



December 2010

## **Important Updates about Your MassHealth Benefits – Please Read.**

MassHealth sent a notice to MassHealth members in May 2010 about some changes to their benefits. Since that notice was sent, some information about acute inpatient hospital stays has changed. This notice updates and corrects that information. This notice also reminds you of the changes to your benefits that took effect in July 2010.

### **The change in coverage of acute hospital stays did not take effect October 1, 2010, as stated in the May 2010 notice. This notice updates and corrects the information about changes in coverage of acute hospital stays that appeared in the May 2010 notice.**

For acute hospital admissions on or after **December 1, 2010**, MassHealth no longer covers acute inpatient hospital stays after the first 20 days for MassHealth members who are aged 21 years or older. This change does not apply to inpatient stays provided in a Department of Mental Health (DMH)-licensed acute psychiatric unit within a Department of Public Health (DPH)-licensed acute hospital or in a rehabilitation unit within a DPH-licensed acute hospital. The 20-day coverage limit does not apply to administrative days.

If you have both Medicare and MassHealth, and

- 1) MassHealth pays for your Medicare premiums, copays, and deductibles, and
  - 2) Medicare pays for the hospital stay described above for you,
- then MassHealth will pay its portion of the coinsurance and deductible for that hospital stay.

A hospital may **not** bill you for the portion of a hospital stay that is no longer covered by MassHealth, as long as you were eligible for MassHealth every day you were in the hospital. In that case, a hospital may bill the Health Safety Net Trust Fund for the portion of a hospital stay that is no longer covered by MassHealth.

### **Reminder about other changes to your benefits. These changes became effective July 1, 2010.**

#### **Adult Dental**

Effective July 1, 2010, dental benefits changed for all MassHealth members aged 21 and older, except for those members who have been determined by the Department of Developmental Services (DDS) to be eligible for DDS services (DDS-eligible individuals).

#### **MassHealth Members Aged 21 and Older (who are not DDS-eligible individuals)**

Effective July 1, 2010, MassHealth covers only the following dental services:

- diagnostic services (exams and X rays);
- preventive services (cleanings);
- extractions (removing teeth);
- emergency care visits; and
- some oral surgery, such as biopsies and soft-tissue surgery.

This means that, effective July 1, 2010, MassHealth no longer pays for the following services:

- restorative (fillings);
- endodontic (root canal);
- periodontic (deep scaling);
- crowns;
- dentures (full, partial, or repair); and
- surgical procedures related to full or partial dentures.

MassHealth members who are affected by these changes may access dental services through the Health Safety Net at community health centers that offer dental services. For information on the Health Safety Net, go to [www.mass.gov/healthsafetynet](http://www.mass.gov/healthsafetynet).

Your dentist may bill you for services provided after June 30, 2010, that are no longer covered by MassHealth.

### **Members with Dental Prior Authorizations**

If you got a prior authorization (PA) for services no longer covered as of July 1, 2010, your dentist must have started the procedure **before** July 1, 2010.

If your dentist started a procedure (like a root canal) that was not covered as of July 1, 2010, MassHealth still pays for the procedure, but only if it started before July 1, 2010, as noted above, and was completed by the date on which the PA expired or September 30, 2010, whichever was earlier.

**Important: These changes do not apply to MassHealth members under the age of 21 and members who are DDS-eligible individuals.**

### **Questions about Dental Coverage**

If you have questions about this change in dental benefits, call MassHealth Dental Customer Service at 1-800-207-5019 (TTY: 1-800-466-7566 for people with partial or total hearing loss). DDS-eligible individuals or their guardians may call their DDS area office with any questions.

### **Copayment Change**

On July 1, 2010, MassHealth and Health Safety Net (HSN) copays for most covered generic and over-the-counter drugs went up from \$2 to \$3, for both first-time prescriptions and refills. The copay for certain covered generic and over-the-counter drugs mainly used for diabetes, high blood pressure, and high cholesterol stayed at \$1. These drugs are called antihyperglycemics (such as metformin), antihypertensives (such as lisinopril), and antihyperlipidemics (such as simvastatin).

Other pharmacy copay rules stay the same. Some examples of the rules that are staying the same are below.

- The copay for covered brand-name drugs will stay \$3 for both first-time prescriptions and refills.
- Sometimes a copayment is not required. The rules for when a person does not have to pay a copay have not changed.
- If your prescription is covered by MassHealth and you are not able to pay a copay at the time of service, the pharmacy still must fill your prescription. However, the pharmacy can bill you later. You should not go without necessary medications because you cannot afford the copay now.
- The cap on the amount of copays you must pay within a calendar year is not changing. The total amount you can be charged for pharmacy copays within a year is still \$200.
- Copays for the Children's Medical Security Plan (CMSP) and Healthy Start have not changed.

### **Members Enrolled in a MassHealth MCO**

The MCO pharmacy copay rules are the same as for all other MassHealth members.

### **Questions**

If you have questions about copayments and are a **MassHealth member**, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

If you are enrolled in a **MassHealth MCO**, you may also contact the customer service center at the MCO.

- Boston Medical Center HealthNet Plan (BMCHP): 1-888-566-0010 (English and other languages) or 1-888-566-0012 (Spanish) (TTY: 1-866-765-0055 for people with partial or total hearing loss)
- Fallon Community Health Plan (FCHP): 1-800-341-4848 (TTY: 1-877-608-7677 for people with partial or total hearing loss)
- Health New England: 1-800-786-9999 (TTY: 1-800-439-2370 for people with partial or total hearing loss)
- Neighborhood Health Plan (NHP): 1-800-462-5449 (TTY: 1-800-655-1761 for people with partial or total hearing loss)
- Network Health (NH): 1-888-257-1985 (TTY: 1-888-391-5535 for people with partial or total hearing loss)

If you are a **Health Safety Net** patient and have questions about your copayments, call 1-877-910-2100.

### **Nonemergency Transportation**

MassHealth has changed certain nonemergency transportation benefits. These changes affect individuals currently eligible to get nonemergency transportation benefits.

Starting July 1, 2010, you are no longer able to get paid back for personal vehicle mileage costs or costs for getting your own ride when going to MassHealth-covered services. You are still able to get paid back for the cost of taking public transportation to MassHealth-covered services if the ride you take meets MassHealth requirements. If MassHealth decides that there are exceptional circumstances, you may be able to get paid back for transportation costs that are not for public transportation.

If you are currently eligible to receive nonemergency transportation benefits, you may still get a ride to MassHealth-covered services if the ride you need meets MassHealth requirements. If you need help getting to your MassHealth-covered service, you should talk to the doctor or other person who is providing the MassHealth-covered service about how to request transportation services.

### **Questions**

If you have questions about this change, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).