



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

Eligibility Operations Memo 25-12

DATE: July 2025

TO: MassHealth Eligibility Operations Staff

FROM: Heather Rossi, Deputy Chief Operating Officer, Eligibility Policy and Implementation

RE: **Discontinuation of Certain Section 1902(e)(14)(A) Waivers**

Background

During the COVID-19 public health emergency unwinding period, certain flexibilities under Section 1902(e)(14)(A) of the Social Security Act (as described in the March 3, 2022, state health official letter) were offered to states as optional ways to help eligible people keep their health coverage during this period. Some waiver strategies were meant to be longstanding under other federal authorities. Others are being discontinued. This memo summarizes the discontinuation of certain 1902(e)(14)(A) waivers, as described in the November 14, 2024, Centers for Medicare & Medicaid Services Informational Bulletin.

Summary of Changes

The following Section 1902(e)(14)(A) waivers will end June 30, 2025.

- **Reconsideration Period:** During the unwinding period, states were permitted to reinstate eligibility, effective on a person's prior termination date, if they were disenrolled for a procedural reason and were then redetermined eligible for Medicaid based on a returned renewal form during a 90-day reconsideration period. After June 30, 2025, if a person is disenrolled for procedural reasons and returns their renewal form during the 90-day reconsideration period, their eligibility will be reinstated effective the date the renewal form is received, as long as they meet Medicaid eligibility requirements. Additionally, consistent with 42 CFR § 435.915, states must provide up to three months of retroactive eligibility for people who are disenrolled for procedural reasons and are subsequently determined eligible for Medicaid during the reconsideration period, if they received Medicaid services in the three months before returning the renewal form and met Medicaid eligibility requirements when they received services.
- **Streamlining Asset Determinations:** During the unwinding period, states were permitted to renew Medicaid eligibility without regard to the asset test for non-modified adjusted gross income (non-MAGI) beneficiaries who were successfully

renewed via ex parte (electronic data matching). After June 30, 2025, ex parte renewals for non-MAGI members will include the asset test for those who are subject to one.

- Authorized Representative Designation (ARD): During the unwinding period, states were permitted to allow beneficiaries to designate an authorized representative to sign their application or renewal form over the telephone without a signed designation from the applicant or beneficiary. After June 30, 2025, the applicant's or beneficiary's signature must be included in order for an authorized representative to sign an application on their behalf.

Once a member initiates an ARD Form, members and authorized representatives can submit the ARD Form and required signatures to MassHealth in the following ways.

- Online at our Member Forms [page](#), using Adobe Sign
- By calling the MassHealth Customer Service Center at (800) 841-2900 and providing a signature over the phone
- Mailing your form to

Health Insurance Processing Center
PO Box 4405
Taunton, MA 02780

- By fax to (857) 323-8300

Questions?

Have your MassHealth Enrollment Center designee contact the Policy Hotline.