

MTF Spring 2025 Meeting MA Health Care Learning Series Webinar Q&A (April 15 & May 2, 2025)

Q1. There seems to be a problem for people whose COBRA ends mid-month. They have been told that they can't enroll in new coverage until their current coverage ends and the new coverage will start on the 1st of the following month. This is creating a gap in coverage. The new effective dates just mentioned seem to still create a gap in coverage. Is there a way to avoid any gaps?

A1. Health Connector coverage does not start mid-month except in cases of birth, adoption, or foster placement.

Q2. I see the link on making Health Connector payment options but wasn't sure if there was a link to a flyer that could be given to members.

A2. The flyer was sent out via an MTF email on May 8, 2025, and is accessible here: <u>02d0eff4-</u> <u>5e5d-4505-8c0a-1ce09ac7b048.pdf</u>

Q3. What if they had a Zero monthly payment and enrolled on April 30th but wanted coverage for May 1st? Since they don't have payment, how does the system know they want it for May 1st? Do I need to make a phone call to make sure it starts on May 1st?

A3. An individual with a \$0 premium that enrolls after the 23rd for the first day of the following month will be active for that first day of the following month. As outlined in the example above, if a member enrolls on April 30 for a May 1 start date and has a \$0 premium, coverage will be active starting on May 1.

Q4. Does the application show the member what their SEP date range is? Or does the member have to calculate the SEP date range themselves?

A4. The SEP end date is shown both in the online application and on the notice, members receive when they are approved for a SEP. In the online application it is on the eligibility results screen and will say that the household qualifies for a SEP and has until a specific date to shop and enroll.

Q5. Do you have a sample of a multiple month premium bill? How will the patient know this is for possible retro coverage and not think it's a new monthly increase in Connector plan?

A5. If a member enrolls after the 23rd and must pay for two months the bill does not explain the payment is for two months. It will just contain the premium amount for the two months of



coverage. If the member does not pay by 23rd of the month, they will receive another initial bill and receive an additional month to pay for three months of coverage. For example, if an individual enrolls on 4/25 for a 5/1 start date, and does not pay for May and June by 5/23, they will receive another bill on 6/1 stating they have until 6/23 to pay for May, June, and July coverage. This bill will contain the following special invoice message:

 "We did not receive a payment to begin your coverage. If you still want to enroll in coverage, please pay this bill in full by the due date. If you do not pay this bill in full, your coverage will be cancelled."

Q6. Can you make a chart of the new information on making a payment for the start date and if they make a double payment to start the next month? Our training states the binder payment is due by the 23rd. I have that date in my head and tell our members, but with this new information it will help many members.

A6. Thank you for this feedback. We will work to determine additional training information that can be helpful to further explain the new payment options.

Q7. Press release has this sentence that doesn't end: "The rule proposes solutions to problems Massachusetts does not have. Those proposed changes include:"

A7. This issue has been resolved.