

MassHealth Updates

Massachusetts Health Care Training Forum
January 2019



Agenda

- MassHealth Renewal Updates
- 2019 Social Security Cost of Living Adjustment
- Long-Term-Care Benefits
- MassHealth Records Requests
- One Care Update

MassHealth Renewal Update

MassHealth Renewal: ACA

- ~15,000 members on 12/2018 were mailed renewal packets
- Renewal deadline: 2/01/2019
- If the member already submitted a new application or started a new application, member will not need to fill out another application if:
 - An application was completed online after December 2, 2018 or
 - A paper application was received after December 11, 2018

MassHealth Renewal: ACA - (cont.)

- Renewal packet was sent to head of households
 - If head of household does not submit the renewal by 02/01/2019, people in the household will lose their health coverage
- If the member or his or her representative misplaces the form, they can submit an ACA-3 application with “**RENEWAL**” written across the top

MassHealth Renewal: SACA

- The final group of renewal mailings to decommission PACES mailed on 12/6/18. Of the 1,800 packages mailed, approximately 1,100 were sent to LTC members
- The packages contain an orange SACA-Renewal form. If the member or their representative misplaces the form, they can submit a SACA-2 application with “**RENEWAL**” written across the top
- Renewal deadline was 1/20/2019

Social Security Cost of Living Adjustment (COLA)

Cost of Living Adjustment (COLA) 2019

- Press release provided in October by the Social Security Administration
- Social Security and Supplemental Security Income (SSI) benefits for more than 67 million Americans will increase 2.8 percent in 2019
- Social Security and SSI beneficiaries are notified by mail in early December about their new benefit amount. This year, for the first time, most people who receive Social Security payments will be able to view their COLA notice online through their my Social Security account at www.socialsecurity.gov/myaccount

Income & Asset Standards for MassHealth Coverage 65 & Over Living in the Community

- Income & Asset Standards for MassHealth Coverage 65 & Over Living in the Community

	<u>Income</u>	<u>Assets</u>
Individual	\$1,012/mo	\$2,000
Couple	\$1,372/mo	\$3,000

- Buy-In programs: QMB, SLMB, QI-1
 - Effective January 2019 (income amount varies)
 - Asset for an individual: \$7,560
 - Asset for couples: \$11,340

Eligibility Figures for Residents of a Long-Term-Care Facility

- The following figures are used in determining eligibility for a MassHealth member who is age 65 or older and who lives in the community
- All figures are effective January 1, unless otherwise noted

	2019	2018	2017	2016
Personal needs allowance (PNA)/ LTC income standard	\$72.80	\$ 72.80	\$ 72.80	\$ 72.80
Maximum home equity limits	\$878,000.00	\$858,000	\$840,000	\$828,000
Community spouse minimum resource (assets) standard	\$25,284.00	\$ 24,720	\$ 24,180	\$ 23,844
Community spouse maximum resource (assets) standard	\$126,420.00	\$123,600	\$120,900	\$119,220
Average daily cost of nursing facility services	\$ 366.73 (eff. 11/01/18)	\$ 366.73 (eff. 11/01/18) \$ 354 (before 11/01/18)	\$ 354 (eff. 07/01/16)	\$ 354 (eff. 07/01/16) \$ 310 (before 07/01/16)

Eligibility Figures — MassHealth Community Residents Aged 65 or Older

The following figures are used in determining eligibility for a MassHealth member who is aged 65 or older and who lives in the community.

All figures are effective January 1, unless otherwise noted.

	2019	2018	2017	2016
Asset limit	\$ 2,000			
Individual	\$ 3,000	\$ 2,000	\$ 2,000	\$ 2,000
Couple		\$ 3,000	\$ 3,000	\$ 3,000
Buy-in asset limit	\$ 7,560			
Individual	\$11,340	\$ 7,560	\$ 7,390	\$ 7,280
Couple		\$11,340	\$11,090	\$10,930
Federal benefit rate (300%)	\$2,313	\$ 2,250	\$ 2,205	\$ 2,199

Minimum-Monthly-Maintenance-Needs Allowance (MMMNA)

The following figures are used to determine the minimum-monthly-maintenance-needs allowance (MMMNA) for the community spouse of a MassHealth member who lives in a long-term-care facility.

All figures are effective January 1, unless otherwise noted.

	2019	2018	2017	2016
Maximum MMMNA	\$3,160.50 (eff. 01/01/19)	\$3,090	\$ 3,022.50	\$ 2,980
Minimum MMMNA	\$ 2,057.50 (eff. 07/01/18)	\$ 2,057.50 (eff. 07/01/18)	\$ 2,030 (eff. 07/01/17)	\$ 2,002.50 (eff. 07/01/16)
Standard shelter expense	\$ 617.25 (eff. 07/01/18)	\$ 617.25 (eff. 07/01/18)	\$ 609 (eff. 07/01/17)	\$ 600.75 (eff. 07/01/16)
SNAP utility expense	\$ 643	\$ 643	\$ 636	\$ 609
Heat expense	\$ 396 (eff. 10/01/18)	\$ 396 (eff. 10/01/18)	\$ 392 (eff. 10/01/17)	\$ 376 (eff. 10/01/16)
No heat expense				

Figures Used to Determine MMMNA

	2019
Housing Maintenance Needs Allowance (HMNA) – based on the actual Federal Poverty Level (FPL)	\$1,012 (100% FPL) will remain at this amount until the 2019 FPL increases are implemented
Community Spouse Monthly Housing Allowance	\$ 617.25 (Effective 7- 1- 18)

Figures Used to Determine MMMNA

Massachusetts SSI Payment Standards Effective January 1, 2019

	Living Arrangement Category				
	A Full Cost of Living Expenses	B Shared Living Expenses	C Household of Another	E Licensed Rest Home	G Assisted Living
Individual					
Aged	\$899.82	\$810.26	\$618.36	\$1,064.00	\$1,225.00
Disabled	885.39	801.40	601.58	1,064.00	1,225.00
Blind	920.74	920.74	920.74	1,064.00	1,225.00
Member of a Couple					
Aged	\$679.36	\$679.36	\$493.57	\$1,064.00	\$919.00
Disabled	668.53	668.53	482.76	1,064.00	919.00
Blind	920.74	920.74	920.74	1,064.00	919.00

Note: The SSI federal benefit rate (FBR) for an individual is \$771.00.
 Note: The personal needs allowance in licensed rest homes is \$72.80 — The personal needs allowance in nursing facilities and chronic-disease hospitals is \$72.80.

RSDI Cost-of-Living Adjustments (COLA)

Date	Percentage of Increase	Date	Percentage of Increase	Date	Percentage of Increase
July 1, 1977	5.9%	January 1, 1992	3.7%	January 1, 2006	4.1%
July 1, 1978	6.5%	January 1, 1993	3.0%	January 1, 2007	3.3%
July 1, 1979	9.9%	January 1, 1994	2.6%	January 1, 2008	2.3%
July 1, 1980	14.3%	January 1, 1995	2.8%	January 1, 2009	5.8%
July 1, 1981	11.2%	January 1, 1996	2.6%	January 1, 2010	0%
July 1, 1982	7.4%	January 1, 1997	2.9%	January 1, 2011	0%
January 1, 1984	3.5%	January 1, 1998	2.1%	January 1, 2012	3.6%
January 1, 1985	3.5%	January 1, 1999	1.3%	January 1, 2013	1.7%
January 1, 1986	3.1%	January 1, 2000	2.5%	January 1, 2014	1.5%
January 1, 1987	1.3%	January 1, 2001	3.5%	January 1, 2015	1.7%
January 1, 1988	4.2%	January 1, 2002	2.6%	January 1, 2016	0%
January 1, 1989	4.0%	January 1, 2003	1.4%	January 1, 2017	0.3%
January 1, 1990	4.7%	January 1, 2004	2.1%	January 1, 2018	2.0%
January 1, 1991	5.4%	January 1, 2005	2.7%	January 1, 2019	2.8%

Resource

- <https://www.mass.gov/service-details/program-financial-guidelines-for-certain-masshealth-applicants-and-members>

The screenshot shows the Mass.gov website interface. At the top left is the Mass.gov logo. To its right is a search bar with the text 'Search Mass.gov' and a 'SEARCH' button. Below the search bar is a navigation menu with five items: 'LIVING', 'WORKING', 'LEARNING', 'VISITING & EXPLORING', and 'YOUR GOVERNMENT', each with a downward arrow. Below the navigation menu is a section for 'OFFERED BY' with a dropdown menu showing 'MassHealth' and 'RELATED TO' with a dropdown menu showing 'Information for MassHealth Applicants'. The main content area features a large heading: 'Program financial guidelines for certain MassHealth applicants and members'. Below the heading is a sub-heading: 'Figures used to determine eligibility'. The text below reads: 'MassHealth eligibility is determined using factors, such as income, assets, residency, and household composition. The full list of factors can be found in the [MassHealth Member Regulations](#).' The next paragraph states: 'The following figures are used to determine eligibility for certain MassHealth applicants and members aged 65 and older or those of any age who are in or are entering a long-term-care facility and their spouses who reside in the community.' At the bottom of the page is a section titled 'Eligibility Figures Tables' with a horizontal line underneath.

Medicare Part B Premium

- Effective 01/01/2019 Medicare Part B premium will increase \$1.50 to \$135.50, up from \$134 in 2018
 - On an individual basis, Medicare premium may increase, decrease or remain the same
- Medicare Part B premium payment assistance is available under the MassHealth Buy-In coverage for certain eligible members
- MassHealth Buy-in coverage types include:
 - MassHealth Senior Buy-In (QMB)
 - MassHealth Buy-In for Specified Low Income Medicare Beneficiaries (SLMB)
 - MassHealth Buy-In for Qualifying Individuals (QI-1)
- Income and asset limits apply in order to be eligible for Medicare Part B premium assistance Buy-In coverage

MassHealth Buy-In Application

- The SACA-2 application can be completed to determine Buy-In eligibility
- When completing the SACA-2, the applicant will have a determination for both MassHealth and Buy-In coverage
- There is a MassHealth Buy-In Application for people who want to apply for just a Medicare Buy-In coverage
- To request an application call MassHealth at 1-800-841-2900 or download from the MassHealth website www.mass.gov/masshealth

Long-Term-Care Benefits

Long-Term-Care Benefits

- Individuals under the age of 65 and are applying for Long-Term-Care benefits, must be determined disabled by Social Security Administration (SSA) or MassHealth in order to be eligible
 - If the applicant is not considered disabled by SSA, they must complete the MassHealth Adult Disability Supplement and send it to Disability Evaluation Services at UMass Medical
 - The evaluation process can take up to 90 days for a disability decision to be made. This supplement will not be processed if a MassHealth application has not been submitted

Long-Term-Care Benefits: Application Process

- When MassHealth receives the application, MassHealth will assign it to a Long-Term-Care Intake worker at a MassHealth Enrollment Center (MEC)
 - Once the worker has reviewed the application, a request for information may be issued for any additional documentation that is still needed in order to make an eligibility determination
 - Applicants will have 30 days from the date of the notice to provide requested information to the intake worker
 - MassHealth has 45 days to issue an eligibility determination
 - except when a disability evaluation is pending

Long-Term-Care Benefits

- Mail completed application and all verifications to:
Central Processing Unit (CPU)
P.O. Box 290794
Charlestown, MA 02129-0214

- Fax completed application and all verifications to: (617)
887-8799

- Mail completed disability supplement and medical records
release forms to:
Disability Evaluation Services
UMASS Medical DES
P.O. Box 2796
Worcester, MA 01613-2796

Long-Term-Care Application Checklist

- Applicants must fill out the Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA-2) and the Long-Term-Care Supplement
- MassHealth has designed a Long Term Care Application checklist to assist individuals applying for coverage
- Use this checklist as a guide to completing the application
 - Additional information may be requested
 - https://www.mass.gov/files/documents/2018/09/11/ltc-ac_0.pdf

Long-Term-Care Application Checklist

Helpful tips for applying for MassHealth Long-Term-Care (LTC) benefits

You must fill out the **Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA-2)** and the Long-Term-Care Supplement. In order to get any benefits you are entitled to as quickly as possible, you should include any documentation you have that verifies your income, assets, citizenship or immigration status, and other health insurance. Use the following charts as a guide to completing the application. Additional information may be requested.

Ensure the following steps have been taken:	✓	N/A
"Long-Term Care" is selected on page 1 of the application.		
All questions are answered "yes" or "no" for you and your spouse (if married, even if spouse is not applying).		
Application is signed by you or your Authorized Representative Designee (ARD). Note: if signed by an ARD, the ARD form must be completed and sent with the application.		
Long-Term-Care Supplement completed and signed by you or your Authorized Representative Designee (ARD)		
Disability supplement and medical records release forms have been completed and mailed separately (individuals under the age of 65 only).		
Submission of Status Change (SC-1) form (to be submitted by nursing facility staff)		
Submission of Level of Care (LOC) indicating clinical eligibility (to be submitted by nursing facility staff)		

Verifications to include with this application for you and your spouse (if married, even if spouse is not applying, unless noted otherwise):	✓	N/A
Proof of citizenship or immigration status (this is not needed for a non-applying spouse)		
Proof of income, before taxes are taken out, for all types of income received (except for Social Security income for the applicant)		
Current bank statement(s) from 60 months prior to admission date to the present, for all open accounts		
A copy of the deed(s), current tax bill(s), and proof of amount owed on all property owned, including life estates		
A copy of the first page of all life-insurance policies or a letter from the insurance company showing the current cash-surrender value (for all policies except term policies)		
Current value of any securities (stocks, bonds, or other)		
A copy of all annuity contracts. For each annuity owned, give us proof from the annuity company of the full value of the annuity, less any penalties and fees if it can be cashed in.		
Proof of any deposit given to a health-care or residential facility		
A copy of the registration for all vehicles (including fair market value at time of admission)		
Proof of any prepaid burial plans, accounts, or trusts		
All trust documentation (including the trust(s), schedule of beneficiaries, any deeds, and bank statements that are held by the trust)		
Current copy of all health insurance cards and current premiums		
Proof of any resource transfers within the last 60 months from the date of application		

MassHealth Records Requests

MassHealth Records Requests

- The MassHealth Privacy Office may be contacted when applicants, members, or authorized parties (i.e., custodial parent or authorized representative) are looking to obtain copies of medical records
- Requests should be in writing, signed and include applicant or member name, date of birth, MassHealth ID number or the last four digits of the social security number. Include a complete description of the information being requested and the mailing address at which they would like to receive these records
- If the applicant or member would like MassHealth to share his or her records with another person or organization, the request must be accompanied by a completed MassHealth [Permission to Share Information \(PSI\) Form](#)

MassHealth Records Requests

- Privacy Office contact

Mail: MassHealth Privacy Office

Attn: Martha Young

One Ashburton Place, Room 1109

Boston, MA 02108

Email: Privacy.Officer@massmail.state.ma.us

Fax: 617-210-5452*

- Phone: 617-573-1656

***Please note** that the fax line is shared by other EOHHS/MassHealth staff. Faxes should include a cover page directed to the Privacy Office.

MassHealth Records Requests

- An applicant or member (or his/her ARD) can also schedule a meeting to view his/her case file at a MEC in advance of an appeal
- Requests should be made in advance, the Privacy office may take up to 60 days to provide the records

One Care

MassHealth+Medicare
Bringing your care together

One Care is Now Available in Bristol County!

- We are excited to announce that eligible members who live in Bristol County can now enroll in One Care through Commonwealth Care Alliance (CCA)
- Reminder: How to enroll in One Care:
 - There are three ways to enroll in One Care:
 1. Enroll online by visiting the One Care website: www.mass.gov/one-care, and clicking on the “I’m ready to enroll in One Care!” section
 2. Fill out and mail or fax the paper One Care Enrollment Decision Form (also available for download from the One Care website)
 3. Call the MassHealth Customer Service Center

One Care Updates

- Members may enroll in, change plans, or disenroll from, One Care at anytime
 - Enrollments (and disenrollments) are effective the first day of the following month
 - For example, if a member enrolls anytime in January (e.g., January 3rd or January 23rd), the enrollment would take effect February 1

One Care

MassHealth+Medicare
Bringing your care together

VISIT US ONLINE

www.mass.gov/one-care

EMAIL US

OneCare@state.ma.us

Questions?