Changes to MassHealth Provisional Eligibility

MA Health Care Learning Series
June 2018
Agenda

• What is MassHealth Provisional Eligibility?
  – What Are the Changes
  – What applicants and members need to know
• What is Reasonable Compatibility?
  – What Are the Changes
  – What applicants and members need to know
• Impact to Health Connector Eligibility
• Online System Update
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.
MassHealth and Health Connector Eligibility Criteria
Eligibility Criteria

- MassHealth and the Health Connector require verification of the following eligibility factors to make a final eligibility determination:
  - Income
  - Social Security Number
  - Residency
  - Citizenship
  - Immigration Status
  - Incarceration
  - Non-custodial Parent Info (*MassHealth only*)
  - American Indian/Alaska Native (*Health Connector only*)
MassHealth will attempt to verify eligibility factors using electronic data sources:

- If data is **reasonably compatible** with attested information, the eligibility factor is considered **verified**.

- If data is not **reasonably compatible or not available**, the individual will be required to send **proof within 90 days** and a **Request for Information (RFI) notice** will be sent.
What is MassHealth’s Provisional Period?

- MassHealth provides benefits to eligible applicants based on self-attestation (except for disability, citizenship, and immigration status) during the provisional period.*
- Applicants must provide all outstanding eligibility forms of proof within 90 days of receipt of MassHealth’s Request for Information Notice (90 day RFI).
- Each applicant can only get one provisional eligibility approval in a 12-month period.
  - Except when a woman attests to pregnancy and the MassHealth MAGI household income is less than or equal to 200% of the FPL.

* MassHealth applicants can also get benefits during a reasonable opportunity period, while they are working on getting any required forms of proof of U.S. citizenship and identity or immigration status.
Changes to Provisional Eligibility

How changes apply to NEW applicants

- **Beginning July 1, 2018, new applicants** aged 21 and older with unverified MassHealth Modified Adjusted Gross Income (MAGI) household will no longer be eligible for provisional benefits. They will not receive a MassHealth or Health Safety Net (HSN) benefit.
  - This change only applies to outstanding income verifications.
- MassHealth may provide provisional benefits during the 90-day RFI period to eligible applicants with pending an income RFI to those:
  - under age 21;
  - pregnant with self-attested MassHealth MAGI household income less than or equal to 200% of the federal poverty level (FPL);
  - an individual with HIV-positive status with self-attested MassHealth MAGI household income of less than or equal to 200% of the FPL;
  - an individual in active treatment for breast or cervical cancer with self-attested MassHealth MAGI household income of less than 250% of the FPL; or
  - an adult aged 21 through 64 whose MassHealth MAGI household income is verified, but who has other outstanding verifications.
How changes apply to Current Members

- Adults 21 and older who are currently receiving MassHealth or HSN who have unverified income in their MassHealth MAGI household as a result of reported changes or completion of the annual renewal, based on self-attested income, the member will:
  - Stay in the existing benefit *if* the program determination would result in the same benefit
  - Pend in the existing benefit until verification is submitted *if* the program determination would result in more comprehensive benefit
  - Coverage may change to a new benefit *if* the program determination would result in a less comprehensive benefit
  - Terminate coverage *if* member no longer meets program requirements

**MassHealth is changing the regulations at 130 CMR 502.000 and 505.000.**
Reasonable Compatibility
What is Reasonable Compatibility?

- “Reasonable Compatibility” is used to determine if self-attested income can be verified based on comparison to income received from electronic data source.
  - When self-attested income is reasonably compatible with the electronic data, the self attested income amount is used to determine eligibility.
Beginning July 1, 2018, MassHealth is updating the regulation defining reasonable compatibility for income.

An individual’s income is considered to be reasonably compatible for MassHealth, if one of the following applies:

– Both the attested income and the income from the data sources are above the applicable income standard for the individual
– Both the attested income and the income from the data sources is at or below the applicable income standard for the individual
– The attested income is at or below the applicable standard and income from the data sources are above the applicable standard but their difference is 10% or less; or
– The attested income is above the applicable standard and the income from the data sources is at or below the applicable standard.
Changes to Reasonable Compatibility for Income: MassHealth (cont’d)

- If all household income is verified and there are other outstanding verifications, the individual may receive provisional eligibility and a RFI will be sent for the outstanding verifications.

**NOTE:**

Verification of income may be requested for an individual who is considered reasonably compatible when both attested income and data source income are below MassHealth income thresholds if:

- the income is countable in the household of another individual in the application, or if anyone in the household is eligible for Health Connector benefits, an RFI notice may be generated.
Scenario 1

Mary is 32 years old and single. She attests on her application that she is working and her self attested income is 105% of FPL.

– The income information received from the data source indicates her FPL is 125%.

➢ Because both the self attested income and income from the data source are below MassHealth program threshold of 133% of FPL, Mary’s income is considered reasonably compatible.

➢ She will not receive an RFI, requesting proof of income.

➢ She will be approved for MassHealth CarePlus (final eligibility, if no other outstanding RFIs).
Scenario 2

Carol, age 28, submits an ACA-3 paper application. She self-attests an income of 110% FPL. Her income is not reasonably compatible with electronic data sources and a Request for Information (RFI) notice is sent requesting proof of income.

- Carol is not eligible for provisional coverage because she is an adult with unverified income.
- During the 90-day RFI period, Carol will pend in no benefit until she submits proof of income.
Jim, age 37, submits an online application with his wife, Samantha, age 35, and their daughter, Zoe, age 3. Jim and Samantha are married filing jointly and claim Zoe as a tax dependent. Samantha is currently pregnant. Jim and Samantha are both working, and their self-attested MAGI income is 130% of FPL. The income is not reasonably compatible with electronic data sources and a RFI notice is sent requesting proof of income for Jim and Samantha.

- Jim is not eligible for provisional coverage because he is an adult with an unverified income. During the 90-day RFI period, Jim **will pend in no benefit** until all income in the MAGI household is verified.

- Samantha will be provisionally eligible for MassHealth Standard, because she is a pregnant woman.

- Zoe will be provisionally eligible for MassHealth Standard, because she is a child under age 19.
Impact to Health Connector
Eligibility
Impact to Health Connector Eligibility

For new applicants:

- If the self-attested income is above the MassHealth financial threshold
  - The applicant may be determined for a Health Connector benefit based on Health Connector provisional eligibility rules
    - The applicant will not be eligible for HSN benefits until all household income is verified and within program limits.

- If the attested income is within MassHealth financial thresholds:
  - The applicant cannot be determined eligible for a Health Connector benefit pending the MassHealth decision.
Provisional Eligibility (cont’d)

There will be some changes for Health Connector members enrolled in ConnectorCare or APTC benefits if they update their income and that income falls within a MassHealth MAGI FPL range.

If an individual currently enrolled in ConnectorCare or APTC updates their income to:

- Less than 100% FPL, and otherwise meets MassHealth qualifications
  - The individual will remain in their existing benefit through the end of that enrollment month as well as an additional month
  - Note that after the additional month of ConnectorCare coverage, subsidies will end, but the QHP enrollment will remain. The member must proactively terminate a QHP enrollment if they do not want to continue without subsidies
    - Example: A ConnectorCare PT3B member reports an income decrease to 40% FPL on July 2nd. If an income RFI is triggered, the member will remain in ConnectorCare PT3B until August 31.
    - If that same member reported their income change on July 22, they would also remain in ConnectorCare PT3B until August 31.
Provisional Eligibility (cont’d)

- If an individual currently enrolled in ConnectorCare or APTC updates their income to:
  - Above 100% FPL, but still within MassHealth ranges and otherwise meets MassHealth qualifications
    - The individual’s ConnectorCare eligibility will be recalculated based on the new FPL, but the individual will remain in ConnectorCare throughout the duration of their MassHealth pending period.
    - Example: PT3B member reports new income of 120% FPL on July 2nd, generating an RFI. The member will be moved to PT2A on August 1.
  - In both scenarios, if the individual is determined eligible for MassHealth, ConnectorCare benefits will be terminated prospectively.
Verification
Verification Received

Verifications received within RFI period

• If all required verifications are received within the 90-day time frame, the coverage start date of MassHealth or HSN is 10 days before the receive date of application

Verifications not received within RFI period

• If required verifications are not received and MassHealth is able to make a determination based on electronic data match, the coverage start date is 10 days before the receive date of the application

• If required verifications are not received and MassHealth is not able to make a determination based on electronic data sources, the individual will be denied MassHealth and HSN benefits.

• If the individual later submits required verifications outside of the 90-day time frame, the coverage start date is 10 days before the date of receipt of all requested verifications

**Note:** If eligible for a Health Connector benefit, the Health Connector eligibility and enrollment is prospective only
Online System Update
Online System Update

- Language has been added to the *Eligibility Results* screen to inform a user when the MassHealth or HSN determination is pending due to verifications.
  - In the “Program Eligibility” section, “**MassHealth Decision Pending**” will display when the member is pending income verification and does not qualify for provisional benefits.
  - Alert messages will display at the top and bottom of the screen when at least one individual in the household has MassHealth determination pending advising that the individuals listed may not be able to get or keep coverage unless they send in the requested proofs.
Online System Update (cont’d)

Sample *Eligibility Results* screen for single individual pending MassHealth decision

**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.
Online System Update (cont’d)

Sample *Eligibility Results* screen for single individual pending MassHealth decision

**NOTE**
You may not be able to get or keep your coverage unless you send us the requested proof above.

**Not Eligible**
MassHealth Decision Pending
Sample Eligibility Results screen for:

- Multi-member household adults eligible for Health Connector benefits, but MassHealth or HSN is pending; children provisionally approved for MassHealth.

**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 coverage unless you send us the requested proof.

**Health Connector Eligibility**

For people who are approved for health coverage through the Health Connector – such as ConnectorCare plans – you may shop for a health plan and complete your enrollment now.
This is a sample Eligibility Results screen for a multi-member household with adults eligible for Health Connector benefits, but MassHealth and HSN are pending; the children are provisionally approved for MassHealth.

**Health Connector Eligibility**

For people who are approved for health coverage through the Health Connector--such as Connector Care plans--you may shop for a health plan and complete your enrollment now.
Member Notices

MassHealth Provisional Approval Notices

● A notice will continue to be sent to members who are approved for a provisional benefit.

● A notice will not be sent to individuals who are in MassHealth pending status who have unverified income.

  – Individuals who are in MassHealth pending status will only receive the RFI notice.

● A notice will be sent to individuals who were initially in MassHealth pending status, are still within the RFI time period, have submitted proof of income, but have other remaining verifications.
Member Notices (cont’d)

MassHealth Final Approval notices

● A notice will be sent to individuals who were previously in a MassHealth pending status, and have submitted all verifications within the RFI time period, and are eligible for MassHealth and or HSN benefits.

MassHealth Denial notices

● A notice will be sent to individuals who were previously in a MassHealth pending status, and subsequently are denied due to a member-triggered or system generated action (member did not respond within 90 days to a RFI request and no data is available from data sources).
Member Notices (cont’d)

MassHealth Termination notices

- A notice will be sent to individuals who were previously in a provisional benefit or to an existing members(s) who are pending in an existing benefit pending verifications, and subsequently the member is terminated due to member-triggered or system-generated action (i.e. member did not respond within 90 days to a RFI request and no data is available from data sources).

RFI notices

- Existing RFIs language includes the following language to inform an individual that they may not be able to get or keep coverage unless requested proof is sent within the 90 day timeframe.
  
  – Sample language:

This means that if the people listed below are currently getting health coverage, that coverage is temporary and may decrease or end. If the people listed below do not currently have health coverage, they may not be able to get coverage until you send us the proof.
Questions?