

## Commonwealth of Massachusetts Executive Office of Health and Human Services Division of Medical Assistance

600 Washington Street Boston, MA 02111 www.mass.gov/dma



MassHealth Eligibility Letter 118 January 1, 2004

**TO:** MassHealth Staff

FROM: Beth Waldman, Acting Commissioner Beth Waldman

**RE:** Revision to MassHealth Breast and Cervical Cancer Treatment Program

In December 2003, MassHealth issued Eligibility Letter 114, announcing the expansion of benefits to women diagnosed with breast or cervical cancer. At that time, the revisions to the member regulations allowed a woman who was not eligible for MassHealth Standard because of insufficient citizenship or immigration status to be eligible for MassHealth Limited.

In late December 2003, after the member regulations had been filed with the Secretary of State, MassHealth was notified by the Centers for Medicare and Medicaid Services that women diagnosed with breast or cervical cancer but who have insufficient citizenship or immigration status, will not be eligible for MassHealth Limited.

Revisions were made to the member regulations to establish this limitation. Because the original Breast and Cervical Cancer Treatment Program regulations were effective January 1, 2004, these conforming regulations were filed as an emergency, effective January 1, 2004.

#### MANUAL UPKEEP

| <u>Insert</u>    | Remove           | Trans. By |
|------------------|------------------|-----------|
| 504.002 (3 of 3) | 504.002 (3 of 3) | E.L. 109  |
| 505.008 (1 of 2) | 505.008 (1 of 2) | E.L. 109  |

#### 130 CMR: DIVISION OF MEDICAL ASSISTANCE

Trans. by E.L. 118

# MASSHEALTH CITIZENSHIP AND IMMIGRATION

CITIZENSHIP AND IMMIGRATION Chapter 504
Rev. 01/01/04 (3 of 3) Page 504.002

(c) MassHealth Family Assistance, if they are children under age 19 or persons under age 19 who are HIV positive, who meet the categorical requirements and financial standards of Family Assistance, as described at 130 CMR 505.005. The Division will not pay the copayments, coinsurance, and deductibles described in 130 CMR 505.005(B)(6) for children who receive premium assistance; or

- (d) MassHealth Limited, if they are adults who are parents, pregnant, or disabled and meet the categorical requirements and financial standards of MassHealth Standard, as described in 130 CMR 505.002(D), (E), and (F).
- (3) Nonqualified aliens may only receive MassHealth Limited if otherwise eligible for MassHealth Standard. This does not include women eligible for MassHealth Standard based on 130 CMR 505.002(H).
- (4) Aliens with special status are not eligible for MassHealth Basic or Essential.

#### (G) Verification of Immigration Status.

- (1) A determination of eligibility is made as of the date the MBR and all required information, except verification of immigration status, is received by the Division.
- (2) The Division submits the names of qualified aliens to the DHS for confirmation of immigration status.
- (3) The Division requests verification of immigration status subsequent to the eligibility determination from:
  - (a) qualified aliens who did not submit verification of their immigration status with the MBR, and for whom the DHS has been unable to confirm their status, as described at 130 CMR 504.002(G)(2); and
  - (b) aliens with special status who did not submit verification of their immigration status with the MBR.
- (4) Aliens who fail to submit verification of their immigration status, as described in 130 CMR 504.002(G)(3), within 60 days of the Division's Request for Information will subsequently be:
  - (a) eligible only for MassHealth Limited if they meet the categorical requirements and financial standards of MassHealth Standard; or
  - (b) ineligible for any MassHealth coverage type if not otherwise eligible for MassHealth Standard.

#### 130 CMR: DIVISION OF MEDICAL ASSISTANCE

Trans. by E.L. 118

### **MASSHEALTH** COVERAGE TYPES

Chapter Rev. 01/01/04 (1 of 2) **Page** 505.008

(D) Funding. State legislation does not provide funding for MassHealth Essential after September 30, 2004. Essential benefits will not be provided after this date unless a legislative extension is authorized.

505

#### 505.008: MassHealth Limited

#### (A) Eligibility Requirements.

- (1) MassHealth Limited is available to persons who meet the financial and categorical requirements of MassHealth Standard, except women described at 130 CMR 505.002(H), and are:
  - (a) nonqualified aliens described in 130 CMR 504.002(E) (nonqualified aliens are not required to furnish or apply for a social security number);
  - (b) aliens with special status described in 130 CMR 504.002(D) who are under age 19 and are eligible for premium assistance under MassHealth Family Assistance; or
  - (c) aliens with special status who are adults described in 130 CMR 504.002(F)(2)(d).
- (2) Persons eligible for Limited coverage are eligible for medical benefits as described in 130 CMR 450.105(G). These aliens are eligible for medical benefits under Limited only to the extent that such benefits are not covered by their health insurance.
- (3) Aliens lawfully admitted for a temporary purpose such as students, visitors, and diplomats are eligible for Limited coverage if they meet all other eligibility requirements including residence.
- (4) A child born to a woman who was receiving MassHealth Limited on the date of the child's birth is automatically eligible for MassHealth Standard for one year provided the child continues to live with the mother.

#### (B) Medical Coverage Date.

(1) The medical coverage date for MassHealth Limited begins on the 10<sup>th</sup> day before the date a Medical Benefit Request is received at any MassHealth Enrollment Center or received by a Division outreach worker at a designated outreach site, if all required verifications, including a completed disability supplement, have been received within 60 days of the date of the Request for Information.