

Status of Administration’s MassHealth reform proposals

Original proposal made in CY2017	Included in FY19 Budget
Shift non-disabled adults >100% FPL to ConnectorCare coverage (requires state law + federal waiver)	Modified to ensure coverage on Connector is comparable to MassHealth (expanded dental benefit, comparable cost sharing, \$0 premium option). <i>see next page and separate handout for details</i>
Adopt closed formulary with preferred and covered drugs, similar to commercial and Medicare plans (requires state law + federal waiver)	Modified to permit new negotiation/ transparency tools, add further consumer protections. <i>see separate handout for details</i>
Procure specialty pharmacy network (requires federal waiver)	Included (does not require state law)
Reintroduce employer reporting on ESI availability for premium assistance/ ESI gate (HIRD form) <i>(requires state law)</i>	Passed in 2017 - implementation underway
Implement eligibility “gate” for non-disabled adults with access to affordable employer sponsored insurance <i>(requires state law + federal waiver)</i>	Not included
Shift non-disabled parents and caretakers <100% FPL from MassHealth Standard to CarePlus <i>(requires federal waiver)</i>	Not included
Eliminate coverage of non-emergency medical transportation in MassHealth CarePlus <i>(requires federal waiver)</i>	Not included
Eliminate redundant MassHealth Limited coverage for individuals eligible for ConnectorCare <i>(requires state law + federal waiver)</i>	Not included

The Administration has updated its proposal to ensure comparable coverage for non-disabled adults shifting from MassHealth to Connector

Original proposal (June 2017)

Updated proposal (September 2017)

Population

Transitioning population:

- Non-disabled adults 100-138% FPL,* including:
 - 100k parents/caretakers
 - 40k “ACA expansion” childless adults

Exempt populations remaining in MassHealth:

- Disabled individuals
- Pregnant women
- Members with HIV, breast or cervical cancer

- No change

- **Additional exempt population:** Veterans with access to federal veterans’ health coverage that would preclude access to Health Connector subsidies

Cost Sharing

Transitioning members continue to have access to:

- At least one \$0 premium plan option
- \$0 deductibles for all plans

Transitioning members would have higher copays:

- Connector copays averaging <\$200/year, out-of-pocket max capped at \$1250/ individual, vs. nominal copays in MassHealth (\$250 out-of-pocket max for prescription drugs)

- No change to premiums or deductibles

- **Modified: Connector copays reduced to comparable with MassHealth**

- ConnectorCare “Plan Type 1” income threshold increases from 100% FPL to 138% FPL, encompassing transitioning population
- Plan Type 1 copays mirror MassHealth’s

Covered Benefits

Transitioning members continue to have access to comprehensive coverage for:

- Medical services
- Behavioral health services
- Prescription drugs

Coverage differences include:

- MassHealth covers dental and non-emergency medical transportation; Connector plans do not

- **New Connector covered benefit: Dental**

- Dental will be provided for ConnectorCare Plan Type 1 members (0-138% FPL)
- Transitioning population will continue to have dental coverage
- **30k current Connector members will gain access to dental coverage** (lawfully present immigrants)

The updated proposal preserves comparable coverage for the transitioning population while enhancing coverage for current ConnectorCare enrollees