



What type of coverage does the consumer currently have?	What type of coverage is the consumer switching to?	When was termination requested? What date will termination notice have on it?	When will initial coverage end?	When will new coverage begin?
Moving from MassHealth to the Connector				
MassHealth (any type)	ConnectorCare/ Connector coverage with premium tax credits (PTCs)	On the 1st of month Between 2nd-last day of the month	Last day of the month that termination was requested Last day of the month following the month of requested termination	First day of the month following plan selection and premium payment(if there is one) by the 23rd of the month
MassHealth (any type)	Connector coverage without premium tax credits	Any time	14 days from when termination was requested	First day of the month following plan selection and premium payment by the 23rd of the month
Moving from MassHealth to a Different Form of MassHealth				
MassHealth Standard	MassHealth CarePlus, Family Assistance or Limited (i.e. less comprehensive MassHealth Coverage)	Any time	14 days from when termination was requested	Date MassHealth Standard ends (i.e., 14 days from when member receives termination notice)
MassHealth CarePlus, Family Assistance or Limited (i.e., less comprehensive MassHealth Coverage)	MassHealth Standard, MassHealth CommonHealth (i.e. more comprehensive MassHealth Coverage)	Any time	On date of coverage upgrade	10 days prior to date of eligibility determination. If member is required to submit verification, coverage begins to days prior to date of receipt