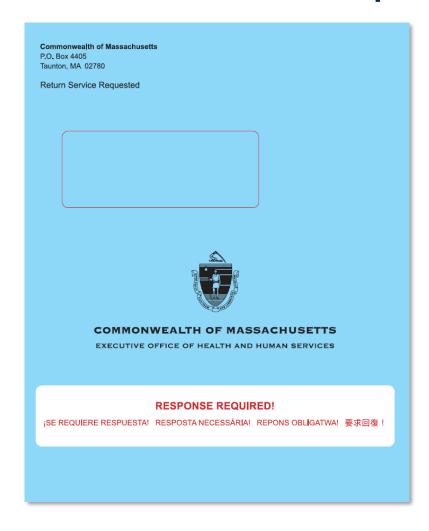
- 1 First, MassHealth will try to automatically renew your coverage.
 - If your coverage can be renewed automatically, you will not need to take any action.
 - MassHealth can autorenew certain members' coverage by checking their information against state and federal data sources.
 - If your coverage is automatically renewed, you will receive a letter in the mail letting you know.
- If your coverage cannot be renewed automatically, you will receive a **blue envelope** in the mail and you will need to respond.

Why talk about renewals now?



- It is important for members to understand the renewal process, so they continue to receive the best benefit they are eligible for.
- MassHealth does not want members to lose coverage because they fail to respond to a renewal.
 Instead, we want members to be prepared and ready to respond to a renewal notice.
- Although some rules were temporarily changed during the COVID-19 public health emergency (PHE), members need to renew their coverage every year!

What is a "Blue Envelope?"



- If you need to complete a renewal, you will receive a blue envelope in the mail.
- If you receive a blue envelope, you <u>MUST</u> respond to it.
- If you do not respond to your blue envelope, you may lose your MassHealth coverage.
- The blue envelope includes important information, such as:
 - Your renewal due date (45 days)
 - Your renewal paperwork
 - Other important info and instructions
- Note: renewals occur at the household* level, and notices (such as blue envelopes) are sent to the Head of Household

^{*}MassHealth defines a household according to annual tax filing relationships. The household consists of the Head of Household (or Person 1 on the application), their spouse, and dependents (such as who you claim on your taxes).

What happens after I send my renewal paperwork?



- After you complete your renewal paperwork and send it to MassHealth, check your mail regularly.
- If you get any letters from MassHealth, open them immediately.
- Sometimes, MassHealth may need more information from you. If this happens, you will receive a
 letter in the mail (in a white envelope) called a "Request for Information."
 - If you receive a Request for Information, you will have 90 days to respond.
 - If you do not respond to a Request for Information, you could lose your MassHealth coverage.
- MassHealth will send you a letter once your renewal is complete.
 - This letter will tell you which level of coverage you are eligible for.
 - If you are no longer eligible for coverage, you will be given at least 14 days' notice before your coverage ends.
 - You will also receive information about how to file an appeal, if you disagree with MassHealth's decision.

How can I submit my renewal?



Online (Easiest Way!)

Members <u>under</u> 65 years old



Go online to www.mahix.org/individual (or the individualized link provided in the notice in the blue envelope)*

Members over 65 years old residing in the community



Members of any age receiving nursing facility care or HCBS waiver services

If your renewal notice has an eSubmission number, you can submit your renewal online via document upload or fillable form at https://mhesubmission.ehs.mass.gov/esb

Other Options:

- **By Mail:** Complete the application and mail it back to *Health Insurance Processing Center, PO Box 4405, Taunton, MA 02780* or fax it to 1-857-323-8300
- By Phone: Call the MassHealth Customer Service center at (800) 841-2900, TDD/TTY: 711
- By Appointment: Schedule an appointment with a MassHealth representative. Use our online scheduling tool at:
 www.mass.gov/info-details/schedule-an-appointment-with-a-masshealth-representative



Note that members have 45 calendar days to complete their renewal and send it back to MassHealth

^{*}If you have eligibility for MassHealth through another program, such as Social Security Insurance (SSI), you will not be able to create an MA Login Account.

Where can I get help?



RESOURCE DESCRIPTION

MassHealth
Enrollment
Centers (MECs)

- MassHealth Enrollment Centers (MECs) provide members with **phone**, **virtual**, **or in-person assistance** with their applications from MassHealth staff
- We recommend that members schedule an appointment ahead of time at www.mass.gov/info-details/schedule-an-appointment-with-a-masshealth-representative. Appointments can be via phone or virtual (or in-person at the Springfield MEC)
- There are 7 MECs across the State find your nearest one online at https://www.mass.gov/info-details/masshealth-enrollment-centers-mecs

2 Certified
Application
Counselors or
Navigators

- Certified Application Counselors (CACs) and Navigators are a community-based resource to help members
 apply for and renew health insurance benefits. They are trained by MassHealth but are not MassHealth
 staff
- People who need help to keep their MassHealth coverage and people who are no longer eligible for MassHealth can get help from CACs and Navigators
- Help from CACs and Navigators is free but may require an appointment. You can also go online to find their nearest organization at https://my.mahealthconnector.org/enrollment-assisters

MassHealth
Customer
Service Center

- If you have questions about your MassHealth renewal, you can call the MassHealth Customer Service center.
- Phone number: (800) 841-2900; TDD/TTY: 711
- Hours: Monday-Friday 8am-5pm. Assistance is available in English, Spanish, Portuguese, Mandarin,
 Vietnamese, Arabic, Haitian Creole, and members may request a translator for any other language.

How do I prepare for my next renewal?



Call MassHealth or go online to update your contact information.

You MUST update your contact information so MassHealth can reach you when it is time for your renewal.

To update an address, phone, or email address, you can call MassHealth Customer Service at (800)-841-2900, TDD/TTY: 711

- Members <u>64 or younger</u> can also go online to <u>www.mahix.org/individual</u>
- Members <u>65 or older</u> can also fill out the <u>MassHealth Report a Change</u> <u>Form</u> online.

Read all mail that could be from MassHealth.

MassHealth will mail you information about your health benefits – you might also need to take action to keep your current coverage.

Read all mail from MassHealth. Also, look out for a blue envelope in the mail and always respond by the deadline. Remember that other important MassHealth notices may arrive in a white envelope.

Wrapping Up



Here are the main points to remember from today's MassHealth presentation:

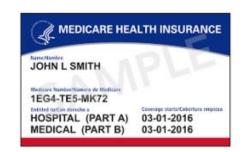
- 1 If you are a MassHealth member, you must renew your coverage every year
- If it is your time to complete a renewal, you will receive a blue envelope in the mail
- Check your mail regularly and open ALL mail from MassHealth
 - Some important notices, such as Requests for Information, might be sent in white envelopes
 - If MassHealth needs information from you, always respond by the deadline
- 4 Make sure MassHealth has your updated contact information
- f you need help, call us!
 - MassHealth is here to help you and wants to make sure you keep the best coverage you qualify for

If you don't qualify for MassHealth, there are other affordable options

- For members under 65, affordable plan options are available through the MA Health Connector
 - Members can visit https://www.mahealthconnector.org/ or call Customer Service at 1-877- MA
 ENROLL (1-877-623-7773) to learn more or enroll in a plan
 - Losing MassHealth coverage is a Qualifying Life Event (QLE), which allows members to enroll in a plan through the Health Connector outside of the regular Open Enrollment Period



- For members over 65, other affordable options are available
 - Individuals who do not qualify for Medicare may be eligible for Connector coverage. For those
 eligible for Medicare, loss of MassHealth is a Special Enrollment Period (SEP) that allows
 individuals to enroll in Medicare outside of standard enrollment periods
 - Members who lost MassHealth because they lost Social Security Income (SSI) due to certain conditions may be able to re-apply
 - If members are no longer eligible for MassHealth, they may qualify for the Medicare Savings
 Program (MSP) (sometimes known as "MassHealth Buy-in"), which is a federally funded program that pays for some or all of Medicare recipient's premiums, deductibles, co-payments, and co-insurance
 - Other programs that members may qualify for include: the Frail Elder Waiver (FEW), the Program
 of All Inclusive Care for the Elderly (PACE), Prescription Advantage, and other programs /
 services run through Aging Services Access Points (ASAPs)





Getting Health and Dental Coverage through the Health Connector

Some former MassHealth members may be eligible for health insurance coverage through their job

If you are working, you might be eligible for benefits through your employer. Employees should reach out to human resources / benefits department to find out:

- Are you eligible for benefits for yourself or your family?
- What is the cost of those plans and how much will you as the employee need to contribute?
- When do you need to make a final decision by to enroll in employer sponsored health coverage?

Important! Those with access to affordable coverage through an employer are NOT eligible for financial help through the Health Connector.

What if the coverage offered by the employer does not seem affordable?

- Health Connector plans and savings may be available if you do not have access to affordable health insurance coverage (as outlined by the state's affordability standards)
- Employers will need to provide <u>detailed information</u> about their plan offerings and the costs of those plans
- These questions are part of the Massachusetts Application for Health and
 Dental Coverage and Help Paying Costs and the responses will help determine
 if you or your family are eligible for savings through the Health Connector

Qualifying to Enroll into Coverage

If someone loses access to MassHealth coverage, it is considered a **Qualifying Life Event**, and that allows them a Special Enrollment Period to either enroll in or change health insurance plans outside the annual Open Enrollment period.

Life events that let someone qualify may include:

- Changes in household make-up, income, immigration status, or address
- Certain other life changes, like getting married, having a baby, or losing job-based health insurance

Report any Qualifying Event as soon as possible

Payment and enrollment deadlines still apply during a Special Enrollment Period

Health Connector Plans

All the plans sold through the Health Connector meet state and federal standards for coverage

Qualified health and dental plans

Choose from a variety of plans in your area from the leading insurance companies in Massachusetts

Health plans with Advance Premium Tax Credits (APTC)

People can qualify for tax credits to reduce their cost of monthly premiums

ConnectorCare plans

People in lower income ranges who meet other eligibility requirements may qualify for low- or no-cost health insurance coverage

What's New at the Health Connector

New for plan year 2024 and 2025

- A pilot program is expanding eligibility to the ConnectorCare program, which delivers subsidized premiums, low co-pays and no deductibles to participants. What's New at the Health Connector
- ConnectorCare has much lower premiums and co-pays and no deductible.

More plan choices going forward

- All health insurance companies who participate in the Health Connector will offer plans in ConnectorCare starting in 2024
- These changes took effect on January 1, 2024



For an **individual**, the change increases the income limit for ConnectorCare from \$43,470 to \$72,900 for 2024.

For a **family of four**, the change increases the income limit for ConnectorCare from \$90,000 to \$150,000 for 2024.



Tools available from the Health Connector

Get an Estimate	Lets you see what plans are available in your area and estimates what your savings may be	<u>Get an Estimate – Massachusetts Health Connector</u> (betterhealthconnector.com)
Plan Comparison	Find out if preferred providers and facilities and covered through a specific plan.	Massachusetts Plan Comparison Tool 2024 (checkbookhealth.org)
Plan Finder	Lets you see if preferred providers and facilities are covered through specific plans and see the monthly cost	This tool is available when you are in "your" application

What should you know about applying?

Here's what to know:

- There are 3 ways to apply or update your application:
 - 1. Online at MAhealthconnector.org (Spanish: mahealthconnector.org/es/)
 - 2. By phone
 - 3. With the help of a partner community organization or health center
- There is one application to find out if you qualify for coverage through Health Connector, including help paying for coverage or for coverage through MassHealth (Medicaid)
- You will get letters from Health Connector and MassHealth that tell you your next steps

Where can someone get help enrolling in health insurance coverage?

Free enrollment assistance is available through the Health Connector customer service and across Massachusetts through community partner organizations.

Customer Service

- 1-877-MA-ENROLL (<u>1-877-623-6765</u>), or TTY 1-877-623-7773 for people who are deaf, hard of hearing, or speech disabled
- For information about hours, days of operation, and more go to the <u>Health</u> <u>Connector Customer Service Call Center</u>
- Local Events <u>Upcoming Events –</u>
 <u>Massachusetts Health Connector</u>
 (mahealthconnector.org)

Community Partners

- Trained and certified Navigators and Certified Application Counselors, who speak many languages, can help you from application through enrollment into health insurance plans
- They can answer questions about eligibility, the application, payments, plan details, and health care reform rules and requirements
- It is recommended that you call ahead to schedule an appointment for help
- To find help in your language go to <u>Get Free Help Near</u>
 <u>You</u>

Key Health Connector Takeaways

- Those who lost access to MassHealth coverage and still need health or dental insurance, can enroll through the Health Connector
- People should update their application to find out what plans they qualify for and if additional savings are available for them
- The Health Connector offers coverage for Individuals, Families and Small Employers in Massachusetts
- Someone must apply, enroll, and pay your first premium by the 23rd of the month before your coverage can start (for example, enroll and pay by April 23rd for coverage to start on May 1)
- Apply for coverage online, by phone or with the help of an Assister through a community partner organization or attend a local enrollment event
- Get free help applying and choosing a plan through customer service and across Massachusetts through community partner organizations. Call today to make an appointment for help!



Appendix

Overview of Member Renewal Timelines

Selected for Renewal & Auto-renewal attempted

 Whenever possible, MassHealth will automatically process a member's renewal ("autorenew" the member) by matching their information against state and federal data sets

Renewal Notices in Blue Envelope (45 days to respond)

- If a member cannot be autorenewed, they will receive a blue envelope in the mail with a renewal form to complete and return to MassHealth.
- Members have 45 days to respond to renewal notices

Request for Information (RFI) (90 days to respond)

If a member responds to their renewal notice but MassHealth still needs more information
to determine eligibility, the member will receive a "request for information" in the mail (in a
white envelope). The member will then have an additional 90 days to respond to that
request for information.

Termination Notice

 Typically, members have at least 14 days after receiving a termination notice before their benefits stop

90-Day Reconsideration Period If a member has been closed for failure to respond to their renewal notice, they should submit their renewal to MassHealth immediately. If a member submits their renewal to MassHealth – and is found eligible – within 90 days of having lost coverage, they can call MassHealth and ask to have their coverage reinstated back to the original closure date.

MassHealth Language and Translation Supports



Outreach in various languages

- The redetermination member-facing toolkit (including flyers, posters, and key messaging) is available in
 9 languages English, Spanish, Portuguese, Haitian Creole, Vietnamese, Khmer, Chinese, Arabic, Cape
 Verdean Creole
- Community outreach has included local language television & radio stations
- Grants to community-based organizations (CBOs) have included those focused on immigrants & refugees
- MassHealth has offered live ASL translation during redetermination webinars recorded & published online

Translation services

- Renewal forms are mailed in English or Spanish and are available in large print or Braille. Renewal packages
 also include a separate multi-language document that instructs members to have the materials translated (and
 includes a number for members to call, if they need assistance)
- For those who require translation of forms, members can receive free translation services by calling the Customer Service Center at (800) 841-2900; TDD/TTY: 711

Support resources offering various languages

- The contact center has representatives who speak English, Spanish, and Haitian Creole, and access to a language line where an interpreter will join the call. Interpreter services are available in a wide range of other languages, including (but not limited to): Portuguese, Mandarin, Vietnamese, Arabic, etc.
- MassHealth has also partnered with various CAC organizations whose staff speak foreign languages
- MassHealth has hosted enrollment events with on-site translators
- For individuals who speak ASL, MassHealth offers on-demand VRI in-person at the MassHealth Enrollment
 Centers

Members Can also Receive Help from MassHealth Enrollment Centers

The Enrollment Centers are open for limited walk-in appointments. We strongly encourage members to use MassHealth's appointment scheduler if they need live help from a MassHealth Customer Service Representative.

Please note: MECs can help you with applications, but they are not able to enroll you into a health plan.

Charlestown

529 Main Street Charlestown, MA 02129

Taunton

21 Spring Street, Suite 4 Taunton, MA 02780

Chelsea*

45 Spruce Street Chelsea, MA 02170

Tewksbury

367 East Street Tewksbury, MA 01876

Worcester

50 Southwest Cutoff, Suite 1A Worcester, MA 01604

Springfield

88 Industry Avenue, Suite D Springfield, MA 01104

Quincy

100 Hancock Street, 6th floor Quincy, MA 02171



Note:

Members should <u>not</u> mail an application to any of these enrollment centers.

Applications should be mailed to: Health Insurance Processing Center PO Box 4405 Taunton, MA 02780

*Note: The Chelsea office has limited parking space, but is accessible from MBTA bus lines

If members want to share their information with a third party or have the third party complete their renewal on their behalf, they must fill out a PSI or ARD form

Permission to Share Information (PSI) Form – This form allows MassHealth to share information about a member's eligibility with the persons listed on the form (the "designee").

Authorized Representative Designation (ARD) Form – This form allows MassHealth to share information with the person listed on the form, the "designee," and also for that person to make decisions for the member

More details:

- Signed PSI and ARD forms give MassHealth permission to alert the designee when a member is up for renewal
 - PSI designees receive a notification in the mail that the member is up for renewal
 - ARD designees receive both a notice and a blank renewal form
- Both the PSI and ARD forms allow the member's designee to help the member call MassHealth
 - A PSI designee can call MassHealth with the member on the phone and get verbal consent for them to make changes on the member's behalf
 - An ARD designee can call by themselves to make changes on behalf of the member
- Members should make sure their PSI/ARD forms are up-to-date
 - The PSI forms ends 12 months after MassHealth receives them, so new ones may need to be completed before a member's renewal
 - The ARD forms are valid until the member chooses to change them
- If a member is in a long-term care facility, the PSI form is generally the right option for allowing facility staff to help them with applications or renewals
- The PSI and ARD forms can be found online

A note on automatic renewals





- Whenever possible, MassHealth will attempt to automatically process renewals
- If you are in one of the following categories, you may be automatically renewed in the April 2023-April 2024 redeterminations cycle:
 - You receive SSI through the U.S. Social Security Administration because you are 65 and older and have limited income/resources
 - You receive SSI through the U.S. Social Security Administration because you are disabled and have limited income/resources
 - You receive TANF (Temporary Assistance of Needy Families) through DTA
 - You are currently or formerly in the custody of the Department of Children & Families (DCF)
 - You are a child or youth in custody of the Department of Youth Services (DYS)
- However, if you receive a blue envelope with a renewal notice, or any other mail with a call to action from MassHealth, you must respond

There are two kinds of help paying you can get through the Health Connector

Advance Premium Tax Credits (APTC)

- Lowers the premium amount you pay each month
- The IRS sends your tax credit directly to your insurance company, so you'll pay less each month
- You can apply <u>some or all your</u> tax credit to your monthly premium payment

ConnectorCare Program

- Uses federal Advance Premium Tax Credits (APTC) + MA state funds that help reduce the premium amount you pay each month
- Has low monthly premiums, low out-of-pockets costs, and no deductibles
- Depending on the plan type you qualify for, you could choose a plan for as low as \$0 up to \$255 per month (see slides at end of presentation)

Note: If someone is not eligible for the ConnectorCare program, they may still qualify for federal advance premium tax credits (APTC) to lower their premium bill