

MassHealth Overview in American Sign Language

Welcome to MassHealth. This video provides an overview of the various healthcare insurance options available to residents of Massachusetts.

While commercial carriers account for the largest percentage of health insurance providers, the Commonwealth public programs have had dramatic membership increases since the 2014 implementation of the federal Affordable Care Act.

MassHealth is divided into two large parts: Insurance coverage for individuals under 65, and insurance coverage for individuals over 65. It is important that you refer to the correct Member Booklet when applying for coverage. In general, age is a reliable method for determining which Member Booklet for an application is appropriate. There are a few exceptions.

The Under 65 Member Booklet should also be used for parents or related caretakers who have children younger than 19 under their care, no matter how old the parent or related caretaker is.

Any individual requiring long-term care services, including disabled children, should apply using the Over 65 Member Booklet, also called the Senior Guide to Healthcare Coverage. Both of these booklets are available through hospitals, health centers, and by contacting MassHealth directly.

MassHealth has a Disability Accommodation Ombudsman who can be contacted by relay operator at (617) 847-3468 or by TTY at (617) 847-3788. For assistance via e-mail, contact masshealthhelp@ehs.state.ma.us.

Applicants Under Age 65

Your family's income and your citizenship status are used to determine which MassHealth coverage type you are eligible for. Even if your household already has health insurance, you may be eligible for some type of assistance if your income is low or moderate. The application is designed to determine the highest level health insurance benefit that you are eligible for, given your own unique circumstances. MassHealth uses state and federal rules when it determines if you or your household members are eligible for either MassHealth or Connector Care Plan and premium tax credits.

Connector Care Plans which are available through the Health Connector are a set of health insurance plans with lower monthly premiums and lower out-of-pocket costs. Premium tax credits are a way to help lower the cost of your insurance premiums.

MassHealth Coverage Types

There are six MassHealth coverage types, with the most comprehensive coverage being MassHealth Standard. You may be eligible for MassHealth Standard if you are:

- Pregnant
- Under age 19
- A young adult aged 19 or 20
- A parent or caretaker relative living with children under age 19
- Under age 65 with breast or cervical cancer
- Under age 65 and are HIV positive
- Certain individuals up to age 26 who were formerly in foster care
- Disabled according to the standards set by the federal and state law.

Depending on your circumstances and citizenship or immigration status, eligibility for MassHealth Standard is determined by income ranging between 133 percent to 250 percent of the federal poverty level.

Detailed information about income, including the definition of Modified Adjusted Gross Income, or MAGI, is included in the Member Booklet. MassHealth Standard covers the following. There may be some limits.

- Inpatient hospital services
- Outpatient services
- Dental
- Family planning
- X-rays
- Therapies

- Eyeglasses
- Hearing aids
- Pharmacy
- Behavioral health
- Well child screenings
- Home health services
- Medical transportation.

See the Member Booklet for further information about benefits.

A coverage type similar to MassHealth Standard is MassHealth Common Health, which is designed for disabled adults and children under the age of 65. Applicants who do not qualify for MassHealth Standard or Common Health because of income or citizenship status may be eligible for:

- MassHealth CarePlus
- Family Assistance
- Limited, or
- MassHealth Small Business Employee Premium Assistance.

There is additional coverage available for children who do not qualify for MassHealth programs through the Children's Medical Security Plan.

The Health Safety Net may be eligible for adults who are insured or underinsured, applicants over age 65 and individuals requiring long-term care services in the community. The primary difference for individuals applying for MassHealth over the age of 65 is that assets are included in the determination process. Assets may include bank savings and the value of the things you own. There is a detailed Income and Asset Chart in the Over 65 Member Booklet, also called the Senior Guide to Health Care Coverage.

Additionally, the income limit for applicants over the age of 65 is lower than the income limits for applicants under 65 years of age. Depending on your individual circumstances, while you continue to live in the community, you may be eligible for MassHealth Standard, Family Assistance, Limited, or Health Safety Net.

MassHealth Family Assistance is available to seniors who meet the income and asset rules for Standard but have an immigration status that disqualifies them from Standard. Some immigration statuses only allow for emergency services under MassHealth Limited. If your income or assets are too high, you may still be eligible for help paying for medical and related costs through a buy-in program.

For persons living at home who need assistance to remain in the community, there are special programs to help. For certain severely disabled children, the Kaileigh Mulligan Program determines eligibility without counting parental income and assets.

For elders who are certified as eligible for nursing home care but who wish to remain in the community, there is PACE, Program For All-Inclusive Care for the Elderly, also known as the Elder Service Plan, ESP in certain areas, or the Home and Community-Based Services Waivers for certain frail individuals.

For Persons in or Waiting to Go into Long-term Care Facilities

A long-term care facility is a type of institution that includes licensed nursing facilities, chronic disease and rehabilitation hospitals, state hospitals and state schools specifically designated as long-term care facilities, and intermediate care centers for the intellectually disabled. Qualification for MassHealth Standard coverage is required for payment of long-term care services at a facility.

In general, your assets are limited to two thousand dollars (\$2,000) with certain exclusions, if you have a spouse or child still living in the community.

MassHealth may look back over the last five years, or sixty (60) months, prior to admission to insure that assets have not been improperly transferred. MassHealth will not place a lien on a property or require the sale of a home with a spouse, child, or disabled adult child still living there.

Best Ways to Get Further Information

MassHealth has installed VRI, or Video Remote Interpreting systems, in all of their MassHealth enrollment centers, including Chelsea, Tewksbury, Taunton, and Springfield locations. These sites are available to accommodate walk-ins who wish to apply for ask further questions about coverage.

If you prefer a live ASL interpreter, arrangements must be made in advance, with at least two weeks' notice, by contacting the MassHealth Disability Accommodations Ombudsman, who can be reached by relay operator at (617) 847-3468 or by TTY at (617) 847-3788, or via e-mail at masshealthhelp@ehs.state.ma.us.

The MassHealth Enrollment Center can be reached via relay at (888) 665-9993 and via TTY at (888) 665-9997.

MassHealth Customer Service can also be reached via a relay operator at (800) 841-2900 or TTY at (800) 497-4648.