

## Massachusetts State Health Programs Eligibility and Coverage

MassHealth Programs				
Program	Who is Eligible?	What is covered?	Costs	Immigrant Eligibility
<p><b>MassHealth Standard</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></p>	<ul style="list-style-type: none"> <li>✓ Children 1-18 w/ income ≤150% FPL*</li> <li>✓ Pregnant women and their children &lt;1 year w/ income ≤200% FPL</li> <li>✓ Parents living with their children &lt;19 who have income ≤133% FPL</li> <li>✓ Adult caretaker relatives living with children &lt;19 w/ income ≤133% FPL</li> <li>✓ <i>Disabled</i>† adults, &lt;65, w/ income ≤ 133% FPL</li> <li>✓ People &gt;65 w/ income ≤100% FPL, assets cannot exceed \$2K for an individual or \$3K for a couple</li> <li>✓ People &gt;65 with income &gt;100% FPL after meeting a recurring 6 month deductible</li> <li>✓ Women w/ breast or cervical cancer w/ income ≤250 FPL</li> <li>✓ Youth &lt;21 who have aged out of foster care</li> <li>✓ Individuals who satisfy the eligibility criteria for Social Security Income or Transitional Aid to Families with Dependent Children</li> <li>✓ Asset limits-that can be spent down-apply to people living in a nursing home or medical institution</li> </ul> <p>*<i>FPL</i> means Federal Poverty Level, see chart on last page.          †<i>Disabled</i> means permanently and totally disabled as defined by Social Security.</p>	<p>Major benefits include:</p> <ul style="list-style-type: none"> <li>- Hospital (acute and rehab)</li> <li>- Physician services</li> <li>- Laboratory tests</li> <li>- Prescription drugs</li> <li>- Mental health services</li> <li>- Dental Services</li> <li>- Durable medical equipment</li> <li>- Home health and personal care</li> <li>- Nursing facility</li> <li>- Private duty nursing</li> <li>- Transportation</li> </ul> <p><i>See 130 CMR 450.105(A)(1) for details</i></p>	<p>Women w/ breast and cervical cancer w/ income &gt;150% are charged premiums on a sliding scale</p> <p>People living in a nursing home or medical institution have a required contribution based on income</p> <p>Adults are charged \$1-3 co-payments for prescription drugs</p>	<p>Qualified aliens and protected aliens are eligible</p> <p><i>See 130 CMR 504.002(B)-(C)</i></p> <p>Contact <b>MIRA 617-350-5480</b> for more information on immigrant eligibility</p>
<p><b>MassHealth CommonHealth</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></p>	<ul style="list-style-type: none"> <li>✓ Disabled children &lt;19 who are not eligible for MassHealth (MH) Standard</li> <li>✓ Working disabled adults who are not eligible for MH Standard</li> <li>✓ Nonworking disabled adults</li> </ul>	<p>Covers same types of services as MH Standard but some of the rules relating to the amount, duration, and scope of services are more limited</p> <p><i>See 130 CMR 450.105(E)(1)</i></p>	<p>Non-working (working less than 10 hrs./wk) disabled adults must meet one-time deductible</p> <p>Members &gt;150% FPL pay monthly premiums on a sliding scale</p> <p>Adults are charged co-payments for prescription drugs</p>	<p>Qualified aliens and protected aliens are eligible</p> <p>Disabled children &lt;19 classified as “special status” are eligible</p> <p><i>For an explanation of “special status” see 130 CMR 504.002(D)</i></p>

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<p><b>MassHealth Family Assistance</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></p>	<p><b>Direct Coverage</b></p> <ul style="list-style-type: none"> <li>✓ Children &lt;19 w/ income &lt;300% FPL w/out access to cost-effective, employer-sponsored insurance</li> <li>✓ Children &lt;19 w/ income between 201% and 300% FPL if they have been uninsured for the six months prior to application</li> <li>✓ HIV-positive adults &lt;65 w/ income ≤200% FPL</li> </ul> <p><b>Premium Assistance</b></p> <ul style="list-style-type: none"> <li>✓ Children &lt;19 w/ income ≤ 300% FPL w/ access to employer-sponsored insurance (ESI)</li> <li>✓ Aliens w/ special status children &lt;19 w/ income &gt;150% FPL and ≤ 200% FPL w/ access to ESI</li> <li>✓ Individuals &lt;65 who are HIV+ w/ income ≤ 200% FPL w/ access to ESI</li> <li>✓ Employees and their spouses of employers participating in the Insurance Partnership Program w/ income ≤ 300% FPL</li> </ul>	<p><b>Direct Coverage</b> benefits are less extensive than MH Standard; excludes nonemergency transportation, personal care attendants, private duty nursing, and other services</p> <p><i>See 130 CMR 450.105(H)(3)</i></p> <p>Individuals eligible for <b>premium assistance</b> will have varying benefits based on the employer's plan. MH may pay for co-payments, coinsurance, and deductibles.</p> <p><i>See 130 CMR 450.105(H)(1)-(2)</i></p>	<p><b>Direct coverage</b> for children w/ family income &gt;150% FPL requires a premium charge/child w/ a family maximum of the cost for 3 children</p> <p>For <b>premium assistance</b> payment by individual or family varies by income</p>	<p>Qualified aliens and protected aliens are eligible. Immigrants &lt;19 w/ "special status" are eligible.</p> <p><i>See 130 CMR 504.002(F)(2)(b)-(c)</i></p>
<p><b>MassHealth Basic</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></p>	<p>Adults &lt;65 who are either:</p> <ul style="list-style-type: none"> <li>✓ ≤100% FPL, AND long-term unemployed, AND clients of DMH</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>✓ Receiving Emergency Aid to Elders, Disabled, and Children (EAEDC)</li> </ul>	<p>Benefits are more limited than MH Standard, MH CommonHealth, and MH Family Assistance. Excludes services that primarily benefit people w/ disabilities or chronic illness.</p> <p><i>See 130 CMR 450.105(B)(1)</i></p>	<p>Co-payments for prescription drugs</p>	<p>Noncitizens must be qualified. Noncitizens may be eligible for EAEDC, but most will receive MH Essential.</p>
<p><b>MassHealth Essential</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></p>	<p>Adults &lt;65 who:</p> <ul style="list-style-type: none"> <li>✓ Have income ≤100% FPL; and</li> <li>✓ Have been unemployed for ≥1 year or earned &lt;\$3,300 in last year</li> </ul> <p>Special status/PRUCOL disabled aliens 19-64 who meet above tests</p> <p>Special status/PRUCOL aliens ≥65 who:</p> <ul style="list-style-type: none"> <li>✓ Have income ≤100% FPL</li> <li>✓ Have assets &lt;\$2K for individual or &lt;\$3K for a couple</li> </ul>	<p>MassHealth helps pay premiums for health insurance or provides direct benefits</p> <p><i>See 130 CMR 450.105(I)</i></p> <p>For <b>Direct Benefit</b> program, scope of coverage similar to, but more limited than, MH Basic</p> <p><i>See 130 CMR 450.105(I)(1)</i></p>	<p>Co-payments for prescription drugs</p> <p><u>Note:</u> Essential members are also eligible for MH Limited</p>	<p>See MH Essential eligibility box at left</p>

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<b>MassHealth Limited</b>  For more information contact the MH Enrollment Center at:  888-665-9993 <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a>	The following people who would qualify for MH Standard (based on income/category) except that they are excluded for immigration reasons: ✓ Nonqualified (“undocumented”) aliens ✓ Aliens w/ special status <19 who are eligible for premium assistance under MH Family Assistance ✓ Adult aliens with special status if they are parents, pregnant, or disabled	Urgent and emergent care only - Includes labor and delivery - May cover non-ER services needed to treat emergency or urgent medical condition  <i>See 130 CMR 450.105(G)(1)</i>	None	See MH Limited eligibility box at left
<b>Healthy Start</b>  For more information contact the MH Enrollment Center at:  888-665-9993 <a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a>	Pregnant women w/income ≤200% FPL who are: ✓ MA residents  AND  ✓ Not otherwise qualified for MassHealth except for MH Limited  AND  ✓ Not insured for pregnancy-related care of the quality offered by Healthy Start	Pregnancy-related services, outpatient behavioral health	Prescription drug co-payments of \$3-4	Immigration status not relevant but must be Massachusetts resident

**Additional Significant State Health Programs**

<b>Program</b>	<b>Who is Eligible?</b>	<b>What is covered?</b>	<b>Costs</b>	<b>Immigrant Eligibility</b>
<p><b>Children’s Medical Security Plan</b></p> <p>For more information contact the MH Enrollment Center at:</p> <p>888-665-9993  <a href="http://www.cmspkids.com">http://www.cmspkids.com</a></p>	<p>Children &lt;19 who:</p> <ul style="list-style-type: none"> <li>✓ Are a MA resident, AND</li> <li>✓ Not otherwise qualified for MH except for MH Limited</li> </ul> <p>AND</p> <ul style="list-style-type: none"> <li>✓ Who do not have physician and hospital health-care coverage</li> </ul>	<p>Outpatient office visits, outpatient mental health and substance abuse treatment, dental care, durable medical equipment, and two surgical procedures: insertion and removal of tympanostomy ear tubes and repair of inguinal hernias</p>	<p>Premiums for non-preventative medical and mental health visits range from \$2-8 based on income</p> <p>Dental co-payments range from \$2-6 based on income</p> <p>Prescription drug co-payments of \$3-4</p>	<p>Immigration status not relevant but must be Massachusetts resident</p>
<p><b>Health Safety Net</b></p> <p>For more information contact the HSN Help Desk at:</p> <p>877-910-2100  <a href="http://www.mass.gov/dhcfp">www.mass.gov/dhcfp</a></p>	<ul style="list-style-type: none"> <li>✓ MA residents w/ income ≤400% FPL</li> <li>✓ Residents w/ income &gt;400% FPL and extraordinary hospital bills</li> </ul>	<p>Numerous services provided by acute care hospitals and community health centers including, but not limited to: inpatients services, outpatient services, prescriptions, mental health services, rehabilitation services, and dental services</p> <p><i>See 114.6 CMR 13.03(3)(a) and 114.6 CMR 13.03(4)(b)</i></p>	<p>Enrollees w/ &gt;200% FPL must meet a deductible and Medical Hardship patients must make a contribution</p> <p><i>See 114.6 CMR 13.04(6)(c) and 114.6 CMR 13.05(4)</i></p> <p>Individuals ≥19 have co-payments for prescription drugs of \$1-3</p>	<p>Must be Massachusetts resident but immigration status is not relevant</p>
<p><b>Prescription Advantage</b></p> <p>For more information contact:</p> <p>800-243-4636  <a href="http://massresources.org">massresources.org</a></p>	<ul style="list-style-type: none"> <li>✓ Adults ≥65, regardless of income, who are not receiving prescription drug benefits through Medicare or MH</li> <li>✓ Adults ≥65 eligible for Medicare w/ income ≤500% FPL</li> <li>✓ Disabled people &lt;65 w/ income ≤188% FPL who are not getting prescription benefits through MH</li> </ul>	<p>For Medicare recipients, supplemental coverage provided to assist w/ co-payments and there is an annual limit on out-of-pocket costs. Amount of coverage varies by income.</p> <p>For those w/out Medicare, primary prescription drug coverage provided</p>	<p>Depending on income there may be an annual enrollment fee</p> <p>Co-payments based on income</p> <p>Beginning 1/1/10 Prescription Advantage will no longer pay any portion of Medicare prescription drug premiums</p>	<p>Immigration status not relevant but must be Massachusetts resident</p>

**Additional Significant State Health Programs**

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<p><b>Commonwealth Care</b></p> <p><a href="http://www.macommonwealthcare.com">www.macommonwealthcare.com</a></p> <p>1-877-MA-ENROLL</p> <p><b>Managed Care Plans offering Commonwealth Care: BMC HealthNet Plan, Network Health, Fallon Community Health Plan, Neighborhood Health Plan, and CeltiCare.</b></p>	<p>Individuals &gt;19 who are uninsured and are not eligible for:</p> <ul style="list-style-type: none"> <li>✓MH</li> <li>✓Children’s Medical Security Plan</li> <li>✓Medicare</li> <li>✓Medical Security Plan</li> <li>✓Fishing Partnership</li> <li>✓TRICARE; or</li> <li>✓Qualifying Student Health Insurance</li> </ul> <p>AND</p> <ul style="list-style-type: none"> <li>✓Are not offered insurance in which an employer pays at least 33% of the cost of an individual premium or 20% of the cost of a family premium</li> </ul> <p>AND</p> <ul style="list-style-type: none"> <li>✓Income ≤ 300% FPL</li> </ul> <p>Individuals paying the full cost of insurance as self-employed or COBRA or in a waiting period for employer coverage may be eligible for Commonwealth Care.</p> <p><i>See 956 CMR 3.04</i></p>	<p>Coverage varies by plan. All plans include:</p> <ul style="list-style-type: none"> <li>-Outpatient medical care</li> <li>-Inpatient medical care</li> <li>-Mental health and substance abuse services (outpatient and inpatient)</li> <li>-Prescription drugs</li> <li>-Rehabilitation services</li> <li>-Vision care</li> <li>-Dental care for people w/ income ≤100% FPL</li> <li>-Emergency care including ambulance and out-of-state coverage</li> <li>-Wellness care (family planning, nutrition, prenatal, and nurse midwife)</li> </ul>	<p>Premiums charged to anyone &gt;150% FPL and to those from 101-150% FPL who choose any Managed Care Organization other than the lowest cost MCO. Premiums vary by income, region, and MCO choice.</p> <p>There are three plan types that charge different levels of co-payments based on income</p>	<p>Non-U.S. citizens must be “qualified” and are subject to a five-year bar.</p> <p>Noncitizens (aliens) with special status (AWSS) are not eligible for Commonwealth Care as of September 1, 2009.</p> <ul style="list-style-type: none"> <li>✓AWSS who had Commonwealth Care on August 31, 2009, are eligible for a separate plan called the Bridge Program, which is administered by CeltiCare.</li> <li>✓AWSS who did not have Commonwealth Care are eligible for the Health Safety Net.</li> </ul> <p>Undocumented noncitizens cannot get Commonwealth Care.</p>

<b>2009 Federal Poverty Guidelines*</b>	
<b>Number in Family</b>	<b>Annual income</b>
1	\$10,830
2	14,570
3	18,310
4	22,050
5	25,790
6	29,530
7	33,270
8	37,010

\* In effect until at least March 1, 2010.

**Complete List of State-Sponsored Programs**

[http://www.massresources.org/area\\_assistance.cfm?pageID=13&MainPage='yes'](http://www.massresources.org/area_assistance.cfm?pageID=13&MainPage='yes')