MassHealth Member Advisory Committee (MAC)
Meeting 9 (virtual)

June 30, 2026, from 12:00 pm to 2:00 pm

Attendance

- 11 out of 16 MAC members were in attendance
- MassHealth: Malinda Ellwood, Viveka Prakash-Zawisza, Member Services team members
- ForHealth Consulting Disability Evaluation Services (DES) team members
- UMass Chan Team: Hilary Deignan, Cassidy DiRamio, Catie Geary, Olivia O'Brien

Welcome and Housekeeping

- The next MassHealth Program Advisory Committee (MPAC) meeting is on July 13, from 10:00am to 11:30am.
    - The three elected representatives will attend on behalf of the MAC
    - The meeting is open to the public, so anyone can attend.

MAC Meeting Schedule

- At MassHealth's suggestion, members agreed to moving the next meeting to from Tuesday August 4th to Tuesday August 11 (from 12pm to 2pm (virtual)).

Meeting 9 Reflection Survey Results

- Many enjoyed meeting in person, though there were some technical challenges with the hybrid model (particularly for members participating virtually)
- Some members prefer virtual meetings only.
- Members appreciated continued discussion on the One Big Beautiful Bill Act (OB3).

Objectives for Meeting 9

1. Relationship building.
2. Review supports provided to members through MassHealth Enrollment Centers (MECs) and the MassHealth Customer Service Center (CSC).
3. Understand the role of Disability Evaluation Services (DES) in determining disability for the purposes of evaluating MassHealth eligibility.
4. Discuss MAC engagement with the broader MassHealth member community.
5. Vote on the proposed amendment to the Bylaws to extend the current MAC term

Relationship Building

MAC members formed pairs and asked each other ice-breaker questions.

MassHealth Member Services - Review

MECs play a critical role in supporting applicants and members throughout the MassHealth eligibility process.

- There are seven regional MECs – Charlestown, Chelsea, Quincy, Springfield, Taunton, Tewksbury, and Worcester.
- Each MEC has a physical location and offers in-person assistance (walk-in or virtual by appointment) as well as reasonable accommodations and other supports including interpreter services for over 150 languages, Video Remote Interpreting (VRI) and Assistive Listening Devices (ALDs).

MassHealth Customer Service is the main call center for members, (800) 841-2900.

- Agents can provide assistance on most MassHealth issues, including eligibility, updating and sharing information, health plan support, and accessing care.
- Customer Service has bilingual agents in Spanish, Portuguese, and Haitian Creole in addition to offering telephonic interpreter services for over 150 languages. Members who are Deaf or Hard of Hearing can use 711.

MAC Feedback

- Live chat member services options would be helpful for members of the Deaf and Hard of Hearing community.

Disability Evaluation Services (DES)

Individuals may be eligible for MassHealth based on several factors, including disability. The MassHealth application includes a question about injury, illness, or disability expected to last longer than 12 months.

- Answering “yes” automatically triggers an internal electronic request to verify the member’s disability status through the Social Security Administration (SSA) or the Massachusetts Commission for the Blind (MCB).
    - If MassHealth is able to verify electronically, then MassHealth includes disability as a factor when determining eligibility.

- If MassHealth is unable to verify disability status electronically, applicants must complete a disability supplement form based on age: (Child Supplement for applicants under age 18, Adult Supplement for ages 18+)
    - In the meantime, MassHealth reviews the applicant's eligibility based on other factors

Completed disability supplement forms are reviewed by Disability Evaluation Services (DES). DES is part of ForHealth Consulting, a division of the University of Massachusetts Chan Medical School.

- DES reviews the supplement forms and conducts both medical and vocational reviews by gathering information and reviewing medical history, and applies the same criteria for determining disability as the Social Security Administration (SSA)
- DES completes their clinical eligibility review and sends the determination back to MassHealth.
- A determination by DES that an individual meets the criteria for disability does not guarantee that an individual will be eligible for MassHealth.
- Only MassHealth can make the final decision on MassHealth eligibility:
    - If an individual is determined by DES to meet disability standards, MassHealth then includes disability as part of its eligibility determination.
    - If an individual is determined by DES not to meet disability standards, the individual may appeal this decision through the MassHealth Board of Hearings (BOH)
        - In the meantime, MassHealth will determine eligibility based on other factors.
        - An individual who was determined not to meet disability standards may still be eligible for MassHealth based on other criteria.

DES and MassHealth work together to assist applicants and members through the verification process. Each play separate roles and have access to different systems.

- MassHealth is the only entity that can confirm if a member is ultimately approved or denied coverage based on disability.
    - All MEC staff are trained in disability-related eligibility issues and are able to assist in the process: MassHealth Enrollment Centers (MECs) | Mass.gov
    - MassHealth Customer Service is also available to answer questions about coverage or eligibility: (800) 841-2900
- DES can only assist members with the verification process, such as questions about filling out the supplement and confirming receipt of materials

    - Filling out the supplement: staff at DES are available by telephone to help members with completing the disability supplement and medical releases: (800) 888-3420
    - DES staff are not able to answer questions about MassHealth eligibility, coverage type, or MassHealth notices or requests for information

There is always a no wrong-door policy: if a particular entity is unable to answer your questions, you will be re-routed to the correct place for help.

Discussion

MAC members found the presentation to be informative and helpful (both for themselves and their communities).

MAC Member Questions on the DES Process

- What DES looks for in medical records when determining disability:
    - DES uses SSA standards: they review medical documentation for how a medical or behavioral health condition affects day-to-day functioning and perform a vocational review with vocational rehab specialists to determine what individuals can do in a work capacity, even if it is different from work they have done in the past.
- Most common reasons adult supplement forms are denied:
    - DES reviews a variety of factors including education, age, and functional status: cases are denied because members do not meet the SSA threshold for disability.
        - For example, the vocational review can result in finding that a member is able to work, even if it is outside what they have done in the past.
        - Approximately14% of DES applications are denied.
    - Delays in getting the appropriate medical records can also create challenges in the review process:
        - Some members do not initially complete the medical releases that enable DES to get the required documentation from their medical providers, which causes delays in the process.
            - All forms are available in English, Haitian Creole, Portuguese (Brazilian), Simplified Chinese, Vietnamese, and Spanish, plus additional languages upon request, but members whose first language is not English may have unique challenges with completing the forms.
            - Any applicant can receive assistance with forms at a MEC.

        - Once the medical releases are completed, providers may not always submit the required information timely.
            - MassHealth recently released All-Provider Bulletin #416, confirming that providers are legally required to respond to DES records requests
        - If an individual is found not to meet disability criteria, they may file an appeal and can provide additional documentation for DES to review during this process.
- Clarification on renewals:
    - MassHealth explained that the required renewals for MassHealth (e.g., annual updates regarding income and other factors), are separate from any required recertification for disability status through DES.
    - Members must ensure they follow required action steps or requests for information from both MassHealth and DES in accordance with their specific deadlines.
- Members asked about how they could confirm their disability status with respect to being exempt from new federal work and community engagement requirements:
    - MassHealth anticipates providing further guidance for how individuals with disabilities may be able to confirm exemption from the new work and community engagement requirements in the future.
    - MassHealth will confirm whether disability status may be visible through the online member portal (My Services)
- MassHealth will follow up with the MAC in response to general questions about how (if at all) the DES process might be impacted by federal policy changes included in the One Big Beautiful Bill Act (OB3).

MAC Member Feedback on DES Processes

MAC members shared the following experiences and feedback on DES processes:

- MAC members suggested that the high-level disability determination process flow chart shared by DES at this meeting be made available online for the public, as it was very helpful.
- The return envelopes included with disability supplement form mailings should be large enough to fit all the required documentation.
    - The current return envelopes are regular mail size and not large enough to accommodate the level of paperwork required to be returned by applicants.
    - DES noted that members may also send materials via email to: DESMailRoomTeam@umassmed.edu.

        - DES accepts all documentation, including medical records, through this secure email address.
- Relying on the mail system creates shorter turnaround times, creating challenges for members working to get required forms submitted by the deadlines.
    - By the time members receive notices or requests, much of the timeframe for completion has often already passed.
    - DES confirmed that ten days is the turnaround time for all documentation, but DES will process documentation even if it is received after its due date.
- Disability Supplement forms should be available to complete virtually.
    - [Since this MAC meeting] The disability supplement and medical releases can now be submitted virtually at: Apply for disability with MassHealth online | Mass.gov.
- DES should accept stamp signatures, by, e.g., adding a witness signature line
    - Some people with disabilities rely on signature stamps, but these are not currently accepted by DES, creating hardships for individuals with disabilities who cannot sign themselves. (MassHealth's most recent signature policy is outlined in All-Provider Bulletin #385 (December 2023).
    - One member suggested that the proposed Supported Decision Bill would be helpful for this issue if passed into law.
    - MassHealth and DES will follow up on this question.
- It can be frustrating for some members who have been found disabled by SSA and yet are still required to go through the DES process, even when, e.g. members submit a letter directly from SSA to document their income.
    - MassHealth clarified that MassHealth and DES always attempt to verify disability electronically through SSA, but if this is unsuccessful, an individual may submit an Award Approval Letter from SSA as verification of disability.
    - MassHealth will be releasing an Eligibility Operations Memo (EOM) to help address confusion on this issue.
        - Note: MassHealth released this EOM in July 2026: "Accepting Paper Verification of Disability in the Absence of Electronic Data"
        - EOMs are informational policy memos that communicate procedures, reminders, and other information to MassHealth staff. These memos are available to the public on the website at: Eligibility Operations Memos by Year | Mass.gov
- Some members expressed confusion around return dates for DES materials in relation to potential coverage end dates:

- MassHealth confirmed that the system deadline is designed to match the member's disability review due date, which is 60 days, or 70 days for mailers, before updating the member's coverage in the system.
- Any members who experience challenges with respect to losing coverage due to discrepancies in these dates should contact Customer Service.

MAC Engagement with the Broader MassHealth Member Community

As discussed at the last MAC Meeting, a smaller group of MAC members met earlier in June to develop preliminary goals and ideas for the MAC's engagement with the broader MassHealth membership.

Proposed preliminary goals:

1. Create sustainable pathways to help proactively identify issues for the MAC to discuss with MassHealth
2. Promote information about the work of the MAC to help strengthen trust between MassHealth and members, generate interest for future applicants, and to promote the importance of member engagement more generally
3. Educate other members about MassHealth services and connect them to clear and accurate information
4. Help connect people with individual MassHealth challenges to supportive resources

The subgroup proposes that the MAC begin by looking for existing structures for understanding issues from the broader community, such as connecting with other MassHealth stakeholder groups. In particular, the MAC should:

1. Invite My Ombudsman to present to the MAC at an upcoming meeting
2. Outreach to the One Care Implementation Council and the Senior Care Options (SCO) Advisory Council
3. Continue to work on MAC "one-pager," to include an overview of the MAC, a reference to the MAC website, and resources for members who need help with individual challenges (e.g., My Ombudsman)
4. Continue relationship building to emphasize the importance of member engagement and explore options for:
    - MAC members to present at an internal MassHealth staff meeting
    - Sharing regular updates on MAC activities with the MPAC

Discussion

MAC members were in favor of the proposed goals and next steps, particularly:

- Creating more awareness about the MAC to let MassHealth members know that there is a group of consumers working directly with MassHealth.
- Creating MAC promotional materials that will be easy to access and understand.
- Inviting My Ombudsman to an upcoming MAC meeting.

Vote to Amend the MAC Bylaws

Members voted on amending the Bylaws to extend the current MAC term of service from 2 years to 3 years. The amendment passed by majority: 9 yes, 0 no, 0 unsure, and 2 did not vote. MassHealth will also connect with members who were not in attendance to discuss.

If any MAC members do not want to continue for another year, their term will be considered complete at the end of December 2026.

Wrap Up and Closing

Next Steps

MassHealth will:

- Send out meeting notes for review
- Confirm Meeting #10 will be moved to August 11th
- Send out the list of DES resources discussed at today's meeting
- Invite My Ombudsman to a subsequent MAC meeting
- Work with the subgroup on a draft MAC one-pager
- Follow up with the One Care Implementation Council and SCO-AC re: connecting with the MAC
- Outreach MAC members not in attendance on the updated Bylaws
- Continue tracking goals, agenda suggestions, and parking lot items

MAC members will:

- Complete the Meeting 9 Reflection Survey
- Send MassHealth any additional questions or feedback for the DES team
- Review the meeting notes

Parking Lot: No items were added to the parking lot.