

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid www.mass.gov/masshealth

> MassHealth Acute Inpatient Hospital Bulletin 165 December 2018

**TO:** Acute Inpatient Hospital Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: Application for Health and Dental Coverage and Help Paying Costs (ACA-3)

## Background

The Massachusetts Application for Health and Dental Coverage and Help Paying Costs (ACA-3) captures applicant information to determine eligibility for benefits as required by the Affordable Care Act (ACA). MassHealth, in conjunction with the Massachusetts Health Connector (the "Connector") and the Health Safety Net (HSN), has updated the paper application for health benefits. These updates are intended to align the paper application with the online application from the state-based marketplace that is the "front door" for applying for assistance from MassHealth and the Connector. <u>MAhealthconnector.org</u> is the state-based marketplace where individuals in Massachusetts can apply for and purchase health care benefits.

The ACA-3, revised in October 2018, is intended for the following populations in Massachusetts:

- individuals younger than age 65 who do not need long-term-care services (either in a nursing facility or in the community);
- parents of children younger than age 19 and adult relatives living with or taking care of children younger than age 19 (regardless of the age of the parent or adult relative) when neither parent is living in the home; and
- individuals of any age who are disabled and who are either working 40 or more hours a month or are currently working and have worked at least 240 hours in the six months immediately before the month of the application.

Individuals aged 65 or older, including those who are applying with individuals under the age of 65, and those of any age who need long-term-care services (either in a nursing facility or in the community) will need to fill out the Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA-2).

# **Summary of Changes**

This version of the ACA-3 includes the following changes.

- For Question 30, updated list of deductions to align with changes to HIX in Release 16, which occurred in October 2018.
- Clarified instructions for Race and Ethnicity section on page 22.

#### MassHealth Acute Inpatient Hospital Bulletin 165 December 2018 Page 2

## Summary of Changes (cont.)

- Starting with Question 20, grouped Current Job 1, Current Job 2, and Self-employment under "Employment" heading. Added "If you have more jobs or self-employment and need more space, attach another sheet of paper" to the instructions, following "Employment" heading.
- Removed occurrences of repetitive instructions regarding "household" and how to answer questions for each person.
- For Question 6, made minor updates to language in tax filing questions.
- On Page 2 of instructions, General Instructions, 4th bullet, 1st sentence: added: "or the Massachusetts Health Connector" so that it now reads: MassHealth or the Massachusetts Health Connector will send a Request for Information notice if we need any additional information or proof to make an eligibility decision.
- On Page 10, Question 32: removed duplicate question.
- Re-ordered some items on the signature page and slightly changed some text (not affecting content) to align the paper signature page with the online signature page. Examples are changing "or" to "and/or" and changing "eligible members" to "I."

### **Supplies and Use of Revised Forms**

Previous versions of the ACA-3 should be recycled. Accommodations have been made in order to process any earlier versions that are submitted, but the October 2018 version should be the only version distributed in the future.

# How to Apply

The updated paper application is currently available online at <u>www.mass.gov/lists/masshealth-member-applications</u>.

Individuals are encouraged to apply online at <u>MAhealthconnector.org</u>. Applying online may be the fastest way to get coverage.

To apply, members can also use any of the options below.

Mail the filled-out, signed application to

Health Insurance Processing Center P.O. Box 4405 Taunton, MA 02780.

Fax the filled-out, signed application to (857) 323-8300.

To apply by telephone, call the MassHealth Customer Service Center at (800) 841-2900 (TTY: (800) 497-4648 for people who are deaf, hard of hearing, or speech disabled) or (800) MA ENROLL ((800) 623-6765).

Visit a MassHealth Enrollment Center (MEC) to apply in person.

#### MassHealth Acute Inpatient Hospital Bulletin 165 December 2018 Page 3

### Location of the Printable Application on the MassHealth Website

The new ACA-3 and ACA-3-AP (Additional Persons) can be printed from the MassHealth website. Go to <u>www.mass.gov/lists/masshealth-member-applications</u>.

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to <u>join-masshealth-provider-pubs@listserv.state.ma.us</u>. No text in the body or subject line is needed.

## Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.

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