

MassHealth CommonHealth

MassHealth CommonHealth offers health care benefits similar to MassHealth Standard to disabled adults and disabled children who cannot get MassHealth Standard.

Who can get benefits

You may be able to get MassHealth CommonHealth if you are a resident of Massachusetts and are:

- ◆ a disabled child younger than age 19, or
- ◆ a disabled young adult aged 19 or 20, or
- ◆ a disabled adult aged 21 or older who:
 - works 40 hours or more a month or is currently working and has worked at least 240 hours in the six months immediately before the month of the application, or
 - is younger than age 65 and is not working, or if working meets certain state and federal rules.

MassHealth decides if you are disabled according to the standards set by federal and state law. For an adult, this generally means you have a mental or physical condition that severely limits your ability to work or to do certain activities for at least 12 months.

Income standards

If your household income is above 133% of the federal poverty level, you may have to pay a premium or meet a one-time-only deductible*. (This is explained on page 12.) See the chart on page 28 for the federal poverty levels.

* Disabled individuals aged 19-20 who are nonqualified PRUCOLs and have income at or below 150% of the federal poverty level will not be assessed a premium.

Disabled adults aged 19 or older

If your household income is above 150% of the federal poverty level, you will have to pay monthly premiums. The amount of the premium is based on

- ◆ your monthly income, as it compares to the federal poverty level,
- ◆ your household size, and
- ◆ if you have other health insurance.

If you must pay a premium, we will tell you the amount and send you a bill every month. For more information about MassHealth/CMSP premiums, see pages 29-32.

Premiums and copayments

Based on your income, you may be charged a premium. See pages 29-32. Certain adults may have to pay copayments for some medical services.

Other health insurance

If you have other health insurance, MassHealth may pay part of your household's health insurance premiums. See the section on "MassHealth and other health insurance" on pages 33-34.

Covered services

For MassHealth CommonHealth, covered services include the ones listed below. There may be some limits. Your health care provider can explain them.

- ◆ Inpatient hospital services*
- ◆ Outpatient services: hospitals, clinics, doctors, dentists, family planning, and vision care
- ◆ Medical services: lab tests, X rays, therapies, pharmacy services, eyeglasses, hearing aids, medical equipment and supplies, adult day health, and adult foster care (For more information about choosing and enrolling in a Medicare prescription drug plan, see page 34.)
- ◆ Behavioral health (mental health and substance abuse) services
- ◆ Well-child screenings (for children younger than the age of 21): including medical, vision, dental, hearing, behavioral health (mental health and substance abuse), and developmental screens, as well as shots
- ◆ Long-term-care services at home or in a long-term-care facility, including home health services
- ◆ Transportation services**
- ◆ Quit-smoking services

* *Certain restrictions can be found in the MassHealth regulations at 130 CMR 415.000.*

** *Certain restrictions can be found in the MassHealth regulations at 130 CMR 407.000.*

Important information for children and youth with significant mental health needs or serious emotional disturbance (SED)

MassHealth offers certain behavioral health services for eligible children and youth younger than the age of 21 who are enrolled in MassHealth Standard or MassHealth CommonHealth. If your child is ineligible for MassHealth Standard and a behavioral health assessment or other evaluation shows that your child has significant mental health needs or a serious emotional disturbance (SED), he or she may be disabled and eligible for MassHealth CommonHealth.

Additional services for children younger than age of 21

Children, teens, and young adults younger than age of 21 who are determined eligible for MassHealth CommonHealth are also eligible for Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services, which include all medically necessary services covered by Medicaid law. See 42 U.S.C. §§1396a(a)(10), 1396d(a), and 1396d(r). This means that MassHealth pays for any medically necessary treatment that is covered by Medicaid law, if it is delivered by a provider who is qualified and willing to provide the service. If the service is not already covered by the child's MassHealth coverage type, the prescribing clinician can ask MassHealth for prior approval (PA) to determine if the service is medically necessary. MassHealth pays for the service if prior approval is given.

A complete listing and a more detailed description of the services covered can be found in the MassHealth regulations at 130 CMR 450.105. You may have copayments for some services. More information on copayments can be found in the MassHealth regulations at 130 CMR 450.130.

▣ Coverage begins

If we get all needed information within 90 days, except for proof of disability, (or if you are a pregnant woman or a child or a young adult younger than age 21 who is eligible for provisional health care coverage as described on page 5), your coverage may begin 10 calendar days before the date MassHealth gets your application.

If you are eligible for health care coverage based on a disability, your coverage may begin 10 calendar days before the date MassHealth gets your application.

If you are eligible for premium assistance, you will begin to get payments in the month in which you are determined eligible for premium assistance, or in the month your health insurance deductions begin, whichever is later.

The one-time-only deductible

Certain disabled adults whose income is too high to get MassHealth Standard and who are not working at least 40 hours a month or who have not worked at least 240 hours in the six months immediately before the month of the application must meet a one-time-only deductible before getting MassHealth CommonHealth. The deductible is the amount that a household's income is higher than MassHealth's deductible income standard for a six-month period.

MassHealth will tell you if you must meet a deductible to get MassHealth CommonHealth. You will be told the amount of the deductible. To meet the deductible, you must have medical bills that equal or are more than the deductible amount. You may use the bills of any household member including yourself, your spouse, and your children younger than age 19 to meet your deductible. You are responsible for paying these bills.

You cannot use bills or portions of bills that are covered by other health insurance.

Medical bills that may be used to meet a deductible include

- ♦ the cost of health insurance premiums for your household over the six-month period,
- ♦ unpaid bills you got before or during the deductible period, and
- ♦ bills that were paid during the deductible period.

The deductible period begins 10 calendar days before the date that MassHealth gets your application and ends six months after that date. If you submit bills to meet a deductible, the medical coverage date also begins 10 calendar days before the date MassHealth gets your application.

A more detailed description of the MassHealth eligibility requirements, including premium schedules, can be found in the MassHealth regulations at 130 CMR 501.000 through 508.000. More details about the one-time-only deductible can be found at 130 CMR 506.000.

The deductible income standard

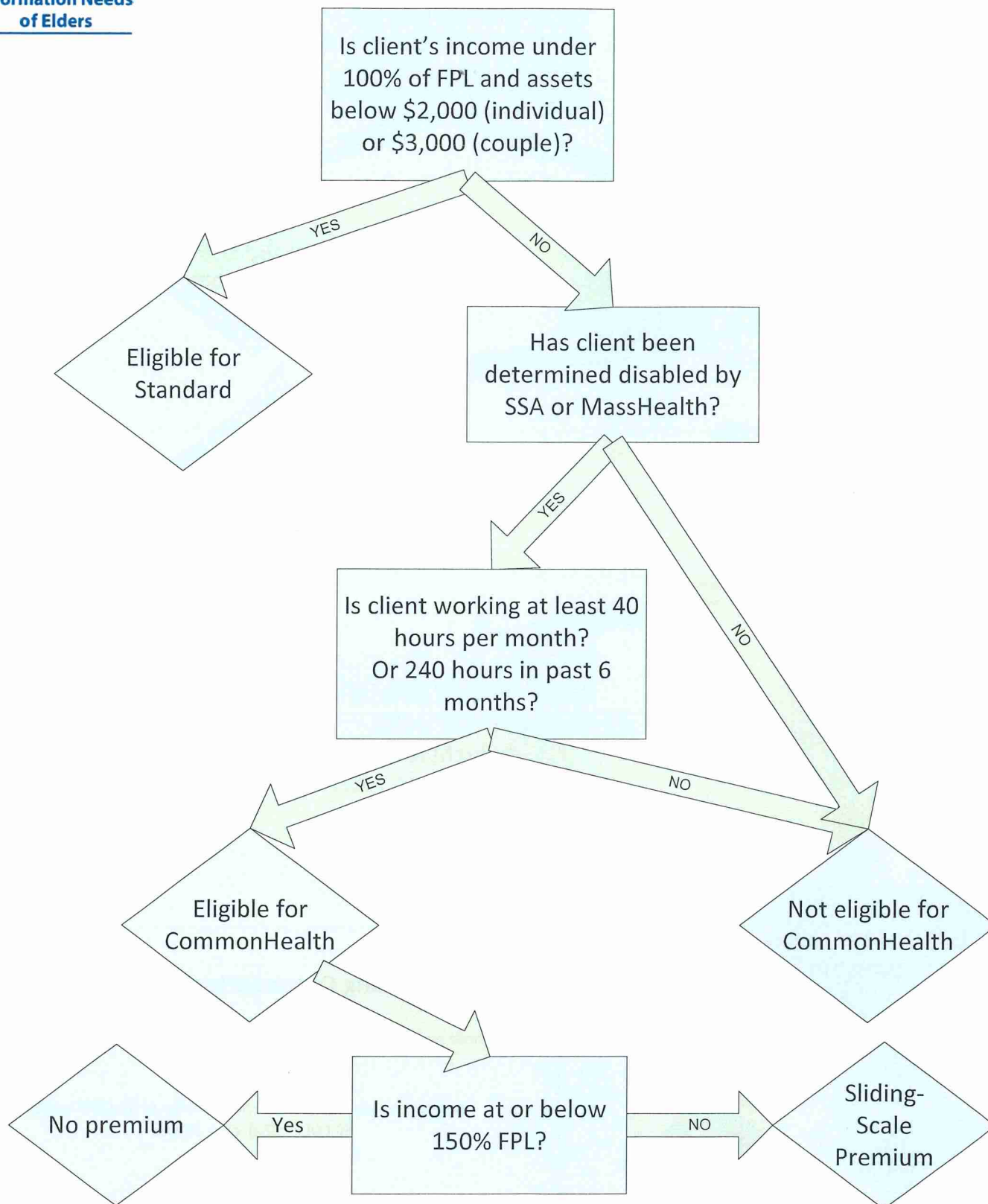
Family Size	Standard
1	\$542
2	\$670
3	\$795

Example

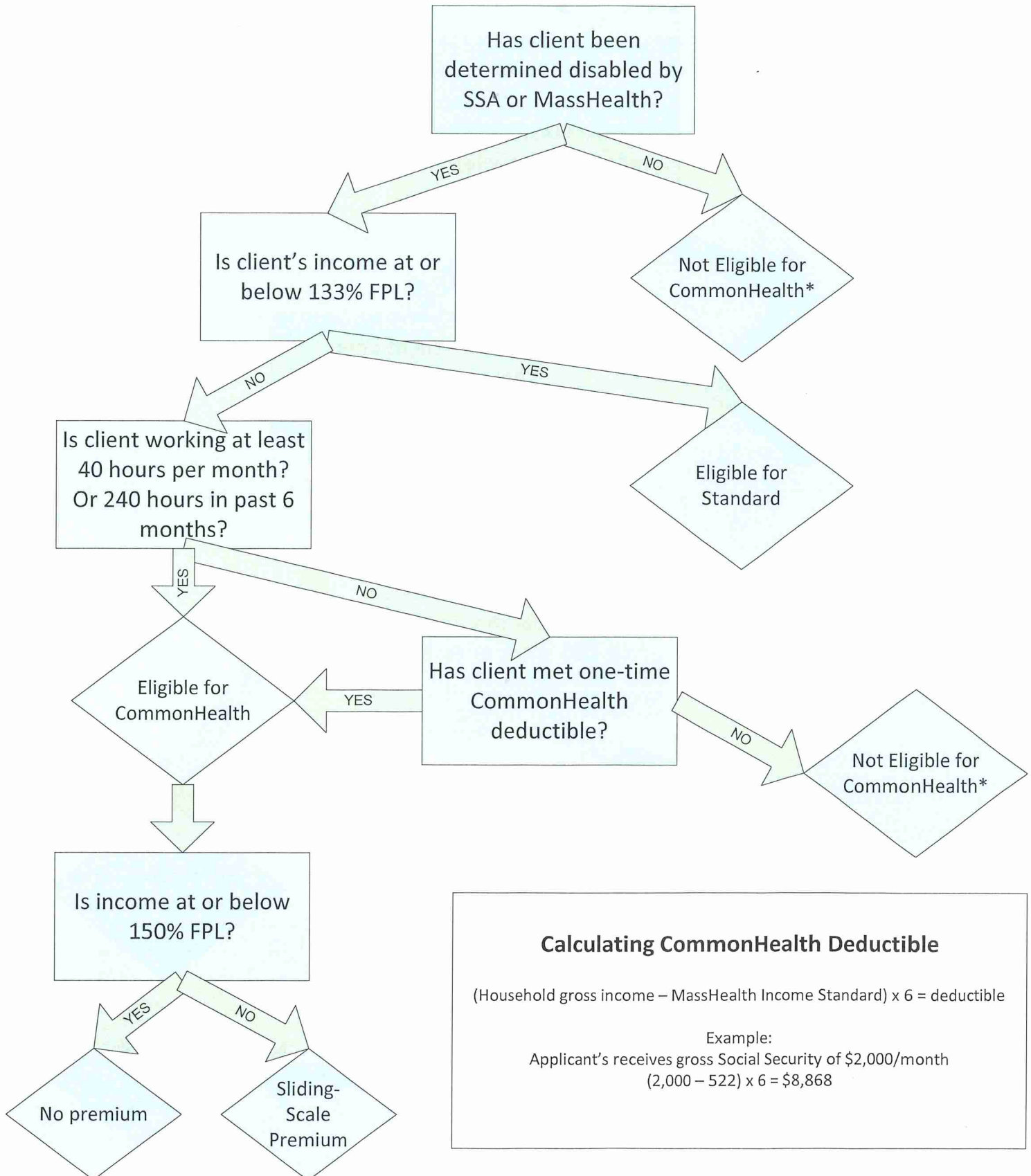
\$1,991	monthly income before taxes and deductions for a household of two
- \$670	income standard for a household of two
<hr/>	
\$1,321	excess income
× 6	six-month period
<hr/>	
\$7,926	deductible amount

In this example, a deductible is met when the household has medical bills that are not covered by any other health insurance and the bills total \$7,926.

CommonHealth Eligibility (65+ years old)



CommonHealth Eligibility (Under 65 years old)



* Could be eligible for Commonwealth Care or Health Safety Net—review eligibility criteria

Date:

To: MassHealth Enrollment Center

Subject: Letter to verify employment for application for CommonHealth

Dear Enrollment Center,

Currently I employ _____ (SS# _____) to
_____ for ____ hours weekly for which I pay \$ ____ per
hour.

Please contact me if you require further information.

Thank you.

Signature: _____

Name: _____

Address: _____

Phone: _____