

Commonwealth of Massachusetts Executive Office of Health and Human Services

www.mass.gov/masshealth/CBHI

HOW TO APPLY FOR HEALTH COVERAGE FOR YOUR CHILD

MassHealth is the Massachusetts Medicaid program. More than 1 million people in the state get health care services with help from MassHealth. This guide explains how to apply

Where to	access t	he app	lication	and su	bmit it
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- 1. If you would like to apply with a paper application,
 - visit the online *MassHealth Member Library*. Search under "Applications" and then click *Massachusetts Application for Health and Dental Coverage and Help Paying Costs*.

or

• call the MassHealth Customer Service Center at (800) 841-2900 and ask the customer service representative to mail you an application. For people who are deaf, hard or hearing, or speech disabled, call TTY at (800) 497-4648. The Center can mail you one.

If you would like to apply online, go to www.MAhealthconnector.org

- 2. Does your child have a disability?
 - If yes, go to step 3.
 - If no, go to step 4.
- **3.** Make sure to answer **yes** to question 13 under step 2 (Person 2) of the application.

13.	Does this person have an injury, illness, or disability (including a disabling mental health condition) that has lasted or is
	expected to last for at least 12 months? If legally blind, answer Yes .

Go to step 4.

- **4.** After you complete the application, make sure you sign it.
- **5.** Submit the signed application

By mail to

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

Or by fax to

- (857) 323-8300
- **6.** If your child has a **disability,** there are forms in addition to the one you just filled out. Follow the instructions in the next page.
 - If your child does not have a disability, you have completed the application process.

Other applications to fill out when your child has a disability

After you have completed the application from the table above, *Massachusetts Application for Health and Dental Coverage and Help Paying Costs*, use the information below if your child has a disability

1. Access the MassHealth Member Library and then Click on MassHealth member forms

2. What is your child's age?

- If 17 or younger, use the form named *MassHealth Child Disability Supplement Form*.
- If age 18 or older, use the form named MassHealth Adult Disability Supplement Form.

or

Call the MassHealth Customer Service Center at (800) 841-2900 and request copies of the form you need. For people who are deaf, hard or hearing, or speech disabled, call TTY (800) 497-4648. The Center can mail you one.

3. After filling out the form, sign the Medical Records Release forms at the end of the Disability Supplement forms. (If your child is in an Early Intervention Program or has an IEP or 504 Plan at school, you will need to fill out a release form for these providers/teachers.)

Important: If you have your child's medical records, Individualized Family Services Plan (IFSP), or Individualized Educational Plan (IEP), testing results, or other records that describe your child's condition(s), send copies with the Medical Records Release and Disability Supplement forms.

4. Send the completed Disability Supplement and signed Medical Records Release forms to

Disability Evaluation Services

P.O. Box 2796

Worcester, MA 01613-2796

After you have mailed this information, a staff member from the UMass/Disability Evaluation Services may contact you if MassHealth needs more information.

Getting help with the application

MassHealth Enrollment Centers

You can visit a MassHealth Enrollment Center (MEC) to apply in person. See the Member Booklet for Health and Dental Coverage and Help Paying Costs from the MassHealth Member Guides and Handbooks web page for a list of MEC addresses.

Navigators and Certified Application Counselors

Navigators and Certified Application Counselors are trained individuals who can help you from the application process through enrollment. To find a Navigator or Certified Application Counselor organization near you, go to www.betterMAhealthconnector.org/get-help.

After submitting the application

MassHealth will try to verify the information on the application. If additional information (such as proof of income, citizenship, or immigration status) is needed, MassHealth will send you a *Request for Information* notice that will list all the required documents and the deadline for submitting them.

If you answered "yes" to question 13 under Step 2 of on the MassHealth application and didn't fill out a disability application, UMass/Disability Evaluation Services (DES), whom MassHealth partners with, will follow up with you and may send you more paperwork to complete, including the MassHealth Disability Supplement Form. The paperwork DES sends you helps them review your child's disability request for MassHealth. This process can take up to 90 days.

Keep Your Records!

- **If you mail your application at the post office,** make sure to ask for a return receipt. This way you have proof that MassHealth got your application.
- The date MassHealth gets your application affects the date that MassHealth can pay for medical services if you are found eligible.
- Do not send more than one copy of your application. An application review can take up to 45 days. The extra paperwork will delay review.
- Keep a copy of everything you send for your records.