Kouvèti Sante nan Massachusetts

Kisa ki Opsyon w yo?

Prentan 2026

MASSACHUSETTS HEALTH CONNECTOR

MassHealth

MASSACHUSETTS HEALTH CONNECTOR *for* Business

Jodi a, nou pral diskite sou pwen sa yo:

- ✓ Apèsi sou Opsyon Kouvèti yo nan Massachusetts
- ✓ Kouvèti pou Ti Anplwayè: Health Connector pou Biznis
- ✓ Apèsi sou MassHealth
  - ✓ Pwogram Asistans Plan Mansyèl pou MassHealth
- ✓ Kouvèti pou Endividi ak Fanmi: Health Connector
- ✓ Jwenn Èd

Konparezon ant MassHealth ak Health Connector

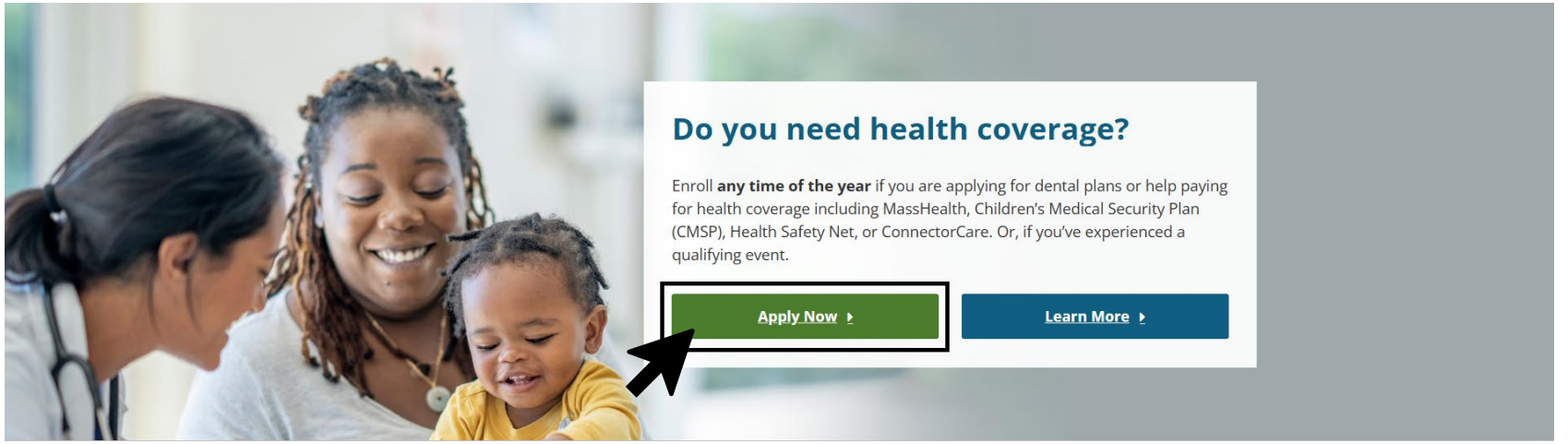
- **MassHealth** se pwogram Medicaid ak Pwogram Asirans Sante pou Timoun (CHIP) nan Massachusetts
- Li bay moun ki kalifye yo yon kouvèti sante gratis oswa a ba pri
- Se leta k ap jere l epi se gouvènman leta a ak gouvènman federal la ki finanse l
- Li baze sou revni, laj, twoub/dezabilite, ak lòt faktè ankò
- Enskripsyon an kontinye pandan tout lane a

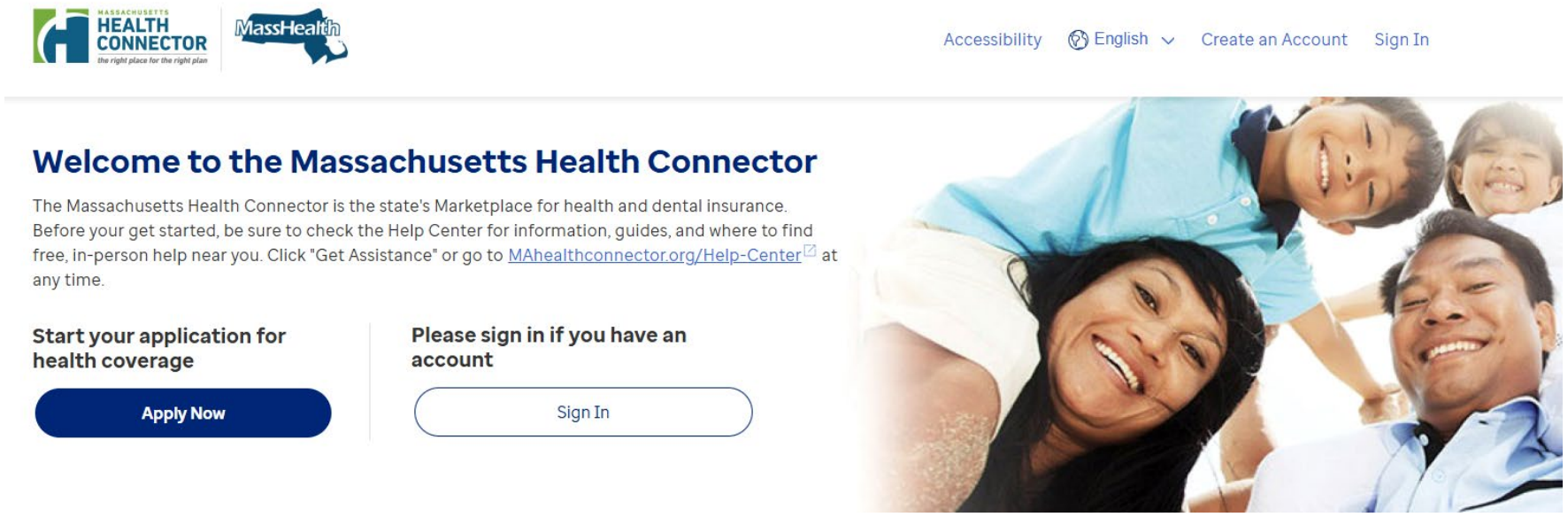
- **Health Connector** se mache an liy leta a pou plan kouvèti sante ak swen dantè
- Li disponib pou endividi, fanmi, ak ti biznis yo
- Kalifikasyon pou ekonomize / sibvansyon yo varye selon revni ak kantite moun ki nan kay la
- Peryòd Enskripsyon Ouvè ak peryòd enskripsyon espesyal ki aplike pou plan endividi ak plan fanmi yo
- Pou ti anplwayè yo, Health Connector pou Biznis ofri enskripsyon ouvè k ap kontinye dirab

MAhealthconnector.org – Yon aplikasyon, plizyè pwogram

Aplike yon fwa pou w wè si w pou benefis MassHealth oswa pou kouvèti Health Connector pou *Endividi ak Fanmi*

Aplikasyon an liy **MAhealthConnector.org** la se pou Health Connector ak MassHealth





Espanyòl:
MAHealthConnector.org/es/

Pòtigè:
MAHealthConnector.org/pt/

Kouman pou w aplike sou MAhealthconnector.org

Aplike si ou:

- Abite nan Massachusetts
- Se yon sitwayen Ameriken, popilasyon natif natal Ameriken, oswa si ou gen yon prezans legal Ozetazini
- Pa gen asirans

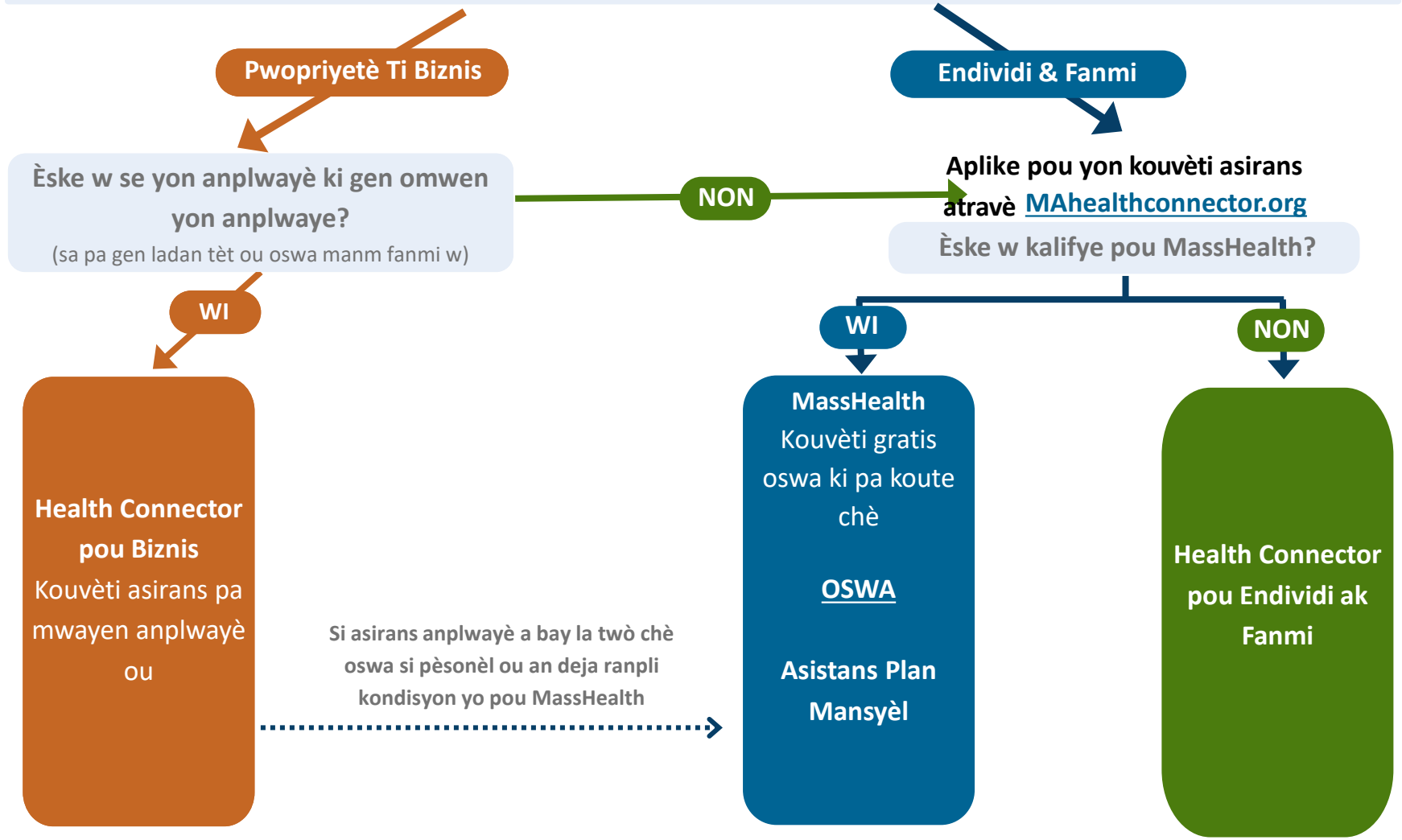
Pa aplike si ou:

- Enskri nan Medicare, MassHealth (Medicaid), oswa lòt kouvèti sante piblik
- Gen yon anplwayè ki ofri w yon asirans sante ki abòdab epi ki konplè
- Nan prizon

W ap bezwen:

- **Nimewo sekirite sosyal** pou chak moun k ap aplike, si yo genyen yonn
- **Dokiman imigrasyon** pou tout moun ki pa sitwayen Ameriken k ap aplike, si yo genyen yonn
- Enfòmasyon resan sou **pewòl** tankou:
  - Revni nèt ou fè nan travay pou kont ou
  - Kopi de dènye resi peman ou yo
  - Enfòmasyon sou revni w genyen kounye a si w pa t fè deklarasyon taks lane pase oswa si revni w chanje depi lanne pase
- Si w pa gen tout enfòmasyon ki pi wo yo, ban nou sa w genyen. W ap resevwa yon lèt k ap mande w plis enfòmasyon si sa nesesè.

Èske w se yon ti biznis oswa yon endividi k ap chèche yon kouvèti asirans?



Kouvèti pou Ti Anplwayè: Health Connector pou Biznis

MASSACHUSETTS HEALTH CONNECTOR *for* Business

Health Connector pou Biznis: Èske sa bon pou ou?

Health Connector pou Biznis ofri ti anplwayè nan Massachusetts yo opsyon kouvèti asirans pou yo ka bay anplwaye yo asirans sante ak asirans swen dantè

Plan sa yo kapab apwopriye si ti biznis ou an:

- Pa ofri asirans kounye a men ou ta renmen fè sa
- Vle fleksibilite ak chwa plan pou anplwaye w yo
- Gen pèsonèl ki gen bezwen ak bidjè ki varye
- Vle gen plis kontwòl sou kantite kòb ou kontribye

Chwa Plan yo atravè Health Connector

Konpayi asirans prensipal nan Massachusetts yo ofri kouvèti asirans sante oswa swen dantè atravè mache an liy leta a

Health Connector pou Biznis - Kalifikasyon

Anplwayè yo dwe reponn ak sèten kondisyon pou yo ka ofri kouvèti asirans

1. Se yon ti anplwayè ki genyen ant yonn (1) ak maksimòm senkant (50) anplwaye ki konplètman elijib
2. Li genyen omwen yon anplwaye ki enskri ki pa ni yon pwopriyetè, ni yon manm fanmi
3. Li gen yon adrès fizik ki sitiye nan Massachusetts

Lòt Kondisyon Anplis:

Pou kouvèti asirans yon gwoup ka vin aktif, gwoup sa a dwe genyen omwen 75% nan anplwaye yo k ap renonse oswa k ap enskri nan kouvèti a, epi premye depo garanti a (ki dabitid dwe fèt anvan 23 nan mwa a) dwe peye alè.

Benefis Health Connector pou Biznis

Health Connector chèche maksimize **aksè ak abòdabilite** pou ti anplwayè yo nan Massachusetts. Pou reyalize objektif sa yo, atravè plizyè dimansyon, **Health Connector pou Biznis** ofri ti anplwayè nan Massachusetts yo **yon fleksibilite, chwa, ak opòtinite** pou yo ekonomize ki pa gen parèy.

Patisipasyon Konplè Moun k ap Pote

Sèl kote ti gwoup yo ka jwenn aksè ak chak konpayi transpò prensipal ki gen sou mache a.

PLAN MANSYÈL KI KONPETITIF

Ti biznis yo fè yon ekonomi plis pase 20 pousan an mwayèn, anvan menm yo jwenn okenn ranbousman

RANBOUSMAN POU BYENNÈT

Anplwayè yo ka kalifye pou resevwa yon ranbousman 15% sou kontribisyon plan mansyèl yo si anplwaye yo konplete youn nan plis pase 30 aktivite byennèt ki apwouve yo.

CHWA FLEKSIB POU ANPLWAYE YO

Anplwayè yo ka pèmèt anplwaye yo chwazi diferan plan ki koresponn ak bezwen yo, pandan y ap kenbe depans anplwayè a fiks.

ASISTANS SÈTIFYE

Gen plis pase **500** koutye (brokers) sètifye ki disponib pou ede anplwayè yo deside ki opsyon plan ki pi bon pou biznis yo.

TRANKILITE LESPRI

Anplwayè yo ka santi yo an sekirite paske tout plan yo reponn ak egzijans kouvèti asirans leta ak federal yo.

Kijan pou kòmanse

Sou Entènèt

Ou ka wè yon apèsi sou opsyon plan yo epi jwenn yon estimasyon pou ti Biznis ou a Ranpli aplikasyon an sou entènèt nan MAhealthconnector.org/business

Sèvis Kliyan

Rele liy Sèvis Kliyan Health Connector pou Biznis nan 1-888-813-9220

Travay ak yon Koutye

Health Connector pou Biznis gen plis pase 500 koutye sètifye. Koutye yo ka ede w konpare plan ki disponib yo pou w ka konprann ki plan ki pi bon pou gwoup ou a

Jwenn yon koutye nan: **https://my.mahealthconnector.org/directory/categories/small-businesses**

Prezantasyon MassHealth

MassHealth: Popilasyon Nou Sèvi

MassHealth bay benefis sante pou timoun, fanmi, granmoun, ak moun ki gen twoub/dezabilite ki kalifye nan Massachusetts. Manm MassHealth yo gen aksè ak vizit doktè, kouvèti asirans dantè, medikaman sou preskripsyon, sèvis sante konpòtmantal, ak lòt sèvis sante enpòtan.

[MassHealth pou Moun, Fanmi, ak Moun ki gen Twoub oswa Dezabilite | Mass.gov]

Moun ak Fanmi yo

- Moun ki gen mwens pase 65 an epi ki pa rete nan yon mezon retrèt oswa ki pa prèt pou antre nan youn.
- Moun **nenpòt laj** ki se:
  - Paran timoun ki gen mwens pase 19 an
  - Fanmi ki adilt k ap viv ak timoun ki gen mwens pase 19 an epi k ap pran swen yo si okenn nan paran yo pa rete nan kay la

Granmoun ak Moun ki Bezwen Swen Alontèm

- Moun ki gen plis pase 65 an k ap viv lakay yo
- Moun **nenpòt laj** ki bezwen sèvis swen alontèm nan yon enstitisyon medikal oswa nan yon mezon retrèt
- Moun ki kalifye nan sèten pwogram pou jwenn sèvis swen alontèm pandan y ap viv lakay yo (moun ki gen twoub oswa dezabilite)
- Moun ki marye k ap viv ak yon mari oswa yon madanm ki gen 65 an oswa plis

[MassHealth pou Granmoun ak Moun ki bezwen Sèvis Swen Alontèm | Mass.gov]

MassHealth

Kalite Kouvèti pou Popilasyon Moun ak Fanmi yo

Kalite Kouvèti Prensipal

Estanda
- Benefis Sante Konplè nan MassHealth

CommonHealth
- Benefis konplè pou **granmoun ak timoun ki gen twoub oswa dezabilite** ki pa kalifye pou Estanda

CarePlus
- Benefis ki laj pou granmoun ki pa kalifye pou Estanda

Asistans pou Fanmi
- Benefis pou **sèten timoun ak granmoun ki pa kalifye pou Estanda (sa enkli kèk moun ki pa sitwayen ameriken)**

Manm ki gen kalite kouvèti sa yo dwe enskri nan yon plan sante

Pwogram Espesyal

Limite*
Sèvis ijans sèlman akoz estati imigrasyon ki anpeche yo jwenn plis sèvis

Plan Sekirite Medikal pou Timoun (CMSP)*
Swen prensipal ak prevantif pou **timoun ki pa gen asirans** epi ki pa kalifye pou okenn lòt kouvèti MassHealth.

Health Safety Net *
Ede peye pou sèvis nan **lopital ijans ak sant sante kominotè pou rezidan Massachusetts** ki pa gen asirans oswa ki pa gen ase kouvèti asirans.

* - kalite kouvèti sa yo pa konsidere kòm asirans pou kesyon taks

Asistans pou Peman Mansyèl MassHealth

Kisa ki Asistans pou Peman Mansyèl (PA) MassHealth?

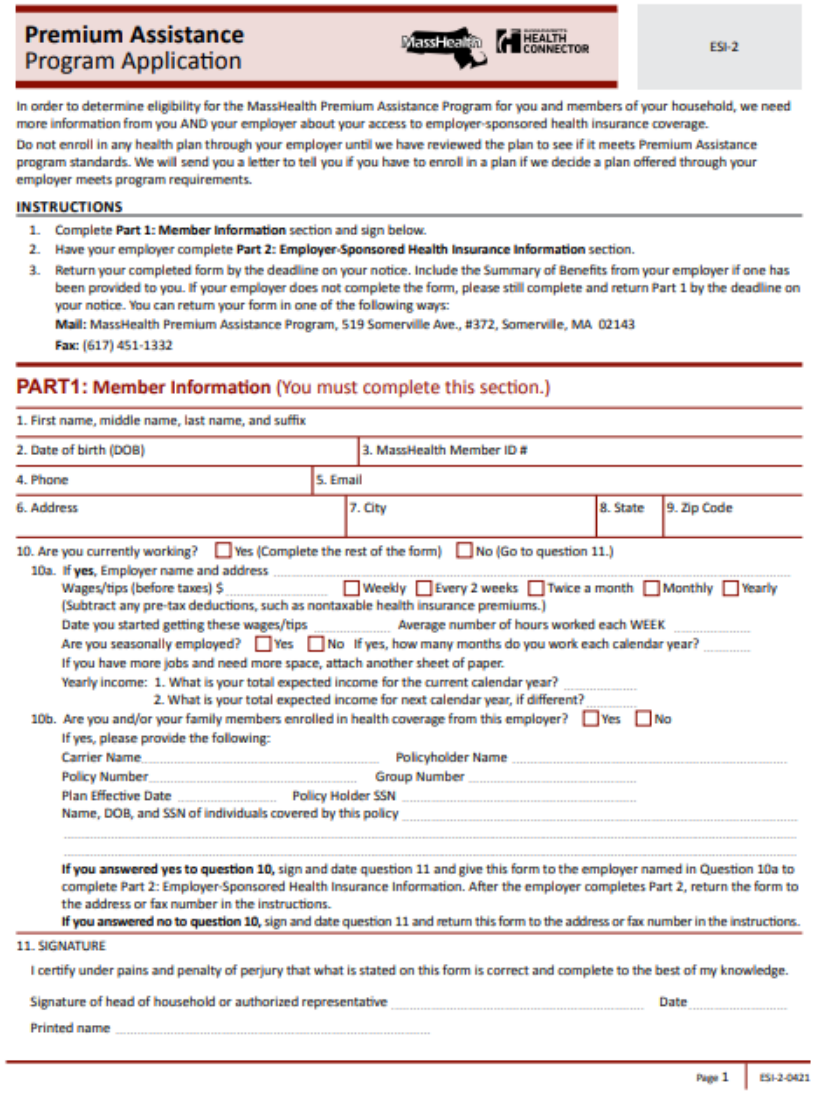
Pwogram Asistans pou Peman Mansyèl (PA) MassHealth la se pou manm MassHealth ki gen aksè ak yon asirans sante konpayi travay yo bay (ESI), swa nan travay pa yo oswa nan yon lòt sous, tankou yon lòt moun ki rete nan menm kay avèk yo.

Si w gen MassHealth epi w gen aksè ak yon Asirans Konpayi Travay (ESI), ou ta:

- kapab jwenn èd pou peye pati pa w la nan peman mansyèl asirans sante a si w kalifye pou pwogram PA a
- Resevwa èd tou ak lòt depans ou dwe peye nan pòch ou, tankou kopeman, dediktib, ak ko-asirans

Ou ka kalifye pou PA si:

- Si w gen aksè ak yon asirans konpayi travay bay (ESI) ki reponn ak sèten egzijans.
- Si MassHealth detèmine li pi pwofitab pou manm lan enskri nan pwogram PA a.
- Si gen omwen yon moun asirans ESI a kouvri ki kalifye pou Asistans pou Peman Mansyèl (PA) MassHealth la; **epi**
- Moun ki responsab règleman/politik asirans ESI a:
  - se yon manm ki kalifye pou MassHealth, **oswa**
  - l ap viv ak yon manm MassHealth ki kalifye pou Estanda, CommonHealth, Asistans pou Fanmi, oswa Careplus.



Premium Assistance
Program Application

ESI-2

In order to determine eligibility for the MassHealth Premium Assistance Program for you and members of your household, we need more information from you AND your employer about your access to employer-sponsored health insurance coverage.

Do not enroll in any health plan through your employer until we have reviewed the plan to see if it meets Premium Assistance program standards. We will send you a letter to tell you if you have to enroll in a plan if we decide a plan offered through your employer meets program requirements.

INSTRUCTIONS

1. Complete **Part 1: Member Information** section and sign below.
2. Have your employer complete **Part 2: Employer-Sponsored Health Insurance Information** section.
3. Return your completed form by the deadline on your notice. Include the Summary of Benefits from your employer if one has been provided to you. If your employer does not complete the form, please still complete and return Part 1 by the deadline on your notice. You can return your form in one of the following ways:
   Mail: MassHealth Premium Assistance Program, 519 Somerville Ave., #372, Somerville, MA 02143
   Fax: (617) 451-1332

PART1: Member Information (You must complete this section.)

1. First name, middle name, last name, and suffix
2. Date of birth (DOB) | 3. MassHealth Member ID #
4. Phone | 5. Email
6. Address | 7. City | 8. State | 9. Zip Code

10. Are you currently working? ☐ Yes (Complete the rest of the form) ☐ No (Go to question 11.)
10a. If **yes**, Employer name and address
Wages/tips (before taxes) $ ☐ Weekly ☐ Every 2 weeks ☐ Twice a month ☐ Monthly ☐ Yearly
(Subtract any pre-tax deductions, such as nontaxable health insurance premiums.)
Date you started getting these wages/tips | Average number of hours worked each WEEK
Are you seasonally employed? ☐ Yes ☐ No If yes, how many months do you work each calendar year?
If you have more jobs and need more space, attach another sheet of paper.
Yearly income: 1. What is your total expected income for the current calendar year?
2. What is your total expected income for next calendar year, if different?
10b. Are you and/or your family members enrolled in health coverage from this employer? ☐ Yes ☐ No
If yes, please provide the following:
Carrier Name | Policyholder Name
Policy Number | Group Number
Plan Effective Date | Policy Holder SSN
Name, DOB, and SSN of individuals covered by this policy

If you answered yes to question 10, sign and date question 11 and give this form to the employer named in Question 10a to complete Part 2: Employer-Sponsored Health Insurance Information. After the employer completes Part 2, return the form to the address or fax number in the instructions.
If you answered no to question 10, sign and date question 11 and return this form to the address or fax number in the instructions.

11. SIGNATURE
I certify under pains and penalty of perjury that what is stated on this form is correct and complete to the best of my knowledge.
Signature of head of household or authorized representative | Date
Printed name

Page 1 | ESI-2-0421

[Asistans pou Peman Mansyèl MassHealth (PA) | Mass.gov]

MASSACHUSETTS HEALTH CONNECTOR

Kouvèti pou Moun ak Fanmi: Health Connector

MASSACHUSETTS HEALTH CONNECTOR

Chwa Plan yo atravè Health Connector

Tout konpayi asirans sante ki patisipe nan Health Connector yo ofri plan nan ConnectorCare tou pou ane plan 2026 la.

Plan Health Connector yo

Tout plan ki vann atravè Health Connector yo reponn ak nivo egzijans leta ak federal pou kouvèti asirans

Plan sante ak plan dantè ki kalifye

Chwazi nan plizyè kalite plan nan zòn ou an nan mitan pi gwo konpayi asirans nan Massachusetts yo

Plan ConnectorCare ak Kredi Taks Avanse (APTC)

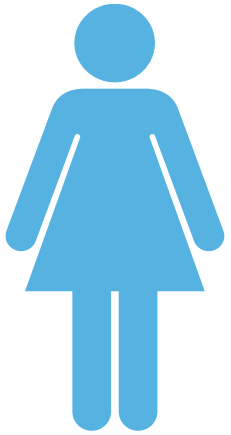
Moun ki nan sèten nivo revni epi ki reponn ak lòt kondisyon elijibilite yo ka kalifye pou kredi taks avanse (APTC) pou diminye pri peman mansyèl yo epi jwenn kouvèti asirans ki koute mwens chè oswa ki gratis.

Plan Dantè

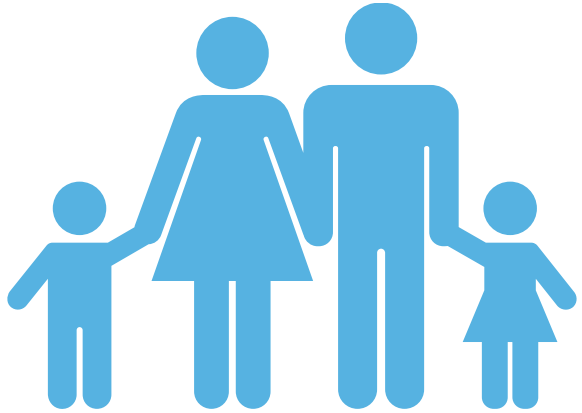
Pou moun, timoun, fanmi, ak ti anplwayè; sa enkli plan sèlman pou timoun (pedyatrik) ak plan ki gen rediksyon ki pi ba oswa ki pi wo.

ConnectorCare: Limit Revni pou Elijibilite

ConnectorCare gen peman mansyèl ak ki pi ba, epi l pa gen rediksyon



Pou ane 2026 la, limit revni pou yon sèl moun se ant $15,629 rive $62,600.



Pou ane 2026 la, revni pou yon fanmi ki gen kat moun se ant $32,150 rive $126,600

Kijan pou Jwenn Èd

MASSACHUSETTS HEALTH CONNECTOR

MassHealth

Kote mwen ka Jwenn Èd?

Sèvis Kliyan MassHealth

- Rele Sèvis Kliyan MassHealth nan **(800)-841-2900, TDD/TTY: 711**
- **Vizite yon** Sant Enskripsyon MassHealth nan youn nan sèt kote ki pratik atravè Commonwealth la
- Nou ankouraje w anpil pou w sèvi ak zouti pou pran randevou MassHealth la si w bezwen èd an dirèk nan men yon reprezantan Sèvis Kliyan MassHealth

Sèvis Kliyan Health Connector

- **1-877-MA-ENROLL** (1-877-623-6765), **TDD/TYY: 711** pou moun ki soud, moun ki tande di, oswa moun ki gen pwoblèm lapawòl
- Pou enfòmasyon sou lè ak jou yo ouvri, ak lòt detay ankò, ale nan Sant Apèl Sèvis Kliyan Health Connector
- **Aktivite lokal yo:** Aktivite ki gen pou vini yo – Massachusetts Health Connector (mahealthconnector.org)

Èd nan Sant Enskripsyon MassHealth yo

Sant Enskripsyon yo ouvri pou moun ki vini san randevou.

Charlestown

529 Main Street
Charlestown, MA 02129

Chelsea*

45 Spruce Street
Chelsea, MA 02170

Springfield

88 Industry Avenue, Suite D
Springfield, MA 01104

Taunton

21 Spring Street, Suite 4
Taunton, MA 02780

Tewksbury

367 East Street
Tewksbury, MA 01876

Quincy

100 Hancock Street, 6th floor
Quincy, MA 02171

Worcester

50 Southwest Cutoff, Suite 1A
Worcester, MA 01604

Nòt:
Manm yo pa dwe voye aplikasyon yo pa lapòs nan okenn nan sant enskripsyon sa yo.

Yo dwe voye aplikasyon yo nan adrès sa a:
Health Insurance Processing Center
PO Box 4405
Taunton, MA 02780

***Nòt:** Biwo Chelsea a gen yon espas pakin ki limite, men ou ka rive la ak liy otobis MBTA yo.

MassHealth

Patenè Kominotè ak Sipò an Pèsòn

Asistans gratis pou enskripsyon disponib atravè òganizasyon patenè kominotè nan tout Massachusetts.

- Navigatè ki resevwa fòmasyon ak sètifikasyon ansanm ak Konseye Aplikasyon Sètifye, ki pale anpil lang. Yo ka ede w aplike epi enskri nan plan asirans sante.
- Yo ka reponn kesyon sou eligibilite (si w kalifye), aplikasyon an, peman yo, detay sou plan yo, ak règleman ak kondisyon refòm swen sante yo.
- Nou rekòmande pou w rele davans pou w pran yon randevou jwenn ed gratis tou pre w.

Konseye SHINE yo

Konseye SHINE yo bay enfòmasyon, konsèy, ak asistans gratis sou asirans sante pou granmoun ki kalifye pou Medicare ak moun k ap pran swen yo.

Pou pran yon randevou ak yon konseye SHINE nan zòn ou an, rele MassOptions nan 1-800-243-4636 oswa voye yon imèl nan SHINE@state.ma.us

Kesyon?

MASSACHUSETTS HEALTH CONNECTOR

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