



Learning Series

Massachusetts HealthCare Training Forum (MTF)

July 2019

MA Health Care Learning Series

The MA Health Care Learning Series provides regular updates and presentations from Health Connector and MassHealth staff, to educate those who help Massachusetts residents in applying, getting and keeping their health coverage through MassHealth, the Health Connector and Health Safety Net via MAhealthconnector.org.

Agenda

- **Systems Updates for MAhealthconnector.org**
 - New Look for the Online Application, Mobile Compatibility
 - Document Upload
 - Updates to Report a Change functionality
 - Disability Status Indicator
 - ARDs
 - Immigration Tool Tips

New Look for the Online Application

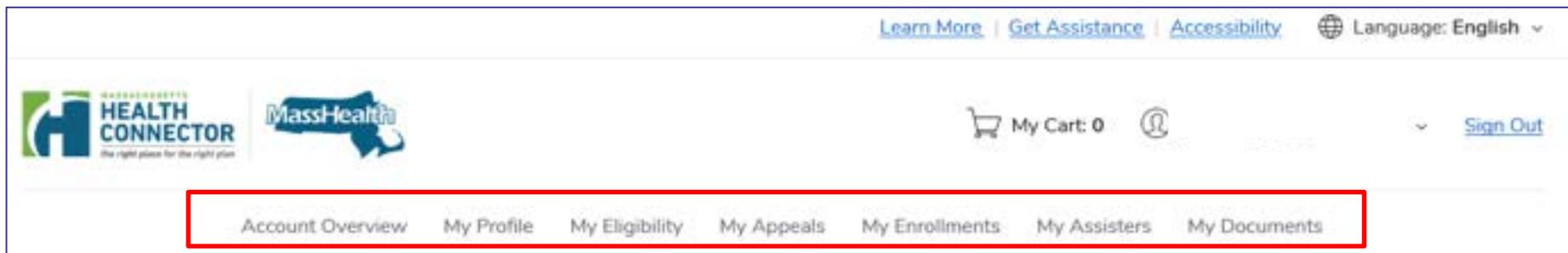
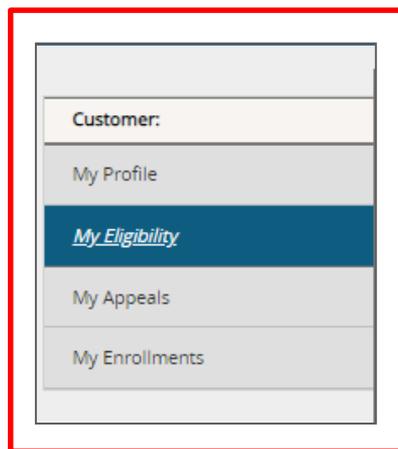


- Updated look to the online application
 - Our online application will have an updated and more modern appearance
 - No application information or questions are changing. All of the same questions will continue to appear and be required as they are today
 - You will notice changes in the way information is displayed
 - For example, the tabs on the left hand side of the screen will now appear as tabs at the top of the page

New Look for the Online Application



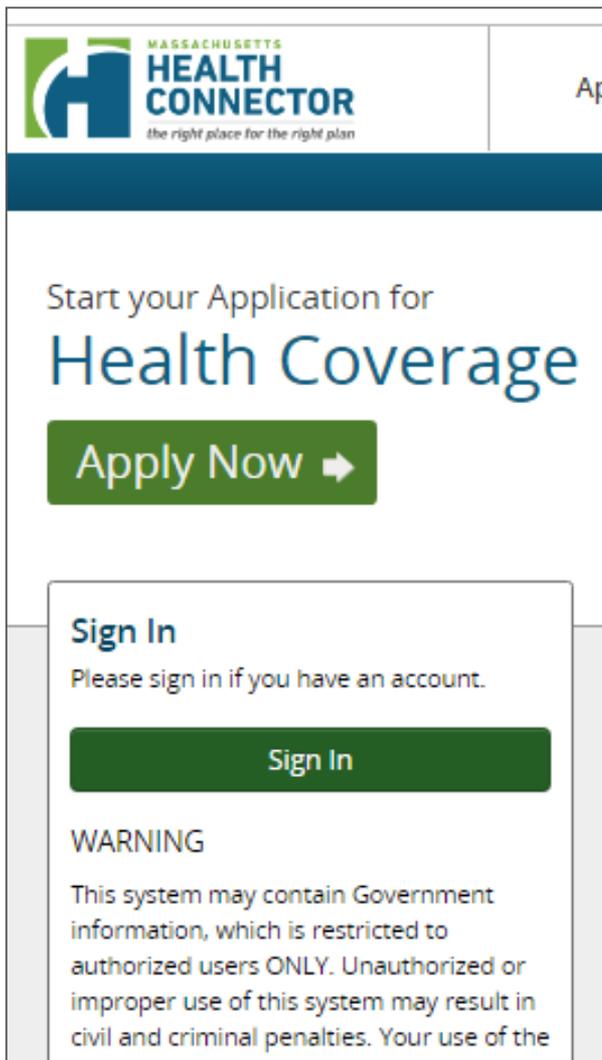
Currently, tabs are on the left



Soon, tabs will be across the top



New Look for the Online Application



MASSACHUSETTS HEALTH CONNECTOR
the right place for the right plan

Ap

Start your Application for Health Coverage

Apply Now →

Sign In
Please sign in if you have an account.

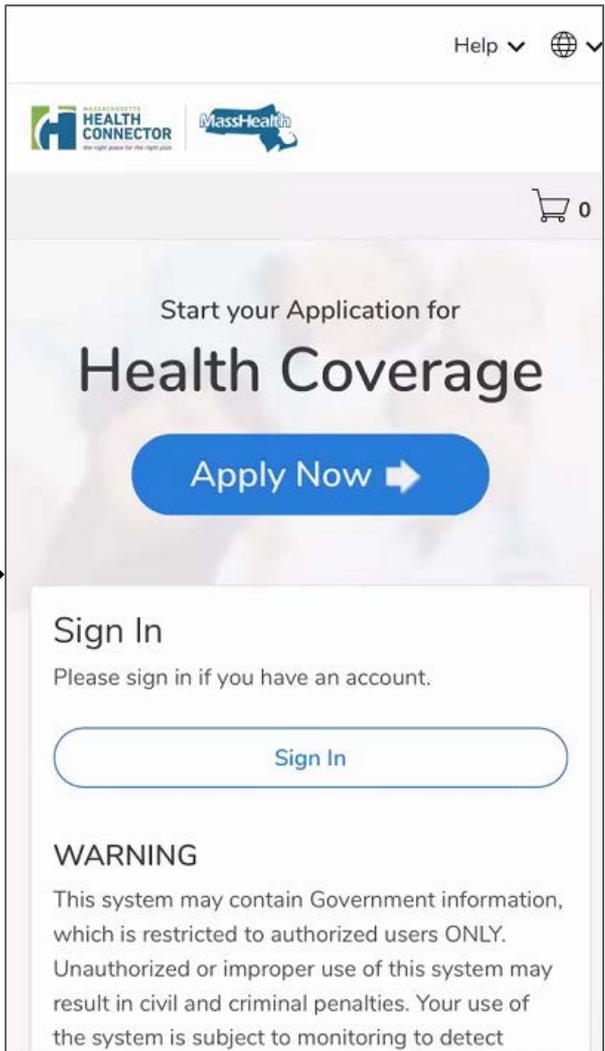
Sign In

WARNING
This system may contain Government information, which is restricted to authorized users ONLY. Unauthorized or improper use of this system may result in civil and criminal penalties. Your use of the

Current Sign In Page



Sign In Page for Mobile Access (coming soon)



Help ▾ | [Globe icon] ▾

MASSACHUSETTS HEALTH CONNECTOR | MassHealth

0

Start your Application for Health Coverage

Apply Now →

Sign In
Please sign in if you have an account.

Sign In

WARNING
This system may contain Government information, which is restricted to authorized users ONLY. Unauthorized or improper use of this system may result in civil and criminal penalties. Your use of the system is subject to monitoring to detect

Document Upload



- Individuals and Assisters will be able to upload documents directly to a member's online application
 - There will be a new tab at the top of the page called “My Documents” where individuals and assisters can upload documents for RFIs and submit other required forms directly to MassHealth and the Health Connector
 - Members can still submit documents via paper or fax. This features provides an additional option for submitting required documents
 - More detailed information about how to upload documents will be sent in an upcoming Assister Job Aid



Document Upload

Language: English ▼ [Learn More](#) | [Get Assistance](#) | [Accessibility](#) | [Contact](#)

  My Cart: 0 🔔 [Sign Out](#)

[Account Overview](#) | [My Profile](#) | [My Eligibility](#) | [My Appeals](#) | [My Enrollments](#) | [My Assisters](#) | **My Documents**

Manage Documents

[Upload Documents](#)

Filter By: [Document Description](#) | [Uploaded By](#) | [Uploaded On](#) | [Status](#)

23 Documents Found | Show: 10 ▼ | [Documents Required](#)

Document Description	Uploaded By	Uploaded On	Status	
Proof of SSN		07/27/2018 02:45AM EDT	Uploaded	⋮
Proof of SSN		07/23/2018 04:45AM EDT	Uploaded	⋮

Updates to Report a Change functionality



- Report a Change Navigation
 - Updates will streamline the process of reporting changes by allowing users to move through the specific screens based on the requested change(s)
- Applying/Not Applying
 - Applicants and members will now be able to change their status to either “applying” or “not applying” by using the report a change function online
 - Individuals and Assisters can change a member from applying to not applying or from not applying to applying by reporting a change

Updates to Report a Change functionality



[Account Overview](#) [My Profile](#) [My Eligibility](#) [My Appeals](#) [My Enrollments](#) [My Assistors](#) [My Documents](#)

Change Your Information

WARNING

To change your date of birth or Social Security number, call Health Connector Customer Service at 1-877-MA-ENROLL (1-877-623-6765), TTY 1-877-623-7773.

To make changes to your application, please check the box for all options that apply.

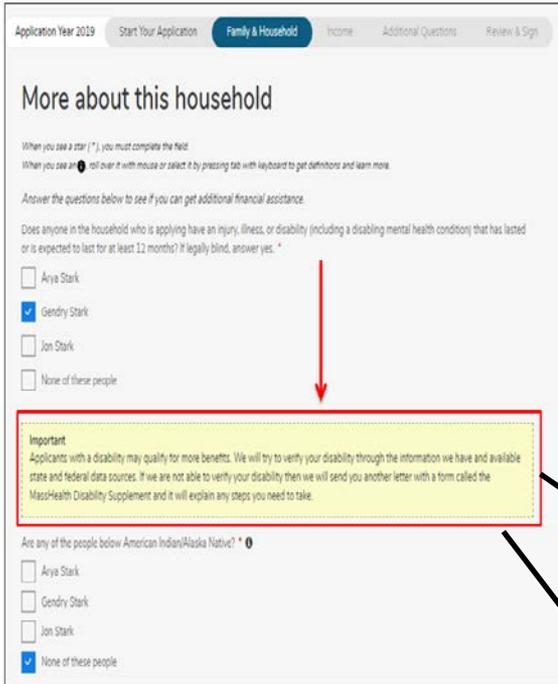
[Change contact information and preferences](#) ⓘ

Add someone to your application or tell us if someone is now applying for coverage ⓘ

Remove someone from your application or tell us if someone is no longer applying for coverage ⓘ

Disability Status Messaging

- Updated Alert Message on the “More about this Household” screen
 - The alert displays when applicant/member attests having an injury, illness, or disability (including a disabling mental health condition) that has lasted or is expected to last for at least 12 months



Application Year 2019 Start Your Application Family & Household Income Additional Questions Review & Sign

More about this household

When you see a star (*), you must complete the field.
When you see an  roll over it with mouse or select it by pressing tab with keyboard to get definitions and learn more.

Answer the questions below to see if you can get additional financial assistance.

Does anyone in the household who is applying have an injury, illness, or disability (including a disabling mental health condition) that has lasted or is expected to last for at least 12 months? If legally blind, answer yes. *

Ariya Stark
 Gendry Stark
 Jon Stark
 None of these people

Important
Applicants with a disability may qualify for more benefits. We will try to verify your disability through the information we have and available state and federal data sources. If we are not able to verify your disability then we will send you another letter with a form called the MassHealth Disability Supplement and it will explain any steps you need to take.

Are any of the people below American Indian/Alaska Native? * 0

Ariya Stark
 Gendry Stark
 Jon Stark
 None of these people

Important

Applicants with a disability may qualify for more benefits. We will try to verify your disability through the information we have and available state and federal data sources. If we are not able to verify your disability then we will send you another letter with a form called the MassHealth Disability Supplement and it will explain any steps you need to take.

Disability Status Messaging

- New Disability Message on the “Eligibility Results” screen
 - Message displays when applicant/household member attests to having a disability to let them know they may qualify for more benefits and next steps

2019 Eligibility Results

[Back to Eligibility Applications](#) [Show Medicaid Household Detail](#) [Show Medicaid Notice](#)

When you see an  roll over it with mouse or select it by pressing tab with keyboard to get definitions and learn more.

IMPORTANT
MassHealth Eligibility
For people who are approved for health coverage through MassHealth, the coverage is temporary and may be reduced or end. If the people in your household are “pending”, you may qualify for MassHealth or Health Safety Net, but we need more information to make a final decision. You will not be able to get or keep your MassHealth coverage unless you send us the requested proof.

IMPORTANT
Disability Message ←
You told us on your MassHealth application that you or someone in your household has a disability. Applicants with a disability may qualify for more benefits. We have sent you or your household member a form called the MassHealth Disability Supplement along with instructions for next steps. Please fill out the supplement and send it to us to find out whether they qualify for more benefits based on disability. Once we receive the completed supplement, MassHealth will process it and send you another letter about any additional benefits based on disability when the process is complete. If you have questions or need the form, please call the MassHealth Customer Service Center at (800) 841-2900.

Read through your results below, learn about the programs you qualify for, and look at the proofs we may need you to send us.

IMPORTANT

Disability Message

You told us on your MassHealth application that you or someone in your household has a disability. Applicants with a disability may qualify for more benefits. We have sent you or your household member a form called the MassHealth Disability Supplement along with instructions for next steps. Please fill out the supplement and send it to us to find out whether they qualify for more benefits based on disability. Once we receive the completed supplement, MassHealth will process it and send you another letter about any additional benefits based on disability when the process is complete. If you have questions or need the form, please call the MassHealth Customer Service Center at (800) 841-2900.

ARDs Can Sign the Application



- People who serve as ARDs for individuals are now able to electronically sign applications for those they are representing when applying online
 - ARDs sign the application by entering their name or the organization’s name (for ARD 2s) into the signature line of the application
 - The individual or organization must already be designated as the ARD for the ARD to be able to sign the application
 - If an individual is completing an online application with an ARD for the first time, the assister may need to call customer service to have the ARD designated prior to submitting the application with the ARD
 - The online Application Summary screen will now show a section called “Signed By” with the individual that signed the application each time the application was submitted

Immigration Tool Tips



- The online application will show a series of new immigration related tool tips and messages
 - These tool tips help to:
 - clarify certain immigration statuses, and
 - provide reminders about immigration statuses, including if an individual does not enter or have an eligible immigration status, they may still be eligible for certain programs

Immigration Tool Tips



When you see a star (*), you must complete the field.
When you see an ⓘ, roll over it with mouse or select it by pressing tab with keyboard to get definitions and learn more.

* Is [redacted] a U.S. Citizen or U.S. National? ⓘ

Yes No

Check this box if [redacted] has an eligible immigration status ⓘ

Federal Services will try to prove your immigration status online. Check the box above to see the list of eligible immigration statuses. Choose any status that applies. If your immigration status is not on this list, uncheck the box. To learn more, see the [Member Booklet](#).

If you do not have an eligible immigration status, or do not complete this section, you may get only one or more of the following: MassHealth Standard (if pregnant), MassHealth Limited, the Children's Medical Security Plan (CMSP), or the Health Safety Net (HSN).

* Document Type (Select One)

Reentry Permit (I-327) ⓘ

Permanent Resident Card ⓘ

Refugee Travel Document ⓘ

The Re-entry Permit (Form I-327), also known as Permit to Re-Enter is a travel document similar to a certificate of identity, issued by the United States Citizenship and Immigration Services to U.S. lawful permanent residents to allow them to travel abroad and return to the U.S.

* Alien Number: Document Expiration Date (MM/DD/YYYY)

Employment Authorization Card (I-766) ⓘ

Machine Readable Immigrant Visa (with temporary I-551 language) ⓘ

Temporary I-551 Stamp (on passport or I-94, I-94A) ⓘ

Arrival Departure Record (I-94, I-94A) issued by U.S. Citizenship and Immigration Services ⓘ

Arrival Departure Record in unexpired foreign passport (I-94) ⓘ

Unexpired foreign passport ⓘ

Certificate of Eligibility for Nonimmigrant (F-1) Student Status (I-20) ⓘ

Certificate of Eligibility for Exchange Visitor (J-1) Status (DS2019) ⓘ

Notice of Action (I-797)/Other - With Alien Number ⓘ

Notice of Action (I-797)/Other - With I-94 Number ⓘ



Questions?



Open Enrollment 2020 Preview

MTF Statewide Meetings

July 2019

Open Enrollment 2020 Preview

The Health Connector has started the planning process for Open Enrollment 2020:

- Open Enrollment is the time when any new members can apply for coverage and current members' coverage is renewed for the upcoming year and can shop for plans.
- The Health Connector remains committed to offering our members and new enrollees a stable and well supported enrollment experience.
- The processes and timelines for Open Enrollment 2020 will be the same as previous years with the exception of a new process for certain members in households with a “MassHealth Pending” status who are part of a mixed household (applications with both Health Connector and MassHealth members).

Background information on MassHealth Pending and Health Connector/Mixed Household Renewals

Currently, the process of finalizing a renewal application disrupts the system's ability to award MassHealth retroactively for these households once income has been verified.

- Some individuals selected for the Health Connector/mixed household renewal process will have a “pended” MassHealth benefit for themselves or for a family member:
 - Health Connector enrollees/eligibles could have a pended Health Safety Net determination.
 - Health Connector enrollees could have reported a change in circumstances that would move them to MassHealth instead once verified.
 - Health Connector enrollees could have no pending benefit themselves but have a family member who is pending.

What is this year's solution?

To ensure correct MassHealth start dates, the Health Connector's process for Open Enrollment 2020 will be modified depending on when income verification is due.

If proof is due before 11/1:

- Application will go through the preliminary eligibility process as usual
- The system will batch finalize the application on the later of:
 - The RFI due date
 - The date 30 or 45 days after the preliminary eligibility (for non-pre-populated form and pre-populated form cases, respectively)

If proof is due after 11/1:

- Applications will not go through the preliminary eligibility process and will not receive a preliminary eligibility notice
- Applicants who report changes may subsequently go through preliminary eligibility, if applicable, or they may create their own 2020 application
- Applications that do not have a 2020 version at the end of the final eligibility process will have their 2019 application duplicated for 2020
- Eligibility and renewal notices will be generated accordingly for 2020
- The income RFI will remain open until the household's 90 days are up or until verification is provided



Redeterminations and Renewals Process

Redeterminations & Renewals Processes and Timelines

The Health Connector's Redetermination and Renewal Processes are a set of activities that happen each year before and during the Health Connector's Open Enrollment period.

- Individuals with health insurance coverage through the Health Connector have their eligibility redetermined so that they can be renewed into coverage for the upcoming year.



Redeterminations and Renewals Process

Preliminary
Eligibility
Determination

August – September

In August and September the Health Connector makes a preliminary eligibility determination for actively enrolled Health Connector members and Health Connector members who are part of mixed households.

Mixed households are households that have both Health Connector members and others who are enrolled in MassHealth.

- Available federal and state data sources are used to check for income and other factors.
 - If a member has income that **was verified with documents provided by the member within the last year**, that income will be used for 2020.
 - If the member **has not verified their income** within the last year, the Health Connector will use the **available electronic data** to determine if their current income is reasonably compatible with the new data.
 - If federal and state data sources are incompatible, the Health Connector will make the determination using available electronic data sources. If the data sources are compatible with what is currently on file for the member, the income in use now will also be used for 2020.

Redeterminations and Renewals Process *(cont'd)*

Preliminary Eligibility Determination

August – September

- Members who are **identified as Medicare eligible in their 2019 application will lose access to State and Federal subsidies**; but can remain in an unsubsidized Health Connector plan through the end of the calendar year. These individuals **will not be renewed for the upcoming year** (they will lose their Health Connector health plan at the end of the calendar year). If they are enrolled in a Health Connector Dental plan, they will be eligible to stay enrolled in Dental for the next year.
- Members **who did not file federal income taxes for tax year 2018** will likely see their eligibility change to Health Connector plans without subsidies when they receive their Preliminary Eligibility notice, based on a failure to reconcile (FTR) the APTC they received in 2018. They will also see the resulting change reflected in the Final Eligibility and Renewal Notice sent in October, unless they file their 2018 taxes, reconcile their APTCs, and update their application to attest that they have complied with the requirement to file and reconcile.

Redeterminations and Renewals Process *(cont'd)*

Preliminary
Eligibility Notice
and Review
Period

August - October

Notices with the results of the preliminary eligibility determination are sent in August and September to all Health Connector enrollees that applied for financial assistance.

Households with only Health Connector members will get:

- a) Health Connector Preliminary Eligibility notice

Mixed Households will receive either a:

- a) MassHealth Auto-Renewal notice and a Health Connector Preliminary Eligibility notice (for Mixed Households who can be auto-renewed); or a
- b) Combined (co-branded) Health Connector and MassHealth notice for Mixed Households with a MassHealth pre-populated form (for those Mixed Households who cannot be auto-renewed).

Important this year: When working with applicants who have “Pending” MassHealth benefits, encourage them to return their income verifications as soon as possible. Certain individuals who are pending MassHealth benefits will not receive a Pre-Populated Form or a Preliminary Eligibility notice.

Redeterminations and Renewals Process *(cont'd)*

Preliminary Eligibility Notice and Review Period

August - October

After members receive their Preliminary Eligibility notice, they have an opportunity to make changes before their determination is finalized for the next year.

Depending on the type of household, the review period is between 30 – 45 days.

- **Health Connector Households:** 30 days to review application and make any changes before their renewal eligibility is finalized.
- **Mixed Households that cannot be auto-renewed:** Households that have both Health Connector and MassHealth members and get a MassHealth Pre-populated Renewal form have 45 days to review their application and make any changes before renewal eligibility is finalized.
 - Those who are sent a pre-populated form are required to respond to MassHealth to provide updated information either online, by phone to MassHealth Customer Service or paper (mail or in-person).
- All members can make changes on their own online at any time.

Redeterminations and Renewals Process *(cont'd)*

Final Eligibility
Determination &
Renewal Notice

October

Eligibility is finalized after the 30-45 review period.

- In **October** a Final Eligibility and Renewal notice is sent to All households with at least one eligible and enrolled Health Connector health plan member that continues to be eligible for a Health Connector plan the following year.
- This notice will include the health plan name and premium for the upcoming year, and their APTC amount.

Redeterminations and Renewals Process *(cont'd)*

Renewal into
a Health
Connector
Plan

November

Open Enrollment begins on November 1st.

The Health Connector follows guidelines to place members into their dental and medical plans each year.

- The Health Connector will renew members into the same plan for 2020, unless that plan is no longer available to them. If their plan is no longer available, the Health Connector will put them into a similar plan.
- All Health Connector eligible and enrolled QHP (qualified health plan) members who continue to be eligible for January 1 will be auto renewed into a plan.
- During Open Enrollment, members can shop for and select new plans for the next year if they do not want to be renewed into their current plan.
- **Remember:** Medicare individuals will not be renewed into a Health Connector medical plan for 2020. They will lose eligibility for QHP (including unsubsidized coverage) at the end of the year.

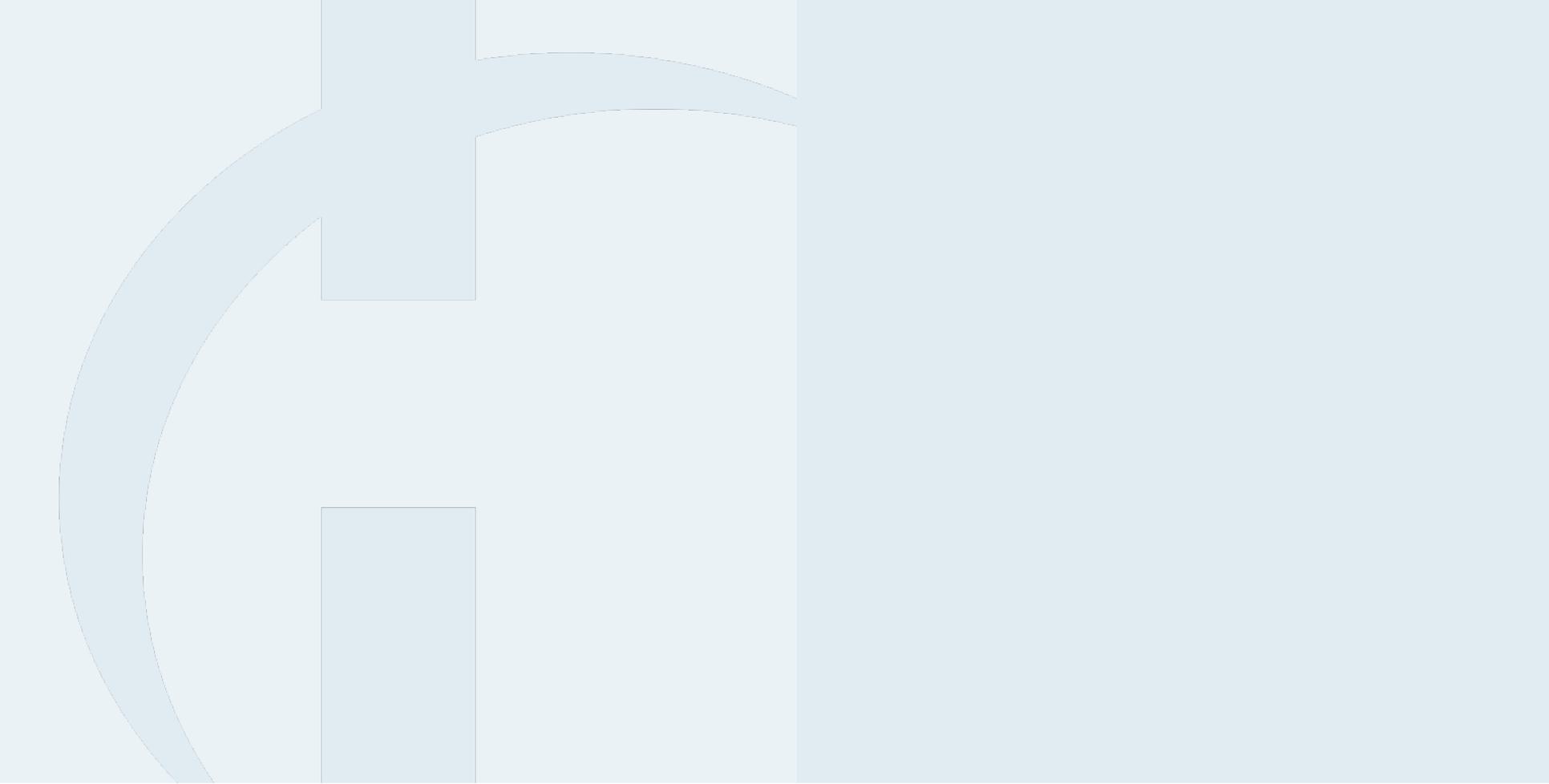
Redeterminations and Renewals Process *(cont'd)*

Billing and
Payment for
January 1
Coverage

December

For coverage effective January 1, 2020, payment is due on December 23, 2019.

- Members that stay in a plan with the same carrier must pay their new premium amount for January coverage.
- If the member decides to change carriers, they are required to submit a binder payment to their new plan for January coverage.



Reminders

Reminder to tell us about changes

During the months of May and July, the Health Connector includes flyers with invoices to remind members about telling us if their information changed since they last applied or last updated their Health Connector account.

- Flyer is two-sided with messaging in English and Spanish.

Tell us about changes



Tell us if your information changed since you applied or last updated your Health Connector account.

Why should you report changes?



It's important to tell about changes to your information. Changes can affect eligibility. Keeping your information up to date is the best way to make sure you get the right coverage at the right cost.

If you are in a ConnectorCare plan or get a monthly tax credit to lower the cost of your monthly premium, it's especially important to report income changes. If you don't tell us about changes to your income, it could affect your tax refund when you file taxes at the end of the year.

When should you report changes?

You should try to report changes as soon as you can, but **no later than 30 days** after the change.

You can update your information any time on your online account at **MAhealthconnector.org**.

If you don't have an online account, you can call Customer Service or visit an Enrollment Assister to update information.

What kind of changes should you report?

-  Changes to your family size, such as:
 - Marriage or divorce
 - A new child, including by adoption or foster placement
 - A death in the family
-  Changes to your household income, such as:
 - Income that's higher than the income you expected when you applied or updated your account
 - Income that's gone up or down since you applied or updated your account
-  Changes to coverage available to you, such as:
 - Getting coverage through a job
 - Turning 26, so you're no longer eligible for coverage on your parent's health plan
 - Becoming eligible for Medicare
-  Other changes
 - Changes to your address
 - Changes to your name, date of birth, or Social Security Number (SSN)
 - Changes to your citizenship or immigration status

Learn more at MAhealthconnector.org

Reminder to use online payment center and select paperless notices

Why Promote the use of the Health Connector's Online Payment Center?

Members are able to:

- Submit payments (one-time payments and recurring), view bills, and payment history.
- View Health Connector notices (including Preliminary Eligibility and Final Eligibility Determination & Renewal notices) online through the Payment Center.

Note: If a member elects paperless notices, anyone designated as an Authorized Representative (ARD), Permission to Share Information (PSI), or Navigator (NDF) will continue to get a paper notice.

Reminder to use online payment center and select paperless notices *(cont'd)*

How to access:

1. Members should log into their account at Mahealthconnector.org
 - If they don't have an online account they can call Customer Service to get one set up.
2. Go to My Enrollments.
3. Go to Make a Payment.
 - From here, choose to set up AutoPay for monthly Health Connector bills. Members can also set up paperless bills, notices, and tax forms.

New online payment center and paperless notices!

What's new?

- New online payment features, like the ability to view your billing and payment history
- New choices to sign up for paperless bills, notices, and tax forms

How to access:

1. Log into your account at MAhealthconnector.org.
If you don't have an online account, call Customer Service to get started setting one up at: 1-877-MA ENROLL (1-877-623-6765) TTY: 1-877-623-7773
2. Go to My Enrollments.
3. Go to Make a Payment. From here, you can choose to set up AutoPay for your monthly Health Connector bills. You can also set up paperless bills, notices, and tax forms.

Learn more at www.MAhealthconnector.org/paperless

Faster
Get your notices and monthly bills **right away** instead of waiting for the mail

Easier
See all of your current and past information from the Health Connector **in one place**

Simpler
Reduce paper and clutter in your home

Cheaper
Save on the cost of postage stamps, bank checks and money orders when you pay online every month

Greener
Save trees and reduce greenhouse gases with less paper printing and mail delivery



Group Activity

Instructions

Three common Health Connector scenarios are described on the following slides.

Please assume that each of the members described, is someone that you already have an established relationship with.

Work with your team members or tablemates to respond to the questions and share your expertise with one another.

Scenario 1 - Louis

ConnectorCare member Louis comes to your office for his appointment. He says he received a Preliminary Eligibility notice showing that he is no longer eligible for ConnectorCare next year.

He brings in the notice and it shows that he has an “Unknown FPL”.

What are steps you can take assist this member?

Scenario 2 - Maria

In September, ConnectorCare member Maria comes to her appointment and tells you that she received a letter showing that she is no longer eligible for ConnectorCare and that she will lose access to Health Connector coverage at the end of the calendar year.

She tells you that the letter mentions Medicare. She does not have a copy of this letter. She's not sure whether or not she is enrolled in Medicare. She tells you that her 65th birthday is coming up.

How should you advise this member?

Scenario 3 - Tom

Member Tom comes in for an appointment and brings his Preliminary Eligibility notice. It shows he is moving from ConnectorCare to an unsubsidized plan in 2020.

On the notice, you can see that the member's FPL for the 2020 determination is 143%, but he is not eligible for subsidies.

You ask Tom whether or not he has filed his taxes for last year? He says that he did not last year because he didn't believe he was required to with his income level.

You also ask Tom if he is newly eligible for any other coverage such as Medicare or Veterans benefits. He says no. How should you advise this member?



Questions?