



Q&A from Informational Webinar on MassHealth Redeterminations for MA Health Care Training Forum

This document contains questions that were raised by attendees of both sessions of a MassHealth webinar focused on how health care organizations and community-based agencies can support members with redeterminations in the upcoming year. The recorded webinar is available at <https://www.mass.gov/info-details/masshealth-redeterminations-webinars-and-videos> and you can find more information and helpful resources at www.mass.gov/masshealthrenew.

Event Date(s) & Time(s): March 23, 2023 and March 28, 2023

Why do Long-Term Care (LTC) facilities have less days to respond than others?

- MassHealth is in the process of increasing the amount of time that member in LTC facilities have to respond to 45 days.

Will MassHealth extend the hours of customer service?

- MassHealth continues to explore extending Customer Service hours. Additionally, MassHealth is increasing operational staffing capacity for its contact center, enrollment centers, and related renewal and hearing processes. A part of this has included increasing frontline customer service agents from 300 to almost 600 to support the forecasted increase in service demand.
- MassHealth has also implemented self-service on their Customer Service phone line, which enables members to understand what documents are outstanding without having to speak to an agent. To access self-service, members may call MassHealth Customer Service at (800)-841-2900 (TDD/TTY: 711).

How can we find out what plans have changed for the 2023 plan year?

- New primary care providers and health plans went live on April 1, 2023. Some MassHealth health plans will add new primary care providers (PCPs). To learn more, go to <https://masshealth.ehs.state.ma.us/providerdirectory/>.
- You can also learn about new health plan choices in your area at <https://masshealth.ehs.state.ma.us/providerdirectory/>. Or you can read the [MassHealth Enrollment Guide](#). Please note that the upcoming cycle of renewals will not change coverage rules for any MassHealth services.

If a member updates their case prior to their renewal date, and it updates their renewal date in the system, can they rely on that new renewal date in the system? Or should they still keep an eye out for a blue envelope?

- If a member completes a full renewal online, then they can rely on the updated date in the system as the date for their next renewal. Even if this is the case, members should always look out for important mail from the Commonwealth of Massachusetts.



You noted that people over 65 can call MassHealth regarding their renewals. Does this mean MassHealth can complete renewals over the phone or are they still unable to assist these members over the phone?

- Yes, members 65+ are able to complete a renewal over the phone by calling MassHealth Customer Service at (800) 841-2900 (TDD/TTY: 711).

What if a SACA application was sent to Taunton?

- Members should send their SACA applications to the following address:
MassHealth Enrollment Center
PO Box 290794
Charlestown, MA 02129
- If members sent their SACA to Taunton, that is okay; MassHealth will make sure that it gets sent to right place.

If a member updates HIX after 4/1, but before they received their blue envelope, will the benefit change or will they stay protected?

- After 4/1, members' benefit may change if they report new eligibility information on their HIX account before their blue envelope arrives. Information that may affect a members' eligibility includes things like income, disability status, and household composition.
 - More information about factors which may impact eligibility can be found here: <https://www.mass.gov/service-details/eligibility-for-health-care-benefits-for-masshealth-the-health-safety-net-and-childrens-medical-security-plan>
 - Generally, members can call MassHealth Customer Service at 800-841-2900 (TDD/TTY: 711) to update their contact information without impacting their eligibility.
 - In some instances, such as when a member has recently turned 19, eligibility may be impacted when contact information is updated. If members have any questions or would like more information, they can call MassHealth Customer Service.

Will members be able to self-attest to income after the protection has been lifted? I was told by a MassHealth Customer Service Representative (CSR) that it is going away.

- Members will no longer be able to self-attest to income once the protection has been lifted. However, MassHealth will continue to accept self-attestation for the exceptions defined in the MassHealth regulations. Examples of acceptable self-attestation under these regulations include: pregnancy, breast and cervical cancer treatment, medical frailty, and HIV+. Please also note there are affidavits available online that may be used as acceptable proofs for verification of eligibility.

Will a member's MassHealth redetermination require them to renew their disability determination?



- Please note that the redetermination process is separate from the disability determination process.
- All MassHealth members will need to have their MassHealth coverage renewed between April 2023 and April 2024 as part of redeterminations. Certain members who have disability determinations may have their MassHealth coverage auto-renewed.
- People may or may not be required to renew their disability determination this year based on which agency completes their disability determination.
 - If their disability status is determined by the Social Security Administration (SSA), they must renew their disability in compliance with SSA rules.
 - If their disability status is determined by the Disability Evaluation Services (DES) at UMass Medical School on behalf of MassHealth, the timing of their re-verification will depend on several factors. If a re-verification is required, MassHealth will reach out to the member via mail.
- Individuals who self-attested to their disability or received administrative approval due to Public Health Emergency flexibilities may be re-verified as early as April.
- Individuals who were found disabled through the regular DES process may need to re-verify their disability through a Continuous Disability Review starting as early as July 2023.

In the past (pre-COVID days), members who were auto-renewed received an approval notice and a prepopulated packet to complete only if they had changes to report. Will this be the case post 4/1? If so, we're concerned that the pre-population will confuse members and prompt them to take additional action that might not be needed.

- Members who are auto-renewed will receive an auto-renewal notice but will not receive a prepopulated form unless they request it from MassHealth.

Can any member e-submit, or is it only for members 65 and older?

- E-submission is an option available for many members who complete an Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA) renewal form, including some members who complete the SACA and are under age 65.
 - If members receive an e-submission link on the second page of their SACA renewal notice, members can e-submit.
- Members who do not complete a SACA application also have options to complete their renewals online. More information about the many options to complete a MassHealth renewal can be found here <https://www.mass.gov/how-to/renew-your-masshealth-coverage>

Will there be retroactive terminations with payment recoupments?

- No, MassHealth does not terminate eligibility retroactively. Members have at least 14 days after receiving a termination notice before their benefits stop.

If a person is on one renewal cycle when under 65 and turns 65 during the period, do they have to complete a new renewal cycle after turning 65? For example, if they were previously



renewed in March of each year but turn 65 in September, does their renewal cycle now run September to September?

- Yes, members turning 65 need to complete an Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA-2) to see if they still qualify for MassHealth. MassHealth sends a SACA-2 redetermination packet to the member when they are 64 years and 10 months, or 2 months before their birth date. Their renewal cycle will be 12 months from when they submit the SACA-2 redetermination.

Some members will lose coverage due to ineligibility and will enroll in a Health Connector Plan. Will there be a gap in coverage before their Connector plan is active? In the past, members were only eligible for the Health Safety Net (HSN) after 90 days.

- Losing MassHealth coverage is a Qualifying Life Event, which allows members to enroll in a plan through the Health Connector outside of the regular Open Enrollment Period and avoid gaps in health coverage. Additionally, individuals who lose MassHealth and transition to the Health Connector will have the HSN for 90 days. The current MassHealth closure notices include information about members' MassHealth coverage end date and enrollment through the Health Connector to help prevent gaps in coverage.
- Individuals who transition to the Health Connector may still experience a gap in coverage if they do not enroll in a health plan within 60 days of the Qualifying Life Event. It is important to read all notices and act promptly to avoid any delays.