



Commonwealth of Massachusetts Executive Office of Labor and Workforce Development

Medical Security Program

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Unemployment Assistance**



MSP Overview

- The Medical Security Program (MSP) is a program designed to provide health insurance coverage to eligible Massachusetts unemployment insurance (UI) recipients, and their dependent family members residing in Massachusetts.
 - Dependents include children up to their 26th birthday (including full-time students living out of state) and disabled children regardless of age.



MSP Eligibility

- To be eligible, an MSP applicant must:
 - Live in Massachusetts
 - Have a Massachusetts work history and receive unemployment benefits from Massachusetts
 - Earn no more than 400% of the Federal Poverty Income guidelines (FPIG)
 - Have no access to spouse's insurance
 - Not be enrolled in Medicare Part B or Medicaid



MSP Plans

- There are two plans offered - Premium Assistance and Direct Coverage.
 - Premium Assistance reimburses up to 80% of the monthly cost of the claimant's COBRA premium (up to a maximum of \$500 for an individual plan and \$1,200 for a family plan).
 - For claimants who do not have access to or cannot afford COBRA, Direct Coverage is an HMO currently administered by BCBS of Massachusetts.



MSP Procurement

- As part of the Governor's health care cost containment initiative, the Administration requested that DUA work with the Health Connector to conduct a new, competitive procurement for MSP Direct Coverage.
 - Maintains eligibility for adults and children up to 400% FPIG but more closely matches Commonwealth Care coverage.



MSP Premiums

- Under the new plan, premiums will vary by family income, and potentially the choice of health plan, similar to Commonwealth Care.
 - Cost-sharing will be more progressive than current structure, as the lowest income tier will continue to pay no premium and will pay lower co-pays going forward.
 - Children under 19, pregnant women, and disabled individuals will be exempt from premiums regardless of income.



MSP Application Changes

- Depending on the procurement outcome, DUA may offer more than one health insurance provider for claimants to choose from.
- Claimants will be required to select their health insurance provider at the time the application is submitted.
 - If the plan selection is omitted, the claimant will be assigned to the lowest cost provider.
- Claimant and dependents must be on the same plan.
- The application will be updated to capture pregnancy and disability status for the claimant, spouse and dependents.



MSP Open Enrollment

- If more than one health insurance plan is offered, an open enrollment will be conducted prior to the beginning of the program.
- A pre-enrollment notification letter will be sent on November 4th informing existing enrollees that changes to the program will be occurring but no action is necessary until they receive their enrollment package.
- In mid- to late November, the enrollment package will be mailed, including a high level comparison of the plan choices.
- Each health insurance provider will also mail more detailed plan information directly to enrollees.
- Open Enrollment will start on December 5th and end on December 30th.



MSP Marketing

- The MSP brochure and application will continue to be mailed to all individuals who have filed a new UI claim.
 - Claimants will be directed to the web for detailed information on plans available under Direct Coverage.



MSP Billing

- Some claimants will be expected to pay a weekly premium and will receive a bill for the premium amount.
- Once DUA's new online system, UI Online, goes live (date TBD), premiums will be deducted directly from a claimant's weekly benefit payment.



Plan Transfers

- Other than during open enrollment periods, enrollees may only transfer health plans if they experience one of the following qualifying events:
 - Change in address such that the enrollee is no longer a resident of a service area in which their current health plan operates; or
 - Change in the service areas covered by the enrollee's health plan such that the health plan no longer provides coverage in the enrollee's service area; or
 - The enrollee's PCP is no longer a contracted provider under the current health plan but is a contracted provider in another contracted health plan that operates in the enrollee's service area.
- An enrollee's opportunity to change health plans will be limited to the 30 day period that occurs prior to or after the qualifying events described above.



Questions?

- Visit www.mass.gov/dua/msp
- Call 1-800-908-8801