

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

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The state of Massachusetts, with support from the federal government, has implemented several policy and programmatic changes intended to promote access to health care services and health insurance coverage during the COVID-19 pandemic. This table is intended to serve as a centralized resource that documents and describes the policy, regulatory, and administrative actions pertaining to MassHealth, the state Medicaid program¹; the Health Connector, the state's insurance marketplace; and the Health Safety Net (HSN), which pays for certain medically necessary services that qualified low-income patients receive at Massachusetts community health centers (CHCs) and acute care hospitals, and that directly impact access to care and coverage for consumers who are eligible for these programs. Since policies and programs are changing frequently in the current environment, this resource will be regularly updated.

Explore the policy and programmatic changes by category:

- [MassHealth: Eligibility](#)
- [MassHealth: Appeals](#)
- [MassHealth: Access to Benefits](#)
- [Health Connector Programs](#)
- [Health Safety Net: Eligibility](#)
- [Health Safety Net: Access to Services](#)
- [Coverage of COVID-19 Testing, Treatment, and Vaccine Administration](#)
- [Office Closures](#)
- [Miscellaneous](#)

¹ This document refers to several specific coverage types within the MassHealth program, including MassHealth CommonHealth, MassHealth Standard, MassHealth Limited, among others. These coverage types have different eligibility criteria and include different benefits. For more information on these coverage types, eligibility criteria, and covered services, please see www.mass.gov/service-details/masshealth-coverage-types-for-individuals-and-families-including-people-with.

CHANGE	EFFECTIVE DATE ²	SOURCE
MASSHEALTH: ELIGIBILITY³		
<p>Protection from Loss of Coverage: MassHealth members⁴, enrolled as of March 18, 2020, or later, will not lose coverage or have a decrease in benefits for any reason other than moving out of state. This means most MassHealth members will remain in the same eligibility coverage group despite circumstances that would otherwise mean a loss of coverage or a change to a type of coverage offering fewer benefits.</p> <p>However, beginning in May 2021 information about a change in circumstances may result in some adults moving to a different Medicaid coverage type (such as from MassHealth Standard to CarePlus), but not a loss of all Medicaid coverage or a move to non-Medicaid coverage.</p> <p>As of July 6, 2021, MassHealth further modified the protection from loss of coverage for some members who are dually eligible for Medicaid and Medicare that can impact their coverage.⁵</p>	<p>March 18, 2020 – end of the month that the federal public health emergency ends</p> <p>May 2021 (MassHealth modified this protection to allow for certain changes from one Medicaid coverage type to another)</p> <p>July 6, 2021 (MassHealth further modified this protection for some dually-eligible members)</p>	<ul style="list-style-type: none"> • MassHealth COVID-19 FAQ • Eligibility Operations Memo: 02-09 • CMS FAQs for State Medicaid and Children’s Health Insurance Program (CHIP) Agencies (January 2021) • 42 CFR 433.400 (effective November 2, 2020) • MassHealth Eligibility Update (May 2021): Renewals/RFIs and Continuous Coverage During the Federal Public Health Emergency • Massachusetts Health Care Training Forum (MTF) July 2021 Slide Presentation (slides 21-23) • CMS Fact Sheet on Updated Policy for Maintaining Medicaid Enrollment during the Public Health Emergency for COVID-19 • MassHealth Eligibility Operations Memo (September 2021): Updated MassHealth Response to Coronavirus Disease (COVID-19) Introduction

² The “effective date” column shows when a change took effect and how long it will remain in effect according to one or more of the sources shown in the “source” column. Because MassHealth and the Health Connector are making these changes as quickly as possible to respond to the pandemic and to related federal policy changes, some effective dates are not yet specified in preliminary sources. Most changes are tied to either the [state emergency](#), which was declared by Governor Baker on March 10, 2020 and ended on June 15, 2021, or to the national emergency declarations. At the national level, the Secretary of Health and Human Services, declared a [public health emergency](#) effective January 27, 2020, and the President declared national emergencies under the [Stafford Act](#) and the [National Emergencies Act](#) on March 13, 2020. However, because the environment is fast changing, we anticipate that many of the end dates listed in this column will change as federal and state policymakers address the transition from the emergency period and evaluate the continued need for these new policies to remain in effect. For example, in some of its [All Provider Bulletins](#), MassHealth describes the changes as being in effect during the state emergency but adds that it will evaluate the continued need for those changes when the state emergency expires, and will make adjustments as necessary.

³ A summary of the MassHealth Eligibility Flexibilities related to COVID-19 is available here: <https://www.mass.gov/doc/masshealth-eligibility-flexibilities-for-covid-19-0/download>.

⁴ Individuals receiving separate CHIP benefits (non-Medicaid CHIP coverage) are not included in this protection from loss of coverage during the public health national emergency. Source: [MassHealth Eligibility Flexibilities for COVID-19 \(August 2020\)](#).

⁵ Members who report a change to MassHealth that would make them no longer eligible for their current MassHealth coverage, but who would be eligible for one of the Medicare Savings Programs (MSP), will lose their current coverage and be downgraded to MSP only. Individuals who do not report a change or who report a change that makes them ineligible for both their current coverage and MSP, will remain in their current coverage.

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Annual Renewals Postponed Since March 2020, Resumed in May 2021: Due to the COVID-19 protection from loss of coverage, MassHealth initially suspended annual renewals after March 18, 2020. In late July 2020, MassHealth resumed renewals for members turning 65 in order to account for the Medicare coverage that will begin for most of them at age 65 and to enable some of these individuals to qualify for help paying their Medicare Part B premium. Anyone ineligible for MassHealth as a 65-year-old remained protected in their current coverage type and Medicare enrollees in CarePlus were upgraded to Standard to facilitate billing secondary to Medicare.</p> <p>In fall 2020, MassHealth resumed administrative renewals for people whose eligibility can be renewed into the same or a better coverage type based on data matches alone, but did not send out paper forms when an administrative renewal was not possible.</p> <p>In May 2021, MassHealth resumed non-administrative renewals, sending out a renewal form to be completed and returned by a deadline. Individuals subject to renewal will not lose MassHealth coverage during the federal public health emergency based on a change in circumstances or failure to return the form. However, where reported changes or data matches indicate that the individual qualifies for a different type of MassHealth coverage, MassHealth will now change their eligibility so long as the new coverage is in the same “tier.”</p>	<p>March 18, 2020 – April 2021 (annual renewals postponed)</p> <p>Late July 2020 (Renewals resumed for members turning 65 with full protection from loss of coverage)</p> <p>Fall 2020 (Administrative renewals resumed with full protection from loss of coverage)</p> <p>May 2021 (Non-administrative renewals resumed with modified protection from loss of coverage)</p>	<ul style="list-style-type: none"> • MA Health Care Training Forum (MTF) Update on MassHealth Renewals for Individuals Turning 65 (July 2020 – slides 35-37) • MassHealth Eligibility Update (May 2021): Renewals/RFIs and Continuous Coverage During the Federal Public Health Emergency

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Protection from More Restrictive Eligibility Standards: MassHealth will not implement new restrictions on eligibility rules or increases in premium rates from those in effect January 1, 2020.</p>	<p>March 18, 2020 – end of the month that the federal public health emergency ends</p>	<ul style="list-style-type: none"> • CMS FAQs for State Medicaid and Children’s Health Insurance Program (CHIP) Agencies (January 2021) •
<p>Proving Eligibility Factors by a Sworn Statement from the Applicant or Member (i.e., Self-Attestation): In making eligibility decisions, MassHealth will accept a sworn statement to prove a fact or information that ordinarily would require proof from a document like a bank statement or medical record. The applicant or member can supply a sworn statement (self-attestation) in writing by submitting a self-attestation form or can make the sworn statement over the telephone to MassHealth Customer Service, which will complete the form and send it to the MassHealth Enrollment Center. This new process does not apply to proof of U.S. citizenship or an eligible immigration status.</p> <p>This expanded use of self-attestation was going to sunset on September 15, 2021, but has been extended until further notice.</p>	<p>April 7, 2020 – until further notice</p>	<ul style="list-style-type: none"> • MassHealth Eligibility Operations Memo 21-14 (September 2021) • • MTF Update on Self-Attestation (September 2021) • MTF Update on Self-Attestation (April 2020) • Written Self-Attestation Form
<p>Attesting to Eligibility Factors for Someone Else: Individuals authorized to complete an application for someone else under current rules about “authorized representatives” can also now make a sworn statement to MassHealth as proof of a fact on behalf of someone else (to the same extent that a MassHealth member can self-attest). This includes people designated by the applicant and those granted authority by a court, like legal guardians.</p>	<p>April 7, 2020 – until further notice</p>	<ul style="list-style-type: none"> • MassHealth Eligibility Operations Memo 21-14 (September 2021) • MassHealth Self-Attestation Form (page 2) • Authorized Representative Designation Form

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Attesting to Eligibility Based on Disability: Individuals required to prove they are disabled as a condition of eligibility may now do so through a sworn statement over the telephone to the Disability Evaluation Services at 833-517-0250. This process is not available for proving the level of care required to qualify for nursing home care or community-based alternatives to nursing home care.</p>	<p>April 7, 2020 – until further notice</p>	<ul style="list-style-type: none"> • MassHealth Eligibility Operations Memo 21-14 (September 2021) • MTF Update on Self-Attestation (September 2021) • MTF Update on Self-Attestation (April 2020)
<p>Hardship Waiver for Deductibles⁶: Under existing rules, elderly (age 65+) or disabled adults who do not qualify for MassHealth because their income is too high may become eligible <i>after</i> they have incurred medical costs that exceed a certain amount (this is referred to as a deductible or spend down). The waiver enabled these individuals to qualify for MassHealth without incurring medical costs by obtaining a temporary waiver of the deductible based on financial hardship. The temporary waiver that applies to the one-time deductible for disabled adults under age 65 to qualify for MassHealth CommonHealth remains in place at this time. However, the temporary waiver that applies to the recurring six month deductibles for the elderly and people needing nursing home care or alternatives to nursing home care to qualify for MassHealth Standard ended on August 21.</p>	<p>Available as of April 30, 2020</p> <p>August 21, 2020 (Deductible waiver for MassHealth Standard ended)</p> <p>Once a waiver is granted, coverage will be provided for the duration of the individual’s six-month deductible period, or for the duration of the federal public health emergency and for one month after the emergency period ends, whichever is later.</p>	<ul style="list-style-type: none"> • August 21 MTF Update on Changes to the Temporary Hardship Waiver of MassHealth Income Deductible • Deductible Hardship Waiver Application Form • May 8 MTF Update on Deductible Waiver • MassHealth Eligibility Flexibilities for COVID-19 (August 2020)

⁶ As of August 21, 2020, MassHealth implemented the deductible waiver in anticipation of CMS approval. However, CMS notified the agency in August that it will not approve the deductible waiver for MassHealth Standard. Awaiting information from MassHealth concerning what this means for those with MassHealth Standard approved for a waiver to date. CMS has not yet made a decision on the CommonHealth deductible waiver, which remains in place at this time.

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<p>More Flexibility Granting Premium Waivers Based on Hardship: MassHealth has been granting all requests for waivers of past due and/or ongoing premiums based on financial hardship during the federal public health emergency.</p> <p>As of July 1, 2021, MassHealth has permanently expanded the premium hardship waiver criteria to include undue financial hardship because of a state or federally declared disaster or public health emergency within the six months before an individual applied for a waiver or are likely to suffer in the six months after applying for a waiver. Members experiencing a COVID-19-related hardship may still request a premium waiver under this new criteria by calling Customer Service at (800) 841-2900 or by submitting a hardship waiver application.</p>	<p>April 7, 2020 – July 1, 2021</p> <p>This flexibility has been replaced by a permanent change to the premium hardship waiver criteria.</p>	<ul style="list-style-type: none"> • Eligibility Operations Memo: 21-09 (superseding 02-09) • Hardship waiver application form (updated version reflecting permanent changes not yet available) • MassHealth Update on Premium Hardship Waivers (July 2021) •
<p>Retroactive Eligibility Period Increased to 90 Days: For individuals under age 65, the normal 10-day retroactive coverage period will still apply automatically, and, in addition, they may request coverage going back to as early as the first day of the third calendar month before the month of application, but no earlier than March 1, 2020, in order to pay back bills. Members will not be retroactively enrolled in managed care. (Individuals age 65 or older or in need of nursing facility care normally have the right to 90 days retroactive coverage on request).</p>	<p>Starting with applications submitted on March 1, 2020 or later – end date not specified</p>	<ul style="list-style-type: none"> • MassHealth Eligibility Flexibilities for COVID-19 (August 2020)

<p>Additional \$600/Week and \$300/Week Unemployment Insurance (UI) Benefit Will Not Count as Current Monthly Income: MassHealth did not count the additional \$600 per week payment for UI recipients as income because the federal CARES Act specifically excludes it from counting as income for purposes of Medicaid eligibility. Similarly, MassHealth did not count the additional \$300 per week in UI disaster relief payments funded by the Federal Emergency Management Administration (FEMA) and known as “Lost Wage Assistance” as income. On December 27, 2020, the Coronavirus Relief Act authorized an additional \$300 per week in UI payments that, like the earlier payments, will not count as income. On March 11, 2021 the American Rescue Plan Act (ARPA) further extended the additional \$300 per week in UI payments. MassHealth counts all other forms of UI benefits as income.</p>	<p>The additional \$600 per week was payable for the weeks from March 29 to July 25, 2020</p> <p>The additional \$300 per week was payable for the weeks from August 1 to September 5, 2020</p> <p>An additional \$300 per week was payable for the weeks from December 27, 2020 – March 12, 2021</p> <p>An additional \$300 per week is payable through September 4, 2021</p>	<ul style="list-style-type: none">• MassHealth COVID-19 FAQ (on payments from the stimulus package and unemployment)• Tips for Reporting Income Changes due to COVID-19 (5-13-20)• CMS CARES Act and Families First Act FAQ and § 2104(h) of the CARES Act• FEMA Supplemental Lost Wages FAQ (August 2020)• 42 USC 5155(d) (disaster assistance not income in federal means-tested benefits)• Section 261 of Coronavirus Relief Act (12-27-20)• Extension of Coronavirus Relief Funds and Income Updates (January 2021)• CMS Informational Bulletin: Medicaid, Children’s Health Insurance Program (CHIP), and Basic Health Program Related Provisions in the American Rescue Plan Act of 2021 (June 2021)• Department of Unemployment Assistance: COVID-19 and
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CHANGE	EFFECTIVE DATE ²	SOURCE
		Unemployment – Updated based on ARPA
<p>Internal Revenue Service (IRS) Recovery Rebate (Economic Impact Payment) Will Not Count as Income: MassHealth will not count the following as income: the first stimulus rebate from the IRS (authorized by the CARES Act), the second round of payments (authorized on December 27, 2020 by the Coronavirus Relief Act), or the third round of payments authorized on March 11, 2021 by ARPA. Also, for 12 months after receipt, these payments will not be counted as an asset.</p>	<p>The CARES Act rebates were payable in advance through December 31, 2020, or when 2020 tax returns are filed.</p> <p>The IRS and Treasury Department began delivering the second round of Economic Impact Payments on December 29, 2020 and can also be claimed on 2020 tax returns.</p> <p>The third round of payments began in March 2021 and can also be claimed on 2021 tax returns.</p>	<ul style="list-style-type: none"> • MassHealth COVID-19 FAQ (on payments from the stimulus package) • Tips for Reporting Income Changes due to COVID-19 • CMS CARES Act and Families First Act FAQ and 26 U.S.C § 6409 • IRS Second Round of Economic Impact Payments (December 2020) • IRS Third Economic Impact Payment • CMS Informational Bulletin: Medicaid, Children’s Health Insurance Program (CHIP), and Basic Health Program Related Provisions in the American Rescue Plan Act of 2021 (June 2021)

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<p>Allowing Hospitals to Make Presumptive Eligibility Decisions in Additional Situations: Hospital presumptive eligibility (HPE)⁷ enables participating hospitals to use a simplified process to make an eligibility determination for immediate, temporary MassHealth coverage for certain people, who at the time, are unable to complete a full application. MassHealth rules do not allow for use of this process for people who have already used it in the past 12 months; who enrolled in MassHealth in the past 12 months; or whose eligibility is based on their being age 65+. However, MassHealth is now permitting individuals to use HPE twice in a 12-month period. MassHealth also extended this flexibility to the elderly (65+) with income equal to or less than 100% of the federal poverty level and countable assets of \$2,000 or less for an individual or \$3,000 or less for a couple.</p>	<p>March 10 – June 29, 2020 (fully suspending 12-month limitations) May 15, 2020 (available to the elderly) June 30, 2020 (limiting HPE to twice in a 12-month period) through end of national emergency</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletin: 299 (superseding 295) • Eligibility Operations Memo: 20-13 (superseding 20-10)

⁷ Recently, CMS notified MassHealth that the COVID-19 protection from loss of MassHealth coverage (described previously in the [Eligibility section](#)) could not be extended to people receiving MassHealth benefits as a result of HPE, as MassHealth initially intended. Therefore, individuals determined eligible through HPE for MassHealth benefits during the COVID-19 emergency will no longer be protected from loss of HPE coverage through the end of the national emergency and will need to comply with existing HPE rules and complete a full MassHealth application in order to maintain their coverage. HPE coverage ends on the last day of the month following the month HPE was approved *unless* a full MassHealth application is filed by then. If an application is filed by that end date, HPE coverage will continue until MassHealth makes an eligibility determination on the full application. For people who received HPE during the national emergency and *before* June 30, 2020, their HPE benefit will continue until July 31, 2020, at which point they must submit a full MassHealth application if they want to continue coverage. For those who received HPE on or after June 30, 2020, the standard HPE coverage duration rules apply.

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<p>Home & Community Based Services (HCBS) Expanded Eligibility: MassHealth operates ten HCBS waivers all of which offer enhanced services in the community to certain individuals who would otherwise require long term institutional care. MassHealth eliminated the 90-day minimum stay requirement in the Moving Forward Plan (MFP)⁸ waivers and certain other HCBS waivers that target individuals currently in institutional care. MassHealth also raised the upper age limit for the Children's Autism Spectrum Disorder waiver from under age 9 to under age 10. For all ten waivers, level of care assessments may be conducted by telephone or live video and annual re-assessments may be postponed for up to a year.</p>	<p>March 1, 2020 – six months after the end of the federal public health emergency</p>	<ul style="list-style-type: none"> • CMS Approval of Appendix K (April 2020) • Appendix K - Emergency Preparedness and Response and COVID-19 Addendum (April Amendments) • CMS Approval of Extension of HCBS Flexibilities (March 2021)
MASSHEALTH: APPEALS		
<p>Lengthening the Appeal Period to 120 Days: MassHealth members now have 120 days instead of 30 to appeal any decision denying, reducing, or terminating their MassHealth coverage or services.</p>	<p>April 7, 2020 – end of the month that the federal public health emergency ends</p>	<ul style="list-style-type: none"> • Eligibility Operations Memo: 21-09 (superseding 02-09) • 3/26/20 CMS Approval of 1st 1135 waiver request
<p>Telephone Hearings: All appeal hearings will be by telephone instead of in person.</p>	<p>April 7, 2020 – end of the month that the federal public health emergency ends</p>	<ul style="list-style-type: none"> • MassHealth COVID-19 FAQs • Eligibility Operations Memo: 02-09

⁸ Moving Forward Plan (MFP) waivers are HCBS waivers designed to help MassHealth-eligible individuals move from a nursing facility or chronic disease, rehabilitation, or psychiatric hospital back to their community. The MFP waivers help by making the move from the facility to the community easier and by providing community-based services.

CHANGE	EFFECTIVE DATE ²	SOURCE
MASSHEALTH: ACCESS TO BENEFITS⁹		
<p>Waiver of Referral Requirement: MassHealth members no longer need a referral to receive any medically necessary covered service that would otherwise require a referral.</p>	<p>March 10, 2020 – end of federal public health emergency</p>	<ul style="list-style-type: none"> • Fee for Service, PCC Plan and Primary Care ACO: MassHealth All Provider Bulletin: 291 and 319 • Managed Care Plans: Managed Care Entity Bulletin: 22 and 66
<p>Telehealth Coverage Expanded: MassHealth providers can deliver any MassHealth-covered service to MassHealth members via telehealth (telephone-only or live video). Telehealth allows a patient to talk to and be treated by a health care provider by telephone or live video without having to go into the provider’s office.</p> <p>Telehealth rules for long-term services and supports (LTSS) are addressed in guidance published by the Office of Long-Term Services and Supports. See MassHealth LTSS Provider Information resource for more information.</p>	<p>Beginning March 12, 2020. Rate parity was established between telehealth and in-person for all services until December 31, 2022; for chronic disease management up until two years after the end of the state emergency; and permanently for behavioral health services.</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletin: 303 (consolidating and updating 298, 289, 291, 294) • Managed Care Entity Bulletin: 68 (superseding 60 and consolidating and updating 21, 29, and 39) • MassHealth All Provider Bulletin - Updated Telehealth Policy: 327 (October 2021) • Chapter 260, Acts of 2020 (January 2021)

⁹ The Massachusetts state emergency ended on June 15, 2021. MassHealth is reviewing flexibilities initially tied to the state emergency and will be updating bulletins on the status of various policies.

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<p>Alternative Telehealth Providers: If MassHealth members were not feeling well or had symptoms of COVID-19 and could not reach their doctors right away, they could access immediate telehealth services through the following providers: Galileo, Maven, or Doctor on Demand. A telehealth provider would discuss the member’s symptoms and risk of COVID-19 exposure and would recommend a type of care the member should receive and could prescribe medications as needed.</p>	<p>April 2020 – September 30, 2020</p>	<ul style="list-style-type: none"> • MassHealth COVID-19 Member Info • Telehealth Network Provider Bulletin 1
<p>90-Day Supply of Prescription Drugs and Medical Supplies: MassHealth members can now get up to a 90-day supply of most prescription drugs and medical supplies (they were previously limited to 30 days). This includes supplies from pharmacies, durable medical equipment providers, and oxygen and respiratory equipment providers.</p>	<p>March 14, 2020 – end of federal public health emergency</p>	<ul style="list-style-type: none"> • MassHealth Pharmacy Facts: 141, 142, and 167 • MassHealth All Provider Bulletins: 289, 291 and 319 • MassHealth COVID-19–Providers: Guidance for LTSS Providers • Managed Care Entity Bulletin: 22 and 66
<p>Early Refills for Prescription Drugs: MassHealth members can get refills of existing prescriptions earlier than current rules otherwise allow, so long as at least one refill remains on the prescription.</p> <p>This policy and several other pharmacy flexibilities ended on July 15, 2020.</p>	<p>March 14 – July 15, 2020</p>	<ul style="list-style-type: none"> • MassHealth Pharmacy Facts: 150 (superseding 141 and 142) • MassHealth All Provider Bulletin: 289 • Managed Care Entity Bulletin: 22

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Payment for Home Delivery of Prescription Drugs: MassHealth will now reimburse pharmacies for home delivery.</p>	<p>For dates of delivery after March 31, 2020 – permanent change</p>	<ul style="list-style-type: none"> • MassHealth Pharmacy Facts: 145 and 167 • MassHealth All Provider Bulletin: 319 • Managed Care Entity Bulletin: 66
<p>Generic Albuterol Inhalers Covered: In addition to covering albuterol inhaler prescriptions for the brand name ProAir, MassHealth temporarily covered any generic equivalent of ProAir. MassHealth ended this flexibility on October 12, 2020.</p>	<p>March 20 – October 12, 2020</p>	<ul style="list-style-type: none"> • MassHealth Pharmacy Facts: 154 (superseding 142) • MassHealth Pharmacy Facts: 142 • MassHealth All Provider Bulletin: 291 • Managed Care Entity Bulletin: 22
<p>Personal Protective Equipment Program for COVID-19 Positive Members: MassHealth will provide personal protective equipment (PPE) to members receiving certain in-home services and supports who are COVID-19 positive or presumed to be positive. To request PPE, members may call the MassHealth LTSS Provider Service Line toll-free, at 844-368-5184.</p>	<p>April 10, 2020 – until further notice</p>	<ul style="list-style-type: none"> • PPE Program for COVID-19 Members
<p>Personal Care Attendant (PCA) Overtime Limits: MassHealth is suspending PCA overtime limits. PCA users no longer need prior approval from MassHealth for a PCA to work more than 50 hours in one week. PCAs are people who help MassHealth members who have permanent or chronic disabilities with their activities of daily living, such as meal preparation, bathing, and dressing.</p>	<p>March 10, 2020 – until further notice</p>	<ul style="list-style-type: none"> • MassHealth COVID-19–Providers: Guidance for LTSS Providers • MassHealth Information for PCA Consumers

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Help for Members Whose PCA is Unavailable: MassHealth members whose PCAs are unavailable may now receive home health aide services from home health agencies to fill the gap in services. MassHealth members may call MassHealth OPTIONS at 844-422-6277 for help in getting connected to services.</p>	<p>March 10, 2020 – end of federal public health emergency</p>	<ul style="list-style-type: none"> • Home Health Agency Bulletin: 65 (superseding 56 and 57) • MassHealth Information for PCA Consumers
<p>Home Health Agencies Employing Aides to Provide PCA Services May Hire Family Members: MassHealth will not pay a PCA to deliver services to the PCA’s spouse, minor child, or adult child if the PCA is the child’s legal guardian. However, this limitation does not apply to home health agencies; they may hire a family member as a home health aide to provide PCA services when a member is experiencing a gap in their existing PCA services.</p>	<p>March 10, 2020 – end of federal public health emergency</p>	<ul style="list-style-type: none"> • Home Health Agency Bulletin: 65 (superseding 56 and 57)
<p>Automatically Adjusted PCA Hours for PCA Consumers Whose School or Day Programs Have Closed: MassHealth members who have PCAs and also attend school or a day program ordinarily have one set of PCA hours for the days they attend school or a day program and a higher number of approved PCA hours for days they don’t attend. While schools and day programs were closed, MassHealth automatically adjusted PCA hours to the higher number of hours for non-attendance days for 90 days. This automatic adjustment continued for members who attend day programs through September 30, 2020. Adjustments during the 2020-21 school year and for day programs after October 1, 2020, will be determined on a case-by-case basis.</p>	<p>March 16 – June 26, 2020 (school closing) or September 30, 2020 (day program closing)</p>	<ul style="list-style-type: none"> • MassHealth COVID-19–Providers: Guidance for LTSS Providers • MassHealth Adult Day Health Bulletin 19 (August 2020) • MassHealth Day Habilitation Bulletin 12 (August 2020) • MassHealth HCBS Waiver Provider Bulletin 5 (September 2020) • MassHealth email communication (9-15-20)

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Option to Request 90-Day Extension of PCA Services Without Reevaluation: If a member’s prior authorization for PCA hours is set to expire, the provider responsible for requesting prior authorization for continued services may request a 90-day extension of <i>current</i> PCA services, instead of a full reevaluation. If more hours are needed, a reevaluation is required but may be done by telephone or live video.</p>	<p>March 16, 2020 – until further notice</p>	<ul style="list-style-type: none">• MassHealth LTSS Provider Information: Updates Related to COVID-19 (6-10-20)
<p>Streamlined Prior Authorization Requirements for Durable Medical Equipment and Supplies, and Oxygen and Respiratory Equipment and Supplies: MassHealth is authorizing delivery of many types of equipment and supplies prior to submission of prior authorization requests and documentation. The documentation must still be submitted, but it may now be submitted after delivery of services. Wheelchairs, other mobility devices, and certain services still require authorization prior to delivery.</p>	<p>March 16, 2020 – end of federal public health emergency, or until further notice</p>	<ul style="list-style-type: none">• MassHealth Durable Medical Equipment Bulletin 26 (superseding Guidance for LTSS Providers)

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Increased Flexibility for Providers of Long-Term Services and Supports (LTSS): New guidance extends many kinds of flexibility to providers of LTSS for people with disabilities and chronic conditions such as PCAs, home health agencies, durable medical equipment providers, and nursing facilities, among others. The flexibility includes options to extend existing authorization periods, to allow assessments and reevaluations by telehealth, to continue payment for patients who cannot be safely discharged due to COVID-19, and other changes that vary by type of service.</p> <p>Some kinds of LTSS provide assistance with activities of daily living (such as eating, bathing, and dressing) and instrumental activities of daily living (such as preparing meals, managing medication, and housekeeping). Other kinds provide skilled services and/or services in a facility setting, including nursing facility care, adult day health programs, home health agency services, and personal care services, among others.</p>	<p>Start date varies – until further notice</p>	<ul style="list-style-type: none"> • MassHealth COVID-19–Providers: Guidance for LTSS Providers
<p>Children’s Behavioral Health Initiative (CBHI)—Initial Assessments: CBHI initial assessments can now be done by telephone. CBHI delivers an enhanced continuum of home- and community-based behavioral health services for children with significant behavioral, emotional, and mental health needs.</p>	<p>March 12, 2020 – 90 days from the end of the MA state emergency (June 15, 2021) or until further notice</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletin: 298 • MassHealth All Provider Bulletin: 314 (March 2021) • FAQs for Children Receiving CBHI During COVID-19

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Early Intervention Eligibility Extended for Children Transitioning to School-Based Services: Early Intervention (EI) is available to children up to age 3 after which children with special needs transition to school-based services. Because the COVID-19 pandemic has made the transition from EI to school-based services more difficult, MassHealth is now continuing to pay for EI services for children who turn 3 between March 15 and August 31, 2020, and meet certain other conditions. Coverage will remain in place until the child(ren) has successfully transitioned to school-based services, or until October 15, 2020, whichever is sooner.</p>	<p>March 15 – October 15, 2020</p>	<ul style="list-style-type: none"> • Early Intervention Bulletin: 3 • Managed Care Entity Bulletin: 34
<p>HCBS Enhanced Services: In response to COVID-19, MassHealth enhanced services in all ten HCBS waivers (described above) to include: Equipment such as smartphones or tablets costing up to \$500 from typical vendors in the community if needed to obtain HCBS by telehealth; home-delivered meals including from commercial kitchens; an increase to the current 30 day limit on respite services; provision of certain waiver services such as a PCAs or companions in hospital or short-term nursing facility settings. Individuals enrolled in a HCBS waiver program should have a case manager from an Aging Services Access Point (ASAP), Department of Developmental Services, Massachusetts Rehab Commission, or UMass Medical who can provide more information on how to obtain these enhanced services.</p> <p>In June, CMS approved a second amendment for the Community Living Adult Support waivers. This amendment increased the one-time funding available if a member has a short-term change in needs that cannot be accommodated within the limits of the waiver from a maximum payment of \$5,000 to \$10,000.</p>	<p>March 1, 2020 – February 28, 2021</p>	<ul style="list-style-type: none"> • CMS Approval of Appendix K (April 2020) • Appendix K - Emergency Preparedness and Response and COVID-19 Addendum (April Amendments) • CMS Approval of Appendix K (June 2020) • Appendix K – Emergency Preparedness and Response and COVID-19 Addendum

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<p>MBTA Offered Rides for PCAs in its Door-to-Door Paratransit Program (RIDE): RIDE customers could book the RIDE for their PCAs' trips to and from the customers' homes.</p>	<p>April 24, 2020 – August 2020</p>	<ul style="list-style-type: none"> • MBTA Announcement (end of program confirmed by communication with MBTA)
<p>Nonemergency Transportation for Members Who May Have COVID-19: Members under investigation for or known to have COVID-19 could use ambulance or wheelchair van transportation if their provider completed a Medical Necessity Form.</p>	<p>March 10 – end of MA state emergency (June 15, 2021)</p>	<ul style="list-style-type: none"> • MassHealth Transportation Bulletin: 17
<p>New Website with COVID-19 Resources and Information</p>		<ul style="list-style-type: none"> • MassHealth COVID-19 Updates for Applicants and Members • MassHealth COVID-19 Updates for Providers

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HEALTH CONNECTOR PROGRAMS		
<p>Health Connector Temporarily Limited Certain Adverse Actions: In March 2020, the Health Connector stopped terminating coverage or reducing the level of help paying for health insurance for its members if they fail to respond to a Request for Information.</p> <p>The Health Connector rolled back this protection in preparation for the 2021 Open Enrollment period. In late July/early August 2020, the Health Connector sent new RFIs to members who were previously sent RFIs and didn't respond, but were protected under this COVID-19 policy. Those members had an additional 30 days to respond to the new RFIs. If the member did not respond, the Health Connector made a decision based on the data available or terminated coverage if no data was available in accordance with its pre-COVID-19 policies.</p> <p>MassHealth members in the same household remain protected in their current coverage by MassHealth.</p>	<p>March 15 – Late July/early August 2020</p>	<ul style="list-style-type: none"> • 3-27-20 Assister Update • Update for MA Health Training Forum (4-28-20) • Health Connector MTF Presentation (7-20-20)
<p>April Terminations Delayed: The Health Connector delayed ending coverage based on nonpayment of premiums that were scheduled for April 1, to enable members to apply for a premium deferral program.</p>	<p>April 17 was the last day to apply for the deferral program</p>	<ul style="list-style-type: none"> • 4-2-10 Assister Update
<p>Premium Hardship Waivers Available for COVID-19–Related Hardship: The Health Connector has revised its application form for ConnectorCare enrollees requesting a hardship waiver or reduction of current or past due premiums. The form now includes a waiver for hardship based on a large increase in essential expenses in the past six months due to the COVID-19 pandemic.</p>	<p>Ongoing</p>	<ul style="list-style-type: none"> • Premium Payment Help Options • Premium Waiver or Reduction Application Form

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<p>Health Connector Special Open Enrollment Extension Period: The Health Connector has extended the open enrollment period (which was initially scheduled to end on January 23, 2021) to July 23, 2021. Normally, applicants can only enroll in health insurance through the Health Connector during the annual open enrollment period, which for 2021 has been extended to July 23; and at any time of year if they are newly eligible for ConnectorCare (available to people with incomes of 300% of the federal poverty level or less); or if they experience another “qualifying event” such as loss of coverage due to job loss.</p>	<p>Until July 23, 2021</p>	<ul style="list-style-type: none"> • Health Connector Website • Health Connector Administrative Bulletin 04-21
<p>More Affordable Premium Contributions for More People in 2021 and 2022: On March 11, 2021, ARPA authorized lowering the percentage of income that eligible individuals are expected to contribute toward their coverage through the Health Connector and increased the amount of the federal premium tax credit for 2021 and 2022. It also extended premium tax credits for the first time to individuals with income over 400% of the federal poverty level (FPL) in 2021 and 2022. In 2021, 400% FPL for an individual is \$51,528 annually and \$106,008 annually for a family of four.</p>	<p>April and May 2021 – Recalculation of advanced premium tax credits (APTCs) for current enrollees* with an effective date of May and June 2021</p> <p>Beginning in May 2021 – APTC calculations for new applicants with income over 400% FPL</p> <p>*Current enrollees in unsubsidized Health Connector plans who never applied for help paying their premiums, must reapply.</p>	<ul style="list-style-type: none"> • Health Connector FAQ about the American Rescue Plan • H.R.1319 - American Rescue Plan Act of 2021 • § 9662 (premium tax credits in 2021 and 2022)

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<p>Updated Treatment of Unemployment Income (UI) will Affect Premium Tax Credits in 2020 and 2021: ARPA made three significant changes to the treatment of UI and premium tax credits.</p> <ol style="list-style-type: none"> For calendar year 2021, ARPA provides that anyone who received one week or more of UI in 2021 will be treated as if their 2021 annual income were 133 % FPL for purposes of calculating APTC. This means that 2021 UI recipients will all be financially eligible for ConnectorCare Plan Type 2A¹⁰ with no premium contribution, no deductible, and modest copays regardless of their annual income in 2021. The Health Connector anticipates being able to calculate APTCs under this new rule in July 2021. To qualify, 2021 UI recipients must be enrolled in a health plan through the Health Connector and must still meet the non-financial eligibility rules for premium tax credits. During calendar year 2020, all forms of UI including the added \$600 per week and the later \$300 per week “bump” (that MassHealth did not count as income) were counted in determining eligibility for APTCs. However, ARPA created a deduction of up to \$10,200 in UI from calendar year 2020 to be excluded from adjusted gross income. This may enable tax filers to qualify for a larger premium tax credit on their 2020 tax return. ARPA waived any overpayment of APTCs for 2020 tax filers. 	<p>In 2021, recalculation of APTCs for UI recipients estimated to begin in July 2021.</p> <p>When filing a 2021 tax return, a premium tax credit based on 133% FPL for UI recipients for months enrolled in Health Connector plan is available.</p> <p>When filing a 2020 tax return, UI deduction and waiver of APTC overpayments are available. Note, the IRS has extended the 2020 tax filing deadline from April 15 to May 17, 2021.</p>	<ul style="list-style-type: none"> Health Connector FAQ about the American Rescue Plan IRS Suspends Requirement to Repay Excess Advance Payments of the 2020 Premium Tax Credit (April 2021) H.R.1319 - American Rescue Plan Act of 2021 <ul style="list-style-type: none"> § 9663 (premium tax credit and unemployment income in 2021) § 9042 (unemployment income deduction in 2020) § 9662 (waiver of APTC overpayments in 2020)

¹⁰ The ConnectorCare 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 2A is available to those with incomes between 100.1 and 150% FPL,

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<p>Special Enrollment Period after COBRA¹¹ Premium Assistance Ends in 2021: ARPA created a new federal benefit to pay for the premium costs of COBRA continuation coverage from April 1 to September 30, 2021 for employees and eligible family members who would have otherwise lost employer-sponsored coverage due to a lay off or reduced hours.</p> <p>The Health Connector has no role in COBRA coverage or COBRA premium assistance, but it did create a new “Special Enrollment Period” triggered by the expiration of COBRA premium assistance in that will enable eligible people to enroll in affordable coverage through the Health Connector in 2021.</p>	<p>July 24 – December 31, 2021</p>	<ul style="list-style-type: none"> • Health Connector FAQ about the American Rescue Plan • Health Connector Administrative Bulletin 05-21 • U.S. Department of Labor COBRA Premium Subsidy • MA Division of Insurance Mini-COBRA Premium Assistance for Eligible MA Residents • H.R.1319 - American Rescue Plan Act of 2021 <ul style="list-style-type: none"> ○ § 9051 (COBRA Premium Assistance)
<p>Accelerated Effective Date for Increased Subsidies: For existing enrollees who report a drop in income after the 23rd of the month, the Health Connector had made those changes effective as of the first of the following month. However, after July 23, 2020, the Health Connector returned to its standard rule where changes in income reported after the 23rd of the month become effective on the first day of the <i>second</i> month following the reported change.</p>	<p>March 24 – July 23, 2020</p>	<ul style="list-style-type: none"> • Health Connector Board Meeting Presentation: Coverage Protection and Expansion During the COVID-19 Pandemic (May 2020) • Health Connector MTF Presentation (7-20-20)

¹¹ The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives workers and their families who lose their health benefits the right to choose to continue group health benefits provided by their group health plan for limited periods of time under certain circumstances such as voluntary or involuntary job loss, reduction in the hours worked, transition between jobs, death, divorce, and other life events. Qualified individuals may be required to pay the entire premium for coverage up to 102% of the cost to the plan. COBRA generally requires that group health plans sponsored by employers with 20 or more employees in the prior year offer employees and their families the opportunity for a temporary extension of health coverage (called continuation coverage) in certain instances where coverage under the plan would otherwise end. For more information see: <https://www.dol.gov/general/topic/health-plans/cobra>.

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<p>Informational Resources for the Newly Unemployed: The Health Connector has resources in English, Spanish, Portuguese, and Mandarin Chinese for those who have lost health insurance that they had through their job.</p>		<ul style="list-style-type: none"> • 3-27-20 Assister Update • Update for MA Health Training Forum (4-28-20)
<p>IRS Recovery Rebate (Economic Impact Payment) Will Not Affect ConnectorCare Eligibility or Amount of Premium Tax Credit: The Health Connector will not count the following as income: the first stimulus payment from the IRS (authorized by the CARES Act), the second round of payments (authorized on December 27, 2020 by the Coronavirus Relief Act), or the third round of payments authorized on March 11, 2021 by ARPA.</p>	<p>The CARES Act rebates were payable in advance through December 31, 2020, or when 2020 taxes are filed.</p> <p>The IRS and Treasury Department began delivering the second round of Economic Impact Payments on December 29, 2020 and can also be claimed on 2020 tax returns.</p> <p>The third round of payments began in March 2021 and can also be claimed on 2021 tax returns.</p>	<ul style="list-style-type: none"> • 26 U.S.C. 6409 • Tips for Reporting Income Changes due to COVID-19 • Health Connector FAQ • IRS Second Round of Economic Impact Payments (December 2020) • IRS Third Economic Impact Payment

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<p>All Unemployment Benefits—Including Additional \$600/Week and additional \$300/Week—Will Be Counted as Income: The Health Connector counted the additional \$600 per week payment for unemployment insurance (UI) recipients (authorized by the CARES Act) as income, as well the additional \$300 per week in UI disaster relief payments funded by FEMA, known as “Lost Wage Assistance.” It will also count the additional \$300 per week in UI payments, authorized on December 27, 2020 by the Coronavirus Relief Act, as income. This differs from MassHealth and HSN, which did not count the additional \$600/week or \$300/week payments as income.</p>	<p>An additional \$300 per week is payable for the weeks from December 27, 2020 – March 12, 2021</p> <p>The additional \$600 per week was payable for the weeks from March 29 to July 25, 2020</p> <p>The additional \$300 per week was payable for the weeks from August 1 to September 5, 2020</p>	<ul style="list-style-type: none"> • Tips for Reporting Income Changes due to COVID-19 (5-13-20) • Update for MA Health Training Forum (4-28-20) • Health Connector COVID-19 Updates - FAQs • Section 261 of Coronavirus Relief Act (12-27-20) • Extension of Coronavirus Relief Funds and Income Updates (January 2021)
<p>New Website with COVID-19 Resources and Information</p>		<ul style="list-style-type: none"> • Health Connector COVID-19 Updates
<p>New Webpage with Information for Newly Unemployed</p>		<ul style="list-style-type: none"> • Health Connector – The right plan. The right time.

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HEALTH SAFETY NET: ELIGIBILITY¹²		
<p>Protection from Loss of HSN (with one exception): As of March 18, 2020, or later, reimbursement for HSN patients will not be terminated for any reason other than moving out of state. However, starting in March 2021, HSN time-limits will once more apply to individuals eligible for ConnectorCare and when time limits expire, HSN will be reduced to HSN dental only.</p> <p>Approximately 30,000 people who are eligible for ConnectorCare but not enrolled are slated to lose HSN starting on July 1, 2021.</p>	<p>March 18, 2020 – end of the month that the federal public health emergency ends.</p> <p>As of March 2021, protection from loss of HSN was modified for ConnectorCare eligible individuals with HSN expiration beginning July 1, 2021.</p>	<ul style="list-style-type: none"> • MassHealth Eligibility Flexibilities for COVID-19 (August 2020) • MassHealth Eligibility Update: Renewals/RFIs and Continuous Coverage During the Federal Public Health Emergency (May 2021) • July 2021 MTF Presentation on HSN (slide 3)
<p>HSN Presumptive Eligibility: Under ordinary rules, HSN presumptive determination is not available to individuals who have already received a presumptive determination in the past 12 months. Now, individuals can receive a presumptive determination twice in a 12-month period.¹³</p>	<p>March 12, 2020 – end of MA state emergency (June 15, 2021) (suspending 12-month limitation)</p> <p>August 1, 2020 – end of MA state emergency (limiting presumptive eligibility to twice in a 12-month period)</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-76 (superseding 20-09)

¹² The Health Safety Net reimburses community health centers and acute care hospitals for health services they provide to eligible low-income uninsured and underinsured patients.

¹³ For individuals who received a HSN presumptive eligibility determination during the state emergency and before June 30, 2020, their coverage will continue until July 31, 2020, at which point they must submit a full application if they want to continue coverage. For those who received a HSN presumptive eligibility determination on or after June 30, 2020, the normal termination rules apply.

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<p>HSN Eligibility: Under the ordinary rules, HSN will only pay for medical services for ConnectorCare-eligible patients for a limited time, whether or not they enroll in ConnectorCare. The new temporary policy initially authorized HSN payments for medical services to patients who are eligible but not enrolled in ConnectorCare and whose time-limited HSN medical had not expired prior to March 12, 2020. However, starting in March 2021, HSN time-limits will once more apply to individuals eligible for ConnectorCare.</p>	<p>For dates of service starting on March 12, 2020 – June 2021.</p> <p>As of March 2021, ConnectorCare eligible individuals will be downgraded to HSN dental only beginning June 1, 2021, and ongoing thereafter when time-limited HSN expires.</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-09 • MTF April 2020 Meeting Q&A • MassHealth Eligibility Update: Renewals/RFIs and Continuous Coverage During the Federal Public Health Emergency (May 2021)
<p>HSN Deductible Waiver: Under the ordinary rules, HSN patients with income above 150% of the federal poverty level must meet a deductible before HSN will pay for their services. The deductible was waived and HSN was paying the full cost of covered services during the state declared emergency, which ended June 15, 2021. Deductibles are back in effect for dates of service on or after June 15, 2021.</p>	<p>March 12, 2020 – end of MA state emergency (June 15, 2021).</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 21-15 (superseding 20-76) • HSN Billing Updates (June 2021) • MTF April 2020 Meeting Q&A
<p>Additional \$600/Week and \$300/Week Unemployment Benefit Not Counted Toward Eligibility: Like MassHealth, HSN did not count as income the additional \$600 per week payment (authorized by the CARES Act) to recipients of unemployment insurance. HSN also did not count as income the additional \$300 per week in unemployment insurance (UI) authorized on December 27, 2020 by the Coronavirus Relief Act. On March 11, 2021 ARPA further extended the additional \$300 per week in UI payments. All other unemployment benefits do count as income.</p>	<p>The additional \$600 per week was payable March 29 – July 25, 2020</p> <p>An additional \$300 per week was payable for the weeks from December 27, 2020 – March 12, 2021</p> <p>An additional \$300 per week is payable through September 4, 2021</p>	<ul style="list-style-type: none"> • HSN rules apply the same income counting rules as MassHealth (130 CMR 613.04) • Section 261 of Coronavirus Relief Act (12-27-20) • Extension of Coronavirus Relief Funds and Income Updates (January 2021)

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<p>IRS Recovery Rebate (Economic Impact Payment) Will Not Affect Eligibility: Like MassHealth, HSN will not count the following as income: the first stimulus rebate from the IRS (authorized by the CARES Act), the second round of payments (authorized on December 27, 2020 by the Coronavirus Relief Act), or the third round of payments authorized on March 11, 2021 by ARPA. Also, for 12 months after receipt, these payments will not be counted as an asset.</p>	<p>The CARES Act rebates were payable in advance through December 31, 2020, or when 2020 taxes are filed.</p> <p>The IRS and Treasury Department began delivering the second round of Economic Impact Payments on December 29, 2020 and can also be claimed on 2020 tax returns.</p> <p>The third round of payments began in March 2021 and can also be claimed on 2021 tax returns.</p>	<ul style="list-style-type: none"> • HSN rules apply the same income counting rules as MassHealth (130 CMR 613.04) • 26 USC 6409 • IRS Second Round of Economic Impact Payments (December 2020) • IRS Third Economic Impact Payment
<p>HEALTH SAFETY NET: ACCESS TO SERVICES</p>		
<p>Telehealth Flexibilities: HSN will cover telehealth services.</p>	<p>Beginning March 12, 2020. Rate parity was established between telehealth and in-person for all services until December 31, 2022; for chronic disease management up until two years after the end of the state emergency; and permanently for behavioral health services.</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 21-15 (superseding 20-76) • MassHealth All Provider Bulletin: 327 (October 2021) • Chapter 260, Acts of 2020 (January 2021)
<p>90-Day Prescription Drug Supply: HSN patients can get up to a 90-day supply of most prescription drugs.</p>	<p>March 14 – until further notice</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 21-15 (superseding 20-76)

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<p>Early Prescription Drug Refills: HSN patients could get early refills of existing prescriptions so long as at least one refill remained on the prescription. This flexibility ended in July.</p>	<p>March 14 – July 15, 2020</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-76 (superseding 20-09)
<p>Generic Albuterol Inhalers Covered: In addition to covering albuterol inhaler prescriptions for the brand name ProAir, HSN temporarily covered any generic equivalent of ProAir. HSN ended this flexibility on October 12, 2020.</p>	<p>March 20 – October 12, 2020</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-76 (superseding 20-09) • Guidance for Pharmacies: Pharmacy Facts 154 (superseding 142)
<p>HSN Pharmacy Flexibilities: HSN patients were temporarily able to get their prescriptions filled at any HSN pharmacy location. They did not need to be a patient of the hospital or community health center operating that pharmacy. This flexibility ended May 18, 2020.</p>	<p>April 13 – May 18, 2020</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-49 • Guidance for Pharmacies: Pharmacy Facts 147 • MTF HSN Updates PowerPoint (April 2020)

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COVERAGE OF COVID-19 TESTING, TREATMENT, AND VACCINE ADMINISTRATION		
<p>MassHealth – COVID-19 Testing and Treatment: MassHealth will cover, without cost sharing, all COVID-19 testing and treatment for MassHealth members, including those with MassHealth Limited, which covers only emergency services. COVID-19 testing and treatment services for HSN-only patients and Children’s Medical Security Plan (CMSP)-only patients with no other coverage should be billed to the Federal Program for the Uninsured through the Health Resources Services Administration (HRSA) portal (described below).</p>	<p>Initially, March 10, 2020 – end of MA state emergency.</p> <p>Effective March 11, 2021, until the end of the quarter one year after the national public health emergency ends.</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletins: 289, 292, 304, 319, and 322 • MassHealth Managed Care Entity Bulletin: 21 and 50 • HSN, Uninsured, & MassHealth Limited COVID-19 Testing and Treatment FAQ (July 2020) • CMS Bulletin: Medicaid, Children’s Health Insurance Program (CHIP), and Basic Health Program (BHP) Related Provisions in the American Rescue Plan Act of 2021 (June 2021)
<p>Health Connector Programs: All testing and treatment for COVID-19 and prevention services, including vaccine administration are covered by all health plans offered through the Health Connector, including all ConnectorCare plans,¹⁴ with no cost sharing.</p>	<p>March 6 – end date not specified</p>	<ul style="list-style-type: none"> • Health Connector FAQs • DOI Bulletin 2020-02 • DOI Bulletin 2020-13

¹⁴ ConnectorCare plans are available through the Health Connector to eligible individuals with income up to 300% of the federal poverty level. These plans incorporate the federally financed advance premium tax credit as well as state subsidies toward premiums and cost sharing.

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<p>Federal Program for the Uninsured: The federal government will cover the cost of COVID-19 testing and treatment and vaccine administration with no cost-sharing for uninsured people in the United States. There is no limitation based on state residency, immigration status, or income. To be reimbursed for COVID-19 testing, treatment, and vaccine administration providers must register on a portal created by the HRSA.</p>	<p>Starting May 6, 2020, claims may be submitted for the costs of testing and treatment provided on or after February 4, 2020 – end date not specified</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletins: 292 and 304 • HRSA COVID Uninsured Program Information • HSN, Uninsured, & MassHealth Limited COVID-19 Testing and Treatment FAQ
<p>Health Safety Net: Prior to the creation of the Federal Program for the Uninsured (above), MassHealth announced that HSN will cover COVID-19 testing and treatment for HSN patients if these are provided by a hospital or CHC. However, HSN is the payer of last resort, and HSN providers are now directed to first bill the new Federal Program for the Uninsured.</p>	<p>March 12 – May 2020</p>	<ul style="list-style-type: none"> • EOHHS Administrative Bulletin: 20-09 • 3/18 Assister Updates • MassHealth All Provider Bulletin: 292 • HSN, Uninsured, & MassHealth Limited COVID-19 Testing and Treatment FAQ
<p>COVID-19 Test Site Locator: Website provides COVID-19 testing site location information, including where and how to get tested, as well as which testing sites accept MassHealth, test the uninsured for free, and more.</p>		<ul style="list-style-type: none"> • COVID-19 Test Site Locator

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<p>COVID-19 Vaccination Program: Information about vaccine safety, eligibility, and appointment locations in Massachusetts.</p>	<p>As of May 13, 2021, all adults and children 12 and older are eligible for the COVID-19 vaccine.</p> <p>Beginning May 24, 2021, any individual who has trouble getting to a vaccine site is eligible for the state’s homebound program.</p>	<ul style="list-style-type: none"> • Massachusetts COVID-19 Vaccination Data and Updates • Massachusetts Eligibility and Locations • Department of Public Health: COVID-19 Vaccine FAQs • COVID-19 In-Home Vaccination Program
<p>COVID-19 Vaccine Administration: The federal government is supplying the COVID-19 vaccine at no cost to all people living in the United States; providers may bill the patient’s insurance for vaccine administration fees, but may not bill the patient directly.</p> <p>MassHealth will cover the costs of COVID-19 vaccine administration in all MassHealth programs, including MassHealth Limited, and in the Children’s Medical Security Plan (CMSP). Providers vaccinating HSN only patients may bill the HRSA portal described for the costs of vaccine administration.</p> <p>The FDA recently authorized a third dose of the Pfizer vaccine for certain immunocompromised individuals. MassHealth (including Limited and CMSP) will cover the cost of this third dose.</p>	<p>December 2020 – until further notice.</p> <p>MassHealth Limited: MassHealth will pay for vaccines provided on or after March 11, 2021 – until further notice. For vaccines provided before March 11th, providers to bill through the HRSA portal.</p> <p>Effective March 11, 2021, until the end of the quarter one year after the national public health emergency ends.</p> <p>Third dose: As of August 12, 2021, until further notice.</p>	<ul style="list-style-type: none"> • Centers for Disease Control and Prevent FAQs about COVID-19 Vaccination • MassHealth All Provider Bulletins: 292 (May 2020), 304 (Dec 2020), 312 (March 2021), 319 (June 2021), and 322 (August 2021) • CMS Bulletin: Medicaid, Children’s Health Insurance Program (CHIP), and Basic Health Program (BHP) Related Provisions in the American Rescue Plan Act of 2021 (June 2021)

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<p>MassHealth COVID-19 Vaccine Appointment Transportation: MassHealth will provide transportation to and from scheduled COVID-19 vaccine appointments for members with MassHealth Standard, CarePlus, CommonHealth, Family Assistance, MassHealth Limited, or the Children’s Medical Security Plan, as well as Health Safety Net patients. Once individuals are eligible for a vaccine and have scheduled an appointment, they can request transportation through their doctor, health plan, or by calling MassHealth Customer Service.</p>	<p>February 18, 2021 – until further notice.</p>	<ul style="list-style-type: none"> • MassHealth All Provider Bulletin: 310 • Transportation to COVID-19 Vaccine Appointments for MassHealth Members and Health Safety Net Patients FAQ (February 2021)
<p>COVID-19 Isolation and Recovery Sites: Site for individuals experiencing homelessness or housing instability or for individuals with incomes of 400% of the federal poverty level or less who test positive for COVID-19 and cannot safely quarantine at home. These sites are no longer in operation, however, the state has instructed hospitals not to discharge individuals who are COVID-19 positive and lack a safe space to quarantine or isolate.</p>	<p>Isolation and recovery sites are no longer in operation.</p>	<ul style="list-style-type: none"> • Resources for Patients who are Homeless or Housing Unstable
<p>OFFICE CLOSURES</p>		
<p>MassHealth Enrollment Centers (MECs): In late June 2021, MECs opened for limited walk-in appointments. MassHealth also established a new online system to schedule calls with MassHealth representatives. Call for assistance. 800-841-2900</p>	<p>March 16, 2020 – June 2021.</p>	<ul style="list-style-type: none"> • MassHealth Website Update • Online appointment scheduler
<p>Health Connector Walk-In Centers: Closed. Call for assistance. 877-623-6765</p>	<p>March 16 – until further notice.</p>	<ul style="list-style-type: none"> • Health Connector Member Update

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MISCELLANEOUS		
<p>New Website to Assess Symptoms of COVID-19: Available to all MA residents, including the uninsured. The site recommends next steps, including telehealth resources, based on symptoms.</p>		<ul style="list-style-type: none"> • Check Your Symptoms for COVID-19 Online
<p>List of Discounted or Free Internet and Phone Services for Telehealth Access: MassHealth has published a document listing all the resources available for discounted or free internet and phone services or devices, to make it easier for members to access telehealth.</p>		<ul style="list-style-type: none"> • Telephone and Internet Guidance
<p>Discounted or Free Internet and Phone Service: MassHealth has created a Frequently Asked Questions page on discounted or free internet and phone service (the Lifeline service), to help members affordably access telehealth.</p> <p>The Federal Communications Commission (FCC) launched a new emergency broadband benefit authorized by the Consolidated Budget Act of 2021.</p>	<p>Emergency broadband benefit began May 12, 2021, and lasts until funds are exhausted or six months after the end of the federal public health emergency.</p>	<ul style="list-style-type: none"> • Member FAQ on Lifeline (last updated June 2021) • Emergency Broadband Benefit Program
<p>Food Assistance During the COVID-19 Emergency: MassHealth has published a document listing the resources available for food assistance for members, as well as a document with guidance to help providers screen for food insecurity.</p>		<ul style="list-style-type: none"> • Food Assistance During the COVID-19 Emergency • Connecting Your Patients with Food Resources: A Guide for MassHealth Providers During the COVID-19 Emergency

CHANGE	EFFECTIVE DATE ²	SOURCE
<p>Additional Flexibility for Certified Application Counselors and Navigators Working Remotely: MassHealth is authorizing certified enrollment assisters working for health care providers or community-based organizations to more easily submit documents requiring a signature on behalf of individuals they are assisting by telephone.</p>	<p>Until further notice</p>	<ul style="list-style-type: none"> • COVID-19 Assister Guidance (Updated 5-8-20)
<p>MassHealth Applicants and Members May Complete More Forms by Telephone: Individuals who want to designate an authorized representative or a person to whom MassHealth may release information to may now complete the required Authorized Representative Designation (ARD) and Permission to Share Information (PSI) forms by telephone through Customer Service. The individual and the designated person must both be on the line with Customer Service.</p>	<p>June 29 – until further notice (change to ARD form expected to continue indefinitely)</p>	<ul style="list-style-type: none"> • MTF Announcement (7-23-20)
<p>MassHealth Estate Recovery Relief: In response to the COVID-19 public health emergency, MassHealth stopped filing notices of claims and recovering from estates with a total value of \$25,000 or less. On November 30, 2020, MassHealth proposed an amendment to its regulations to make this exemption permanent. The proposed regulation is planned to go into effect no sooner than April 16, 2021.</p>		<ul style="list-style-type: none"> • MassHealth Estate Recovery Policy Update (November 2020) • Proposed regulation: 130 CMR 515.000 (MassHealth: General Policies)

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<p>MassHealth and ConnectorCare Enrollment Tracker: This resource from the Blue Cross Blue Shield of Massachusetts Foundation highlights the most recent monthly enrollment data available for MassHealth and ConnectorCare. It is intended to help track how enrollment has changed since the COVID-19 pandemic began. It will be updated regularly with the latest enrollment data as it becomes available.</p>		<ul style="list-style-type: none"> • MassHealth and ConnectorCare Enrollment Tracker
<p>Monthly Enrollment Summaries by Market Sectors: To provide more rapid insight into the impact of COVID-19 on insurance coverage in the Commonwealth, the Center for Health Information and Analysis (CHIA) is producing monthly enrollment data summaries broken down by market sectors, including the different categories of MassHealth and Health Connector coverage.</p>		<ul style="list-style-type: none"> • CHIA Monthly Enrollment Summaries
<p>MassSupport Network Provides Free Crisis Counseling: In response to the COVID-19 crisis, FEMA has funded the MassSupport Network to provide free, anonymous, and confidential behavioral health services to Massachusetts residents, regardless of immigration status. Services include telephonic emotional support sessions, group support, and educational presentations on coping with stress and trauma. Services are available in nine different languages. Call (888) 215-4920 or email MassSupport@riversidecc.org for more information.</p>		<ul style="list-style-type: none"> • MassSupport Network website

Prompted by the COVID-19 public health emergency, these policy changes are intended to promote continued access to health insurance coverage and health care services. Together, they demonstrate a strong commitment to adjusting the state's health safety net system in an effort to be responsive to the needs of consumers during a particularly challenging time. It will be important to both monitor the status of these and other policy and program changes as this public health emergency unfolds, and to ensure Massachusetts' most vulnerable residents receive the health care services they need.

Other Resources:

COVID-19–related changes affecting Medicare:

<https://medicareadvocacy.org/covid-19-an-advocates-guide-to-medicare-changes/>

MassHealth Eligibility Flexibilities related to COVID-19 (August 2020):

<https://www.mass.gov/doc/masshealth-eligibility-flexibilities-for-covid-19-0/download>

MassHealth COVID-19 pharmacy program emergency response:

<https://masshealthdruglist.ehs.state.ma.us/MHDL/pubdownloadpdfwelcome.do;jsessionid=74624DD68A3F40F63EEA78C1CF55C7A8?docId=386&fileType=PDF>

Updates related to COVID-19 statewide and across all sectors:

www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19