





Learning Series

Massachusetts HealthCare Training Forum (MTF)

Summer 2023

Revised 7/26/23

MassHealth and the Health Connector

Agenda

- Update: Request for Information (RFI)
- MAhealthconnector.org System Updates
- Health Connector Annual Redetermination Process and Reminders







Update: Request for Information (RFI)

Reminder: Request For Information (RFI)

As part of Unwind, MassHealth is returning to business-as-usual processes for Requestions for Information and Verifications

- Members are sent notices Requesting Information (RFIs) or Verifications when MassHealth is not able to verify their information
 - This could occur when someone newly applies for MassHealth, reports a change, or takes other actions within their case
 - Most RFIs are due to differences in self-attested information vs. federal or state data source
 - Some common examples: income, residency, Social Security Number (SSN), citizenship, immigration, and other factors
 - RFIs are sent in white envelopes, and members have 90 days to respond to a RFI or Verification. If members do not respond by the deadline, MassHealth determines their eligibility based on the information that is available, which may result in lesser coverage or termination



Reminder: Request For Information (RFI): Normal Maintenance

- How was RFIs and Verifications treated during the PHE?
 - While MassHealth continued to send RFIs and Verifications during the public health emergency (PHE), MassHealth members stayed in their coverage to comply with the federal Maintenance of Effort requirements
- How will RFIs and Verifications be treated moving forward?
 - The federal Maintenance of Effort requirements ended effective on April 1, 2023, and MassHealth is returning to its business-as-usual processes for RFIs and Verifications. This means that some members' coverage may change if they do not respond (specifically, members who have had a renewal in the past twelve months and are no longer subject to continuous coverage requirements). Thus,
 - Members need to respond to RFIs and Verifications by the due date to ensure they continue to receive the best benefits for which they are eligible



Update: Request For Information (RFI) Outreach Efforts

- MassHealth and health plan partners will be conducting direct member outreach to notify members about the need to respond to RFIs and Verifications
 - Methods: Text, Email, and Robocall
- Timing of returning to business-as-usual processes for RFIs and Verifications:

 MassHealth prioritized member outreach and support for renewals in spring 2023.

 Therefore, MassHealth temporarily delayed the return to business as usual for RFIs and Verifications in order to provide time to communicate with stakeholders and set up processes to support members in maintaining the coverage for which they are eligible. MassHealth will soon end the Maintenance of Effort protections related to RFIs and Verifications for members who have renewed in the past twelve months.

 To return to business as usual, MassHealth will take a two-part approach:
 - 1. MassHealth will "deactivate" any outstanding RFIs or Verifications that were issued between 4/1/2023 and 7/17/2023
 - This group of members will have their coverage "protected" until they are selected for a renewal

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Update: Request For Information (RFI) Outreach Efforts (continued)

- 2. For RFIs and Verifications issued after 7/17/2023, MassHealth will return to business as usual for new members and members who have been renewed in the past twelve months, meaning members' coverage may change or terminated if they do not respond to an RFI or Verification
 - Members will have 90 days to respond and provide the needed information
 - For members who do not respond by the due date, MassHealth will determine eligibility based on the information that is available. This determination may result in a lesser coverage type or loss of MassHealth
 - MassHealth will work with its partners to ensure that members receive outreach whenever an RFI or Verification is issued throughout the unwinding period

RFI Information in HIX

- These deactivated RFI will be viewable by members, and Assister Portal users
- Information will display on the "My Account" screen as "**Not Required** But you can still provide proofs."





MAhealthconnector.org System Updates

MAhealthconnector.org System Updates

(continued)

On July 26, 2023, Release 27 (R27) was deployed in the online system at MAhealthconnector.org or commonly known as HIX.

- This release will include the following updates:
 - 1. MassHealth Initial and Continuous Disability Review
 - 2. Update to Race, Ethnicity, Language, and Sexual Orientation Questions
 - 3. Update to the My Account Dashboard
 - 4. Update to Other Health Insurance Question
- Reminder: Following any systems release or update, members with an account and Assisters should clear their cache or internet history before accessing the online application or the Assister Portal for a better web experience (if you need assistance, please check with your PC support team)
- For more technical information, visit the <u>Getting Started Guide</u>: scroll down to choose the subsection: How to clear your browser's cache (history/memory)



MassHealth Initial and Continuous Disability Review

- In R27, the online system was updated to support MassHealth's Initial Disability Reviews (IDR) for individuals who are potentially disabled and Continuous Disability Reviews (CDR) processes, for individuals with a "MA verified disability"
- There is no change to the existing MassHealth Disability Evaluation Services (DES)
 process for Initial Disability Reviews (IDR). However, MassHealth will now resume
 the process for Continuous Disability Reviews (CDR) and transition the process flow
 to the online system
- Members who currently have a verified "MA disability" by DES with a review date in the past will be systematically selected for a CDR
 - With this update, the online system will perform continuous review of member's disability status to determine if the member continues to have a disabling condition through Disability Evaluation Service (DES)
 - The CDR will ensure that the member's disability benefits are reviewed, and appropriate action is taken when the member is no longer deemed disabled by DES





Race, Ethnicity, Language, Sexual Orientation and Gender Identity Questions

- R27 improves the online application flow by incorporating the improvements in health equity data collection and processing within the online system, in order to refine the understanding of health equities and health inequities among QHP and MassHealth members
- This release includes the following:
 - Updates to Language Preference selections
 - 2) Adds new Sexual Orientation and Gender Identity (SOGI) questions to the online application
 - a) Paper application to be updated in August
 - 2) Updates to existing Race and Hispanic Ethnicity questions
 - 3) Adds new Ethnicity question
 - 4) Updates to the existing Sex question and tooltip

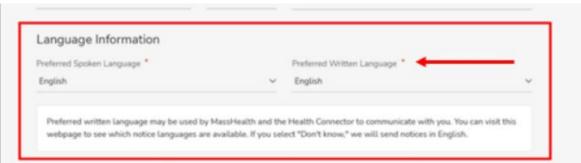




Race, Ethnicity, Language, Sexual Orientation and Gender Identity Questions: Language Question

The online system includes the following updates:

- Make the "Language Selection" a required option to answer when creating a profile in for all Users
 - Users will be required to make a language selection though they can select 'Don't Know'
 - Selecting 'Don't Know' will generate notices in English
 - If a Language is not selected the system will not default to "English"
- Updates the language selection options and informational text for "Preferred Spoken Language" and "Preferred Written Language" on the "Create Profile -Individual & Families", "Head of Household Contact Information", "Profile", and "Make Other Changes" screens





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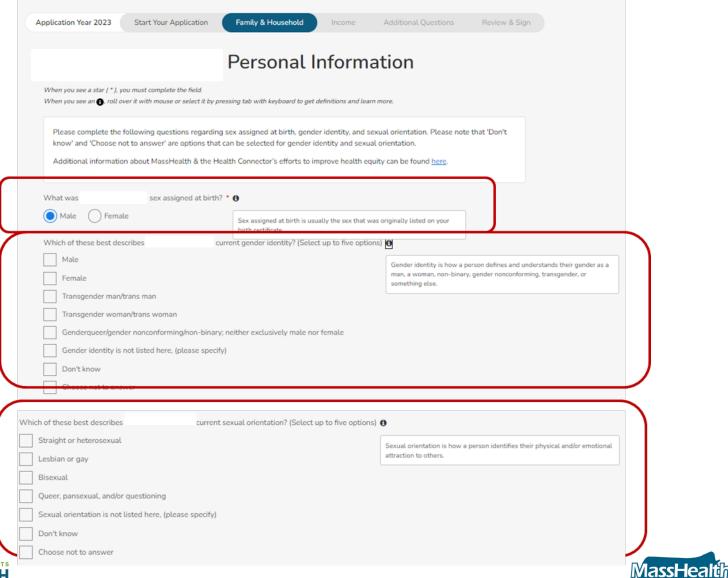
Questions: Race, Ethnicity, and Sexual Orientation

- Updates the existing "Sex" question, with two new optional questions to capture "Sexual Orientation" and "Gender Identity" information on the "Personal Information" screen
 - The existing required "Sex" question and tooltip are updated with new language.
 Members can select one response: What was applicant/member's sex assigned at birth?
 - Two new optional questions for sexual orientation and gender identity (SOGI) was added: Which of these best describes (applicant/member's) current gender identity? and Which of these best describes (applicant/member's) current sexual orientation?
 - Users can select up to five responses for each SOGI question
 - Questions are <u>optional</u> and can be left blank
 - Selection options include 'Don't know' and 'Choose not to answer'





Sample Screenshot – Personal information





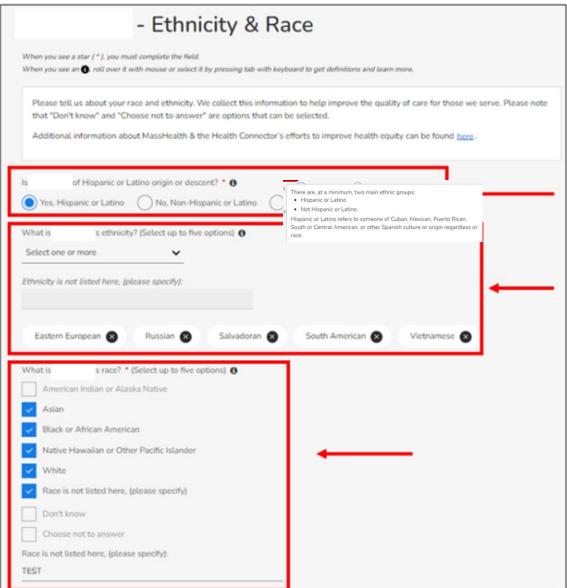
Questions: Race, Ethnicity, and Sexual Orientation (continued)

- Update to the existing "Hispanic or Latino origin" question, selection options, and tooltip language
 - Selection options have changed; added "Don't know" and "Choose not to answer"
 - Questions:
 - Is (applicant/member)- of Hispanic or Latino origin or decent?
 - What is (applicant/members) ethnicity?
 - What is (applicant/member's) race?
 - Now a required question
 - Users can select up to 5 options
- Updates the "Ethnicity" and "Race" questions, selection options, and tooltip language information on the "Ethnicity & Race" questions





Sample Screenshot – Ethnicity & Race





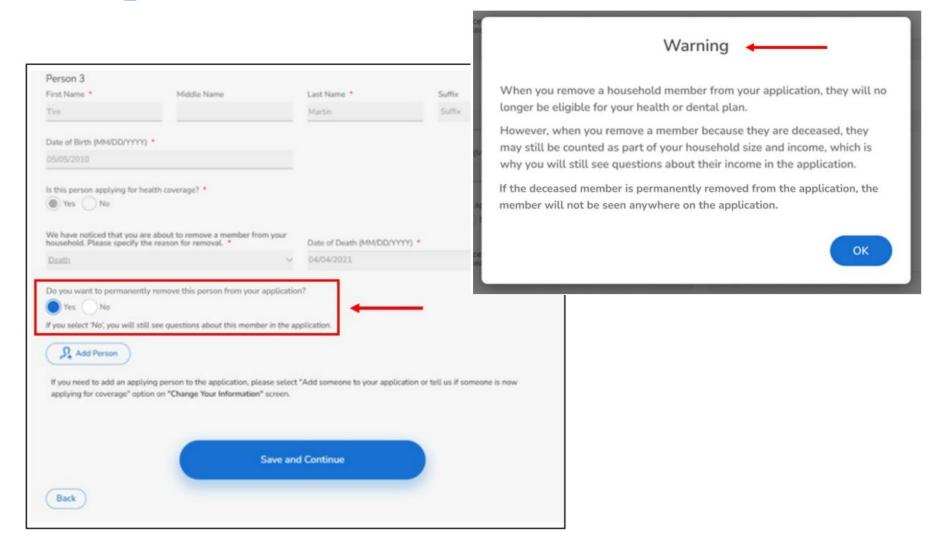
Update to RAC Option: Remove a Household Member

- Before R27, the online system did not allow Users to permanently remove a deceased member from an application, even if the deceased member's information is no longer required for a Program Determination
- In R27, the system allows Users to permanently remove a non-HOH deceased member from the application if the year of death has passed
- Updates to the 'Who Are Your Household Members?' question
 - Deceased member's information will no longer remain in the online application, once removed
 - Updated existing warning message when a user chooses to remove a non-HOH deceased member and proceeds from the 'Who Are Your Household Members?' screen
 - A confirmation message will display when the User attempts to permanently remove the non-HOH deceased member during Initial application or Report A Change (RAC) process





Sample Screenshot







Identity Proofing

- Before R27, the online system did not require Identify (ID) proofing for individuals who submit paper or in-person applications
- If an account holder later comes back to create an online account using the "Client Invite" link process, HIX did not require them to be identity proofed. R27 will now require all account holders to be "ID proofed" in order to access their online accounts
 - This applies to existing account holders who have previously had access to their online account pre-R27, but who have not been ID proofed post-R27
 - The RIDP (Remote ID Proofing) process will be initiated for these individuals when they attempt to access their online accounts moving forward
 - The RIDP process will initiate for both new account holders when they first try to link to their online accounts AND existing account holders attempting to log into their existing online accounts for the first time after R27





Sample Screenshot: IDP Process

My Profile

The Federal Identification Proofing service is not able to verify your identity electronically. Please call Customer Service at 1-877-MA-ENROLL (1-877-623-6765) or TTY 1-877-623-7773 if you think you need to update your account for:

- . Full legal name, including middle name and suffix (for example, Jr., Sr.) if you have one
- · Date of birth
- · Current home address
- · Phone number

Click "Continue" to try to verify your identity remotely through the Remote Identity Proofing (RIDP) process. If we cannot verify your identity electronically, you must send proof of identity to the Health Connector to access your account information online.

Click here for more information

Your Profile information is hidden to protect your personal information. You need to verify your identity to access your account information online.

Below you can view and edit your personal profile information.





Sample Screenshot: RIDP Process

- If the account holder's identity cannot be verified electronically through the RIDP process, HIX will request the individual to verify identity manually and send a notice to request this information
- The account holder will be required to manually verify their ID before gaining access to their online account

My Profile

We tried to verify your identity remotely with the Federal Identification Proofing Service, but we were not able to verify it electronically. To access your account information online or apply online, you must send proof of your identity to the Health Connector. You will get a notice informing you how to verify your identity and where to send it. Learn where and how to send your proof of identity now.

Your Profile information is hidden to protect your personal information. You need to verify your identity to access your account information online.

When you see a star (*), you must complete the field.

When you see an 1 roll over it with mouse or select it by pressing tab with keyboard to get definitions and learn more.





Update to Question: Do You Need Help Paying for Health Coverage

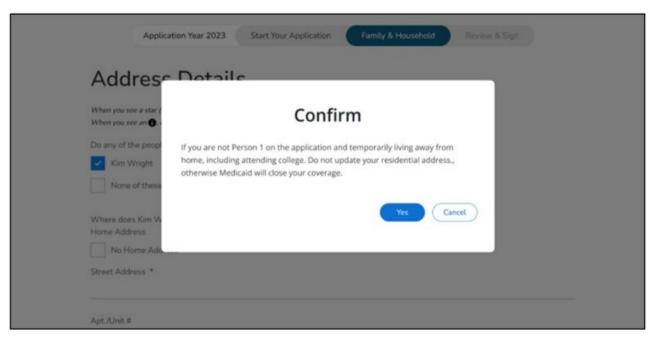
- R27 includes an update tooltip language for the "Yes" and "No" responses on the question of 'Do you need help paying for health coverage'
- A new confirmation pop-up message will alert Users to confirm they understand they will no longer be eligible for MassHealth or the Health Connector (ConnectorCare or APTC) when the applicant or member switches application
- The same confirmation pop-up message will display when the members move from applying to not applying on the 'Who are your household members' screen





Address Update

- When a non-HOH reports they live at a different address than the HOH, a new popup message informs and requests confirmation to move forward with the address update
- Do not update the address if the household member is temporarily living at another address (ex. college student)











Health Connector Annual Redetermination Process and Reminders

Health Connector Annual Redeterminations & Renewals Processes

The Health Connector's Redetermination and Renewal Processes are a set of activities that happen each year before and during the Health Connector's Open Enrollment period.

- Individuals with health insurance coverage through the Health Connector have their eligibility redetermined so that they can be renewed into coverage for the upcoming year
- In August and September, the Health Connector will start preliminary eligibility determinations for actively enrolled Health Connector members and Health Connector members who are part of mixed households
- Be on the look out for more information (email updates through the MTF listserv) about these processes and any plan changes that may be occurring for coverage starting
 January 1, 2023

Preliminary
Eligibility
Determination

August - September

Preliminary
Eligibility Notice
and Review
Period

August - October

Final Eligibility

Determination &

Renewal Notice

October

Renewal into a Health Connector Plan

November

Billing and Payment for January 1
Coverage

December

Health Connector Hardship Waiver Reminder

As you continue to help members who are transitioning from MassHealth coverage to Health Connector coverage, remember the Health Connector has an existing premium hardship waiver program for ConnectorCare members who may need help with their ConnectorCare premium cost

- Members must meet criteria to be granted a waiver or reduction of premiums
- Before reviewing the hardship waiver criteria, review the member's application and make any updates that may impact eligibility
- To assist the member with the premium hardship waiver process, go to <u>Premium Payment Help Options – Massachusetts Health Connector</u> <u>(mahealthconnector.org)</u>

To review the policy and the criteria go to:

https://www.mahealthconnector.org/wp-content/uploads/NG-17-Waiveror-Reducation-of-Premium.pdf



Premium Payment Help Options

Having trouble affording your health insurance premium?

You have options through the Health Connector.

If you are a current member and have a ConnectorCare or Health Connector Plan, you may qualify for a lower health insurance premium if you are experiencing financial hardship.

Please choose from the options below and follow next steps to help you manage your health coverage.

- I'm making less money now because of a job loss or fewer hours worked. I'd like to see if I can qualify for a lower-cost Health Connector health plan going forward.
 - I'm having a hard time paying my hill right now because of special circumstances. I'd like to
- see if I can get a hardship waiver or reduction to lower my premium for a limited period of time.





Thank you