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

TO: MassHealth Eligibility Operations Staff

FROM: Heather Rossi, Deputy Policy Director for Eligibility

RE: **Updates to the Hospital-Determined Presumptive Eligibility (HPE) Application Process**

This memo, which supersedes *Eligibility Operations Memo 14-01* published in June 2014, summarizes MassHealth's Hospital-Determined Presumptive Eligibility (HPE) process. This publication largely restates the requirements laid out in *Eligibility Operations Memo 14-01*, but also (a) clarifies how MassHealth will treat the submissions of both an HPE application and the *Massachusetts Application for Health and Dental Coverage and Help Paying Costs* (ACA-3) application for the same person on the same day; and (b) clarifies that an individual may apply for HPE even if they have received HPE benefits or MassHealth Standard, MassHealth CommonHealth, MassHealth CarePlus, or MassHealth Family Assistance within the previous 12 months; provided that the hospital determines that such individual either meets MassHealth's clinical eligibility criteria for inpatient or 24-hour mental health or substance use disorder treatment services or the individual has a diagnosis or a presumptive diagnosis of COVID-19.

Overview of HPE

The Affordable Care Act (ACA) allows qualified hospitals to make presumptive eligibility determinations for immediate, time-limited Medicaid coverage using self-attested information from certain individuals who appear to be eligible for Medicaid coverage, but are unable to complete a full Medicaid application at that time. (See 42 CFR 435.1110; 130 CMR 502.003(H): *Hospital-Determined Presumptive Eligibility*.) Qualified hospitals may include both acute hospitals and psychiatric hospitals.

Once a qualified hospital has contracted with MassHealth to make HPE determinations, its HPE-trained Certified Application Counselors (CACs) may determine whether an individual is eligible for HPE by completing the *MassHealth Application for Hospital-Determined Presumptive Eligibility* (HPE Application) using self-attested information provided by the applicant. The HPE-trained CAC must complete a separate HPE application for each individual seeking HPE coverage.

Prior to completing and submitting an HPE Application, the CAC must

- ensure that the applicant is unable to complete a full *Massachusetts Application for Health and Dental Coverage and Help Paying Costs* (ACA-3) at that time;
- determine the applicant's eligibility for HPE;
- explain the HPE application process to the applicant and describe the applicant's rights and responsibilities; and
- assign the applicant the appropriate MassHealth coverage type.

Once the HPE-trained CAC approves the application, the applicant receives immediate, time-limited MassHealth coverage corresponding to the coverage type assigned by the CAC.

The expiration date of the applicant's HPE coverage is described in greater detail later in this memo. Qualified hospitals must also offer to assist applicants in completing a full ACA-3 application to ensure that the applicant will be considered for continued MassHealth coverage beyond the HPE coverage period.

The MassHealth HPE team located at the Charlestown MassHealth Enrollment Center (MEC) will enter each approved HPE application into MA21, including protecting the application with an HPE aid category benefit by entering an Eligibility Start Date and an End Protect Date. The team will also maintain the HPE database. HPE application information may be viewed on MyWorkspace by accessing the "Special Project 7" envelope category.

Once the information is entered in MA21, providers may view member information on the MassHealth Eligibility Verification System (EVS) the next business day.

HPE Eligibility

Eligibility for HPE is based on the applicant's self-attested responses to a limited set of questions set forth in the HPE application. These include questions about household income (as opposed to modified adjusted gross income [MAGI]), household size, pregnancy status, parent or caretaker relative status, immigration status, and Massachusetts residency status. When assessing whether an applicant qualifies for HPE, neither the qualified hospital nor the Charlestown MEC will perform any matching or verifications. To retain coverage after the expiration of the HPE period, applicants must submit a full application before the HPE coverage end-date. The full ACA-3 application is subject to customary matching, verification, and MAGI requirements.

Only individuals who are unable to complete a full ACA-3 application at the time that they seek MassHealth coverage may apply for HPE. Consequently, if MassHealth receives a full ACA-3 application and an HPE application for the same individual on the same day, only the full ACA-3 application will be processed.

An individual may not apply for HPE if the individual has been approved for MassHealth benefits through HPE within the previous 12 months or if the individual has been enrolled in MassHealth Standard, MassHealth CommonHealth, MassHealth CarePlus, or MassHealth

Family Assistance within the previous 12 months. However, these limitations do not apply if the qualified hospital determines that the individual has a diagnosis or a presumptive diagnosis of COVID-19 or meets MassHealth's clinical eligibility for inpatient or 24-hour mental health or substance use disorder treatment services.

These services include, but are not limited to:

- Inpatient psychiatric treatment;
- Level 4 withdrawal management;
- Community crisis stabilization (CCS); and
- Acute treatment services (ATS), enhanced acute treatment services (E-ATS), clinical support services (CSS), transitional support services (TSS), or residential rehabilitation services (RRS).

When invoking one of these exceptions, the HPE-trained CAC should note that the applicant requires such a level of care on the HPE Cover Sheet.

If a qualified hospital erroneously approves HPE eligibility for an individual who is ineligible to apply for HPE, MassHealth's HPE team will notify the hospital. The hospital will be instructed to correct its mistake by contacting the member and explaining to the individual that they already have, or had, comprehensive MassHealth benefits or HPE.

Such a member will remain in his or her existing MassHealth benefit, if applicable. No new coverage under HPE will be entered into MA21 based on the hospital's mistake. Services rendered to applicants erroneously approved by an HPE-trained CAC will not be paid for using HPE.

HPE determinations cannot be appealed. Applicants who are not eligible for HPE benefits should complete the full ACA-3 application.

HPE Coverage Duration

Members determined eligible through HPE may receive MassHealth Standard, MassHealth CarePlus, or MassHealth Family Assistance. Any services that are available fee-for-service for these coverage types are available to members determined eligible through HPE. (See 130 CMR 450.105 for a complete list of covered services by coverage type.) Individuals with HPE will not be assessed a premium. Premium assistance is not awarded during the presumptive eligibility period.

HPE coverage starts on the day that the qualified hospital makes the presumptive eligibility determination and ends on the last day of the month following the month that HPE was approved if a full application has not been submitted by that day; or, if a full application has been submitted by that date, then the HPE coverage ends on the date a determination is made based on the full application.

For example, if an applicant is determined to be eligible for coverage through HPE on March 15, 2020, then that is the first day of the HPE coverage period. The HPE coverage will end on

April 30, 2020, if the individual has not submitted a full application by that date. If the individual submits a full MassHealth application by April 30, 2020, then the HPE coverage will continue until MassHealth makes an eligibility determination on the full application.

A member's HPE end date will vary depending on whether the member has submitted a full application and whether MassHealth has made a determination on that application.

MassHealth staff will extend an HPE benefit upon a member's request if the member has filed a full ACA-3 application. MassHealth staff can access the protection in an "HPE" benefit through MA21 and can check My Workspace to see if a full ACA-3 application has been filed. If the HPE member has submitted a full ACA-3 application, MassHealth staff must access MA21 and extend the HPE coverage end-date until the receive date of the full application. This will provide the member with coverage and allow extra time for MassHealth to process the full ACA-3 application that had been received before the coverage end-date of HPE eligibility. However, if a full application has not been submitted, HPE members should be advised to do so if they want to keep their benefits to continue beyond their current eligibility period.

Managed care enrollment is not available to members determined eligible through HPE.

HPE coverage will not be retroactively terminated, even if the eligibility determination on the full application results in the member not being eligible for continued MassHealth coverage.

HPE Notices

Applicants approved for coverage through HPE will receive an approval notice from the qualified hospital when the qualified hospital makes the HPE eligibility determination. The approval notice will include the HPE approval as well as the qualified hospital's name and contact information. In many cases, the approval notice provided by the qualified hospital will not include a member ID due to the lag time in getting the approval information into MassHealth systems.

MassHealth will also mail applicants approved through HPE a confirmation approval letter on MassHealth letterhead. This letter will contain the member ID.

Either the letter from the qualified hospital or the letter from MassHealth may be used as proof of coverage. Providers will also be able to verify coverage in EVS, once established. The EVS message for coverage determined through HPE will reflect fee-for-service coverage in MassHealth Standard, Family Assistance, or CarePlus.

No member ID cards will be provided for coverage determined through HPE. Members are directed to use the letter from the hospital or MassHealth as proof of coverage.

Program Eligibility Monitoring

MEC staff will run systematic queries against HIX to determine if HPE-approved members have submitted a full ACA-3 application. If so, and if the full application is approved, MEC staff will extend the HPE coverage end-date until the start date of the full MassHealth benefit.

IMPORTANT: MEC staff, who receive information that a full ACA-3 application was submitted for HPE members, must notify the MassHealth HPE team by sending an email to the MassHealth HPE team to confirm that a full application has been submitted for the HPE member.

Questions

If you have any questions about this memo, please have your MEC designee contact the Policy Hotline.