

## MassHealth Requirements

**1. MassHealth Eligibility Requirements for Enrollment in MMPs** – *This section supplements and clarifies the requirements of §10.5 of the MMP Enrollment and Disenrollment Guidance.*

In addition to the eligibility criteria listed in Section 10, an individual must meet the following criteria in order to be eligible to enroll:

- Age 21 through 64 at the time of enrollment,
- Eligible for MassHealth Standard or MassHealth CommonHealth, and
- Without other comprehensive public or private insurance.

Individuals are not eligible to enroll if:

- they are enrolled in an HCBS Waiver, or
- they are residents of an Intermediate Care Facility.

The following provisions also apply:

- individuals who turn 65 while enrolled in an MMP may remain enrolled as long as they remain eligible for MassHealth Standard and they continue to meet the other eligibility requirements;
- eligible MassHealth members enrolled in a Medicare Advantage plan, Program of All-inclusive Care for the Elderly (PACE), Employer Group Waiver Plans (EGWP) or other Employer-Sponsored Plans, or plans receiving a Retiree Drug Subsidy (RDS), and who meet the eligibility criteria for this Demonstration, may enroll in an MMP if they disenroll from their existing programs; and
- individuals participating in the CMS Independence at Home (IAH) demonstration who meet the eligibility criteria for this Demonstration may enroll or be enrolled in an MMP if they disenroll from IAH.

**2. Elections and Effective Dates** - *This section supplements and clarifies the requirements of §20 of the MMP Enrollment and Disenrollment Guidance.*

In addition to the options listed in the guidance, on an ongoing (i.e., month to month) basis, individuals who meet the criteria for enrollment in MMPs may:

- switch from MassHealth FFS to an MMP,
- switch from a PACE organization to an MMP,
- switch from an IAH organization to an MMP,
- switch from an MMP to MassHealth fee-for-service (FFS),
- switch from an MMP to an IAH organization,

- switch from an MMP to a Senior Care Options (SCO) plan (if the individual meets the eligibility criteria for SCO).

Further, MassHealth's customer service vendor will accept and process enrollment requests during normal business hours, Monday – Friday, 8:00 am – 5:00 pm.

**3. Effective Date of Voluntary Disenrollment** - *This section supplements and clarifies the requirements of §20.2 of the MMP Enrollment and Disenrollment Guidance.*

Individuals have until the last day of the month to request disenrollment. Individuals will be directed to call the State's enrollment vendor to request disenrollment, but may request disenrollment directly from 1-800-MEDICARE. The effective date for all voluntary disenrollments is the first day of the month following the State's receipt of the enrollment request. The State will establish a reconciliation process to address any retroactive enrollment changes.

**4. Enrollment Procedures** - *This section supplements and clarifies the requirements of §30 of the MMP Enrollment and Disenrollment Guidance.*

MMPs may not accept enrollment, disenrollment, transfer, and opt-out requests directly from individuals and process such requests themselves, but instead, must refer individuals to the State enrollment broker. The State will not defer enrollment activities to the MMP.

**5. Passive Enrollment** - *This section supplements and clarifies the requirements of §30.1.4 of the MMP Enrollment and Disenrollment Guidance.*

**A. Individuals Subject to Passive Enrollment**

In addition to the listed eligibility criteria for passive enrollment, an individual must meet all State eligibility criteria for the Demonstration, as described in this Appendix, Section 1.

Also, the State will not passively enroll individuals who are currently enrolled in a Medicare Advantage, Medigap or PACE plan, currently enrolled in the IAH demonstration, or who reside in a county where there are fewer than two MMPs covering all of the zip codes in that county (e.g. if there is one MMP covering the full county, and a second MMP covering part of that county, there will not be passive enrollment in that county).

**B. Passive Enrollment Process**

In addition to the procedure provided in the guidance, note that MMPs covering a partial county will not receive passive enrollments in that county.

**C. Excluding Individuals with Employer or Union Coverage from Passive Enrollment**

Individuals with other comprehensive employer or union coverage who otherwise meet the eligibility criteria for the Demonstration may enroll in an MMP if they disenroll from their existing programs.

#### **D. Other Signatures**

In addition, if someone other than the eligible individual helps the individual fill out the enrollment form, this party must clearly indicate his/her name on the enrollment form. This includes pre-filling out any information on the enrollment form and identifying the plan selection.

#### **6. ESRD and Enrollment (applicable to States for which an individual's ESRD status is an enrollment eligibility criterion) - This section supplements and clarifies the requirements of §30.2.4 of the MMP Enrollment and Disenrollment Guidance.**

Individuals with ESRD may enroll via self-selection and will not be excluded from passive enrollment on the basis of their ESRD status. All eligibility and enrollment processes for the Massachusetts Demonstration will apply to these individuals.

#### **7. Individuals with Employer/Union Coverage – Other Sources - This section supplements and clarifies the requirements of §30.2.6 of the MMP Enrollment and Disenrollment Guidance.**

Individuals with other comprehensive employer or union coverage who otherwise meet the eligibility criteria for the Demonstration may enroll in an MMP if they disenroll from their existing programs.

#### **Voluntary Disenrollment by Member - This section supplements and clarifies the requirements of §40.1 of the MMP Enrollment and Disenrollment Guidance.**

Note that the State enrollment broker is MassHealth's customer service vendor.

#### **9. Loss of Medicaid Eligibility - This section supplements and clarifies the requirements of §40.2.3 of the MMP Enrollment and Disenrollment Guidance.**

Note that an individual cannot remain a member in an MMP if he/she no longer meets eligibility criteria as outlined in this document and §10.5 of the MMP Enrollment and Disenrollment Guidance. Please also note that in Massachusetts, MMPs are excluded from offering the "Optional Period of Deemed Continued Eligibility Due to Loss of Medicaid Eligibility" as may be available in other states. Per §30.1.4 of the MMP Enrollment and Disenrollment Guidance, the State will not passively enroll individuals who are automatically disenrolled from an MMP due to loss of Medicaid eligibility if the person has been passively enrolled previously during the calendar year.