

MASSHEALTH AND CONNECTORCARE ENROLLMENT TRACKER

JANUARY 2021

KEY FINDINGS:

- **MassHealth enrollment increased by 11.3% between March 31, 2020 and November 30, 2020. This increase was especially notable in the non-disabled adult population.**
- **ConnectorCare enrollment decreased by 1.3% in the most recent month that data was available (between November 2020 and December 2020). Overall, ConnectorCare enrollment does not seem to have increased significantly in response to the COVID-19 pandemic.**

In this issue brief we highlight the most recent monthly enrollment data available for MassHealth and ConnectorCare—Massachusetts’ two most prominent sources of publicly financed health insurance. (See sidebar for more information on these programs.) We compiled these data, and are highlighting trends to help policymakers, health care stakeholders, and others track how enrollment in these programs has changed since COVID-19 began affecting public health and the economy of the Commonwealth. We update this publication regularly with the latest enrollment data as it becomes available.

Two different forces may affect enrollment in MassHealth and ConnectorCare in the wake of the COVID-19 pandemic:

The economic downturn:

MassHealth and ConnectorCare are designed in part to act as safety nets—providing coverage to people who lose their jobs and their employer-sponsored insurance. Given the current increase in unemployment caused by the COVID-19 pandemic,¹ many analysts have predicted that MassHealth and ConnectorCare caseloads will increase.²

Policy changes to promote coverage and continuity of care:

In response to the COVID-19 pandemic, MassHealth and the Health Connector have also enacted temporary policy changes to promote coverage and continuity of care. These policy changes would likely cause higher caseloads in both programs even if there weren’t an increase in the number of applications for the programs. For example, MassHealth has paused its redeterminations; this means MassHealth members enrolled as of March 18, 2020 or later will not lose coverage or experience a decrease in benefits for any reason other than moving out of state or voluntarily withdrawing from the program. Similarly, between March 15, 2020 and August 2020 the Health Connector did not terminate or downgrade anyone for failure to respond to a Request for Information, and it delayed April terminations of past-due accounts. For more information on temporary policy changes enacted to help people in the Commonwealth enroll in and maintain MassHealth, ConnectorCare, and other sources of publicly financed coverage, please see *Promoting Access to Health Care and Coverage During a Public Health Crisis: COVID-19-Related Changes in Massachusetts Affecting MassHealth, Health Connector programs, and the Health Safety Net*.

WHAT ARE MASSHEALTH AND CONNECTORCARE?

MassHealth: MassHealth is Massachusetts’ Medicaid and Children’s Health Insurance (CHIP) programs. MassHealth provides coverage for over 1.8 million members—more than a quarter of the state’s residents. MassHealth covers low-income families for whom employer-sponsored insurance is unavailable or unaffordable, people who are affected by economic downturns, and people with physical, behavioral, and intellectual disabilities, among others. MassHealth is jointly financed by the state and the federal government.

ConnectorCare: ConnectorCare is subsidized health insurance offered through the Health Connector to low- and moderate-income families who do not qualify for MassHealth or other public coverage, and who do not have affordable offers of employer-sponsored insurance. Over 200,000 residents of the Commonwealth are covered by ConnectorCare. ConnectorCare is funded in part by federal subsidies offered through the Affordable Care Act; the state also contributes wrap-around subsidies to make the plans even more affordable to consumers.

¹ WBUR News & Wire Services, “38,000 New Unemployment Claims Were Filed In Mass. Last Week,” May 21, 2020.

Available at: <https://www.wbur.org/bostonmix/2020/05/21/unemployment-figures-may-16-massachusetts-coronavirus>.

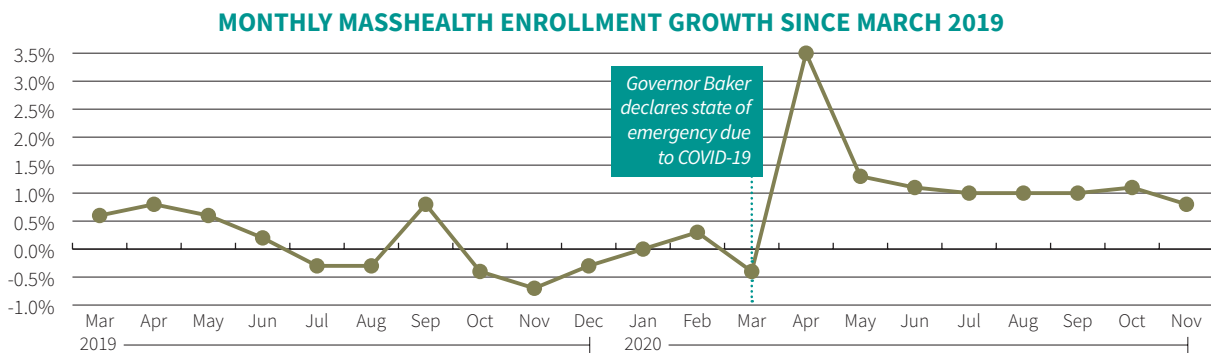
² Simmoneau, Ben. WCVB 5 Boston, “Massachusetts bracing for surge of new health connector applicants amid coronavirus layoffs,” May 14, 2020.

Available at: <https://www.wcvb.com/article/massachusetts-bracing-for-surge-of-new-health-connector-applicants-amid-coronavirus-layoffs/32480250#>.

The analysis below is intended to help readers spot trends in enrollment in these programs. It is not intended to establish which of the forces described above, or what other factors, might be driving any changes in enrollment.

MASSHEALTH

MassHealth enrollment increased by 11.3% between March 31, 2020 and November 30, 2020. This increase was especially notable in the non-disabled adult population.



MASSHEALTH: 1-MONTH ENROLLMENT CHANGE, BY ELIGIBILITY GROUP

MASSHEALTH ELIGIBILITY GROUPS	OCTOBER 2020–NOVEMBER 2020 1-MONTH ENROLLMENT CHANGE
Non-disabled children (age 0–20)	0.4%
Non-disabled adults (age 21–64)	1.6%
Disabled children (age 0–20)	-0.1%
Disabled adults (age 21–64)	0.1%
Seniors	0.3%
Other ³	-0.8%
TOTAL	0.8%




MASSHEALTH: CUMULATIVE ENROLLMENT CHANGE SINCE COVID-19 AND FOR A PRE-COVID-19 COMPARISON PERIOD, BY ELIGIBILITY GROUPS

MASSHEALTH ELIGIBILITY GROUPS	MARCH 2019–NOVEMBER 2019 CUMULATIVE CHANGE FOR COMPARISON PRE-COVID-19 (CHANGE OVER 8 MONTHS)	MARCH 2020–NOVEMBER 2020 CUMULATIVE CHANGE SINCE COVID-19 (CHANGE OVER 8 MONTHS)	VARIANCE
Non-disabled children (age 0–20)	1.7%	6.9%	5.2%
Non-disabled adults (age 21–64)	-0.3%	21.2%	21.5%
Disabled children (age 0–20)	1.1%	1.2%	0.0%
Disabled adults (age 21–64)	-0.3%	2.3%	2.6%
Seniors	1.2%	5.4%	4.1%
Other ³	24.8%	53.4%	28.6%
TOTAL	0.7%	11.3%	10.7%

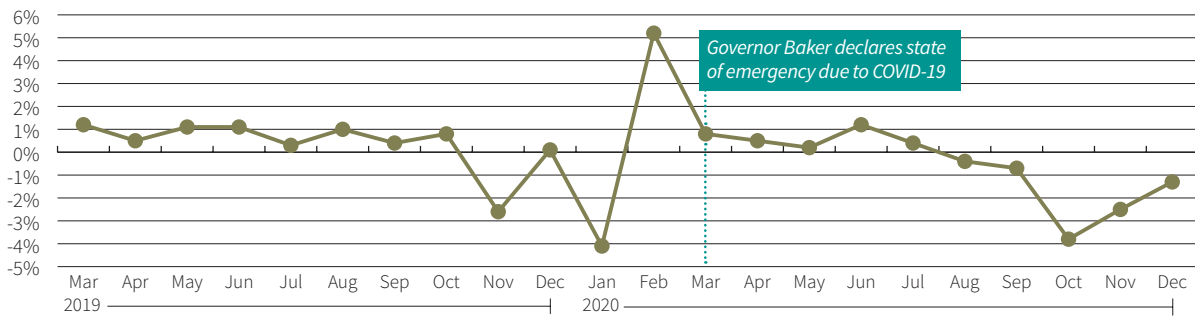
³ This group is very small (3,000–6,000 per month), comprised mostly of members in correctional facilities.

CONNECTORCARE

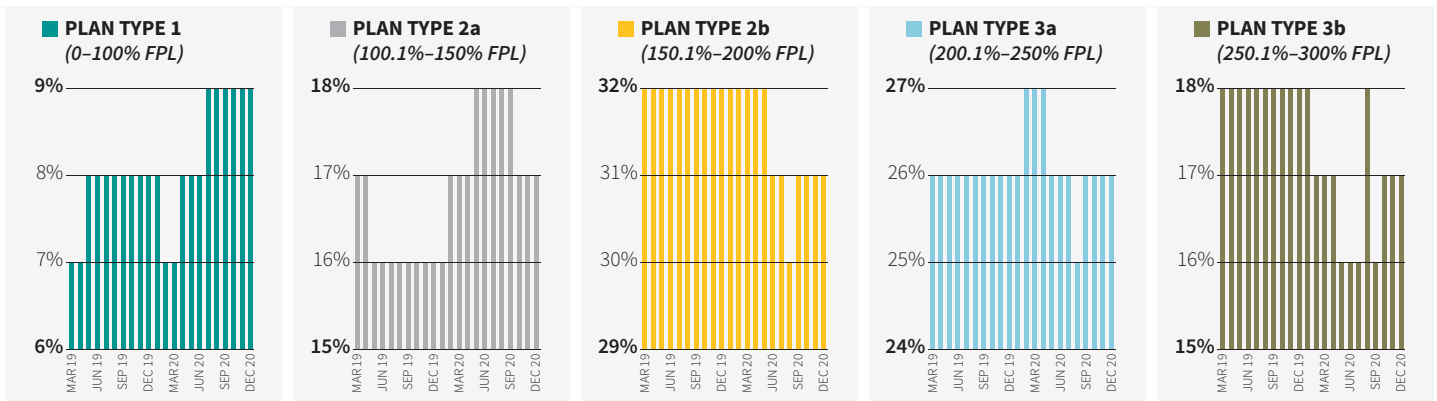
ConnectorCare enrollment decreased by 2,794 people, or 1.3%, between November 1, 2020 and December 2, 2020.^{4,5} Overall, ConnectorCare enrollment does not seem to have increased significantly in response to the COVID-19 pandemic. However, there is some evidence that enrollment within ConnectorCare has been shifting to the more heavily subsidized plan types that are offered to those with lower incomes.^{6,7} For example, 9% of ConnectorCare members are now enrolled in Plan Type 1; this is up from 8% in June 2020 and a low of 7% in some months over the past year.

<p>TOTAL CONNECTORCARE ENROLLMENT AS OF DECEMBER 2, 2020</p>  <p>205,276⁸</p>	<p>DECREASE IN TOTAL CONNECTORCARE ENROLLMENT SINCE NOVEMBER 1, 2020⁹</p>  <p>2,794 (a 1.3% decrease in one month)</p>	<p>DECREASE IN TOTAL CONNECTORCARE ENROLLMENT SINCE MARCH 1, 2020</p>  <p>13,900 (a 6.3% decrease over nine months)</p>
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MONTHLY CONNECTORCARE ENROLLMENT GROWTH SINCE MARCH 2019



MONTHLY CONNECTORCARE PLAN TYPE DISTRIBUTION SINCE MARCH 2019



4 Enrollment as of December 2, 2020, retrieved from “Health Connector Board Report Metrics—December 2020” dated December 2, 2020. Enrollment from previous months are retrieved from the Health Connector Summary Report from those months, available on the Health Connector website: <https://www.mahealthconnector.org/about/board-meetings>.

5 In response to the COVID-19 pandemic, between March 15, 2020 and August 2020, the Health Connector did not terminate or downgrade anyone for failure to respond to a Request for Information; however, in late August and early September 2020, overdue requests were closed out in advance of annual processes that create renewal year applications. Further, this annual redetermination process encourages members to update their applications. As a result, Health Connector membership shows more volatility in recent months than earlier in 2020.

6 The cost of ConnectorCare plans to their members differ depending on the plan type. The plan type that a person qualifies for is based on their income; people with lower incomes are expected to contribute less towards the costs of their coverage. Plan Type 1 is available to those with incomes between 0 and 100% of the federal poverty level (FPL), Plan Type 2A is available to those with incomes between 100.1 and 150% FPL, Plan Type 2B is available to those with incomes between 150.1 and 200% FPL, Plan Type 3A is available to those with incomes between 200.1 and 250% FPL, and Plan Type 3B is available to those with incomes between 250.1 and 300% FPL.

7 The data used for this report does not allow tracking of membership across MassHealth and ConnectorCare. It is possible that there are members with coverage moving from ConnectorCare to MassHealth, as a result of declining income, just as there are shifts within ConnectorCare enrollment to plan types associated with lower income.

8 Enrollment as of December 2, 2020, retrieved from “Health Connector Board Report Metrics—December 2020” dated December 2, 2020.

9 Enrollment data drawn from monthly Health Connector Summary Reports. These reports include two different sets of enrollment figures: (1) Enrollment as of Report Date, defined as the total number of members with coverage in that month as of the current report date and reflecting retroactive adds and terminations in the coverage month they take effect. These enrollment counts are dynamic. (2) Enrollment as of Initial Report Date, defined as the total number of members who were enrolled in coverage as originally reported in the Health Connector Board Report Metrics published for that month, excluding retroactivity. These enrollment counts remain static month to month. In order to ensure an apples-to-apples comparison with the current month’s enrollment figures (which don’t yet reflect retroactive adds and terminations), we use Enrollment as of Initial Report Date for each historical month.