

MA Health Care Training Forum Winter 2025 Meeting  
MassHealth and Health Safety Net Updates Transcription

[Health Safety Net Information and Updates]

(Sue Kane) Good afternoon, everyone. It is 2:00. Welcome to the MassHealth and Health Safety Net updates meeting. Thank you for joining us today. I am Sue Kane from the Massachusetts Health Care Training Forum team, and I'll be facilitating today's meeting. Our presenters today are Lydia Sweetser, Policy Analyst at the Health Safety Net, and Kara Chiev, Manager of MassHealth External Training and Communications.

(Lydia Sweetser) Thank you. Sue. Hi everybody. My name is Lydia Sweetser, and I am a Health Policy Analyst for the Health Safety Net. And I will be presenting today.

[Agenda]

Here is an overview of our agenda for the presentation. We will go over claims reprocessing in MMIS as well as in the Health Safety Net system, covered code list and new rates, Health Safety Net reminders, information on our new dental administrator, Health Connector notices, a reminder about special circumstances, and of course, general information. And we'll have time for questions.

[Resweeps of Procedure Codes]

This slide outlines resweeps of procedure codes. For MMIS claims reprocessing, the following codes listed were inappropriately denied in MMIS as a noncovered procedure code for the Health Safety Net benefit plans. The following codes have recently reprocessed in MMIS for adjudication and potential adjudication or payment through the Health Safety Net Payment systems. You can see those listed below with the dates of service they will be reswept for.

Health Safety Net claims resweepClaims billed with Procedure code 99211 were inappropriately paid at a \$0 rate for Community Health Center providers in the Health Safety Net system.

We have identified impacted claims and have reprocessed these in the Health Safety Net system for payment at the PPS rate in the September remits.

[2025 PPS Rates]

The Community Health Care Centers covered code list can be found at the link below. The 2025 rates are outlined here with new patient and established patient rates. It is helpful to note, the Metro Boston rates refer to Middlesex, Norfolk and Suffolk counties only. For acute care hospitals there is a separate link to find their non-covered procedure code list.

[HSN Reminders]

A couple reminders for duplicate claims. Under no circumstances should duplicate claims ever be submitted. Resubmission of previously paid claims should always be submitted as an adjustment, never as an original claim, and should only occur when a change to submitted claims data is warranted.

Frequency codes. The Health Safety Net claims will only be accepted and processed based on the following claim frequency codes. Use of other codes will result in claims being denied, and those are outlined below.

[HSN Reminders (part II)]

TCN Patient Account Number, as a reminder, providers must not enumerate the reported TCN or patient account number when correcting claims. Any billing system enumeration should be suppressed. Additionally, when sending information or claim reviews to the Health Safety Net, providers must send in the entire TCN patient account number, including any leading zeros and any prefix or suffix that is part of that identifier. Please include the corresponding ICN for the claim in question.

Regarding secondary claims. Providers must include all service lines that are a part of the total charges. No service lines should be deleted. Additionally, providers must give Health Safety Net the information on any prior payments, denials or contractual adjustments. This includes any MassHealth payments, other government payers and commercial payers, etc.

Reports available to assist in follow-up for claim status are provided below.

[HSN Reminders (part III)]

And finally, Remediated Remits in INET. Please note that your facility may have more than one payment agreement in INET due to the Health Safety Net processing claims from prior years. Going forward, the Health Safety Net will continue to process current year's remits as well as previous year's dates of service. For facilities who utilize billing intermediaries, please notify your billing intermediary that going forward, there may be multiple remits for your facility.

[New Dental Administrator]

Due to unforeseen MassHealth technical issues, the transition to the new dental administrator, BeneCare, is delayed and is no longer starting February 1st, 2025. The new anticipated operational start date will be announced in the coming weeks.

For more information on the delayed start date of the new dental administrator, please see Dental Bulletin 51. For participating providers and members. No action is needed at this time and there are no immediate changes in MassHealth dental operations.

Please continue to contact MassHealth DentaQuest Customer Service for questions or support until the transition to BeneCare.

[HSN and Health Connector Redetermination Notices]

If recipients have been determined eligible for ConnectorCare, they have 90 days of Health Safety Net medical eligibility starting on the date of application to enroll in a ConnectorCare Plan. If recipients do not enroll within this time period, they will no longer be eligible for Health Safety Net medical services. Additionally, failure to pay ConnectorCare premiums will result in ineligibility for Health Safety Net medical service reimbursement.

ConnectorCare recipients may still be eligible for allowable dental services from an eligible Health Safety Net provider. Any questions related to the ConnectorCare should be directed to the Health Connector at this phone number.

[Special Circumstances and the Medical Hardship Assistance]

A Massachusetts resident at any Countable Income level may qualify for Medical Hardship if allowable medical expenses exceed a certain percentage of his or her countable income, as specified in 101 CMR 613. A determination of Medical Hardship is a onetime determination and not an ongoing eligibility category. An applicant may submit no more than two Medical Hardship applications within a 12-month period.

We have a table below that shows the percentage of countable income depending on the recipient's income level.

[Special Circumstances - Bad Debt]

Bad debt is an account receivable based on services furnished to a patient that is: regarded as uncollectible, following reasonable collection efforts, consistent with the requirements in 101 CMR 613; charged as a credit loss; not the obligation of a governmental unit or the federal government or any agency thereof; and not a Reimbursable Health Service.

Providers are charged with making reasonable attempts in obtaining and verifying the patient's or guarantor's supplied financial information. Reasonable collection efforts must be taken before a bad debt claim can be made which would include documentation of billings, calls, or notices, and any other notifications.

The bad debt must be unpaid after a period of 120 days of continuous collection action.

[Special Circumstances Bad Debt continued]

This slide here, slide 12, includes the information that is needed on the bad debt application, including patient identifiers and evidence of reasonable collection efforts.

[General Information]

This slide provides links for general information regarding the Health Safety Net.

The Health Safety Net is working on internal claims, editing, code, and payment rate updates. We will instruct providers through billing updates of any necessary payment resweeps due to these updates.

[HSN Help Desk]

The Health Safety Net Help Desk inquiries should be addressed to the email address on the slide, and not an individual member of the Help Desk team.

If you feel the matter remains unresolved, please contact the Help Desk Supervisor for assistance.

(Sue Kane) Now I'm going to turn it over to kara Chiev and she's going to provide us with the MassHealth updates.

[MassHealth Updates]

(Kara Chiev) Hi, everyone. Thank you, Sue.

Welcome. And I'm so glad to see you for this quarter's MTF meeting. Specifically, the MassHealth Updates portion of the webinar. As Sue mentioned, my name is Kara Chiev and I am with MassHealth's External Training and Communications team. I'm going to provide you with this quarter's MassHealth updates.

Now, for those joining these events, for the first time, I want to welcome you to our community and those that have followed the MTF meetings quarterly, thank you for taking the time out of your day to attend this afternoon.

So, the information you will hear today applies to our MassHealth applicants and members. If you are a MassHealth provider and you want additional information specific to our provider community, topics like billing, submitting claims to MassHealth and how, and other policies specific to our MassHealth provider community, remember to sign up next quarter for their events. If you weren't able to join them for this quarter, their information and their deck will be available on the MTF shortly.

[Agenda]

Now moving to this quarter's updates. I will walk you through the MassHealth Redetermination and Renewal updates, then move to the Children's Medical Security Plan updates related to these members' premiums and co-pays. Then MassHealth Dental.

You did hear a little bit about dental from Lydia. I'm going to give you additional resources in a little bit. And lastly, Chris Abate from my team will provide the 2025 CAC Recertification to those in the audience that are Certified Application Counselors.

[MassHealth Redetermination and Renewal Update]

[MassHealth Redetermination and Renewal Process]

And moving into the MassHealth Redetermination and Renewal. Federal law requires MassHealth to check whether members are still eligible for MassHealth regularly on an annual basis. This check is called a renewal or redetermination process.

So whenever possible, MassHealth will attempt to automatically process renewals. This means that MassHealth will try to renew the member by matching their information against state and federal data. In this case, MassHealth. In the case that MassHealth is not able to automatically renew a member's coverage, the member will receive a pre-populated form.

So, before January of 2025, MassHealth renewed members at the household's level. The Center for Medicare and Medicaid, or CMS, recently provided clarifying guidance to the renewal structure.

As of January of 2025, and moving forward, MassHealth must conduct renewals at the individual member level. This change will impact some members' renewal experience, and it does apply to all MassHealth members.

[Non-Auto Renewals: Renewal Blue Envelope]

Here you've got we have a screenshot of the renewal blue envelope for those members that we're not able to auto renew. So, there's no change to this packet that is sent to the head of household.

It will contain the renewal form, the cover letter, a Babel sheet, which provides a translation of the following phrase into numerous languages. It says: Important. This has important information about your health insurance.

If the member wants the information translated into their own language, they can call MassHealth Customer Service. It also includes a voter registration and declination form.

[Renewal Notice]

The slide here shows a screenshot, an example of a MassHealth household renewal notice, as indicated by the MassHealth logo at the top corner of this notice.

The packet and the cover notice will be addressed to the Head of Household. Even if the head of household may not need to complete a renewal. The cover letter will identify each household member who will need to complete a renewal.

What to look out for. On the first page of this renewal under Important. That will have the renewal due date. Next you will notice this section. People who must renew now, which goes on to page two. Here you'll find the first or the list of members within this household that will need to complete their renewal with the renewal due date, which is going to be next to their name.

[Sample Renewal Notice for Mix Household]

So, these notices will go out to all of our members. If they are our ACA members, those younger than 65, if you go to the next notice. You may see the notice with the Health Connector and MassHealth logo at the top.

In this case, it's a mixed household where you have a member of the household that's a MassHealth member and another member that is a Health Connector member. Again,

these notices will have similar information. A due date is available, and it shows on the first page of the notice. And the second page will identify which member within that household needs to complete a renewal.

Additionally, there are information and if they are able to access their HIX account or their mahealthconnector.org application, that's going to be the fastest way to complete their renewal.

It also outlines additional methods for submitting their renewal. They can do it by mail, calling MassHealth customer service to complete it over the phone. Or they can do it with help from an Assister out in the community.

[Renewing via MAhealthconnector.org]

As far as enhancements to the system, MassHealth will be enhancing our systems to move forward with this renewal structure, the individual renewal structure. And in the case of our online system at mahealthconnector.org for those members that are younger than 65, as of last week the system was updated to provide that ability for each individual member to complete their renewal.

You'll see here that there is a new banner message at the top. This screenshot is of the member's dashboard. So, it's the first page they'll see when they access their online account. Again, this account and online system is only available to our members younger than 64.

So, on this dashboard you'll notice the renewal date in a number of places. It's in the banner message here as well as in the next step portion of the screen. And under there you'll also notice the complete renewal button where the member can click on the button and start their renewal process.

[Scenario]

So, let's walk through a scenario. What would this look like for our members.



[Scenario: MassHealth Members]

So here we have a MassHealth member, well, two MassHealth members, Joanna, who is 29 years old and Mark, he's 30. They're married and file their taxes jointly.

Mark is the head of household. Joanna indicated she's pregnant and both submitted their application in March of 2024. They are both under the MassHealth income threshold.

So, for program determination, Joanna is determined eligible for MassHealth Standard and continuous eligibility. Mark is eligible for CarePlus.

[Scenario: MassHealth Member Renewals]

So now it's one year later. It's March 2025. Joanna and Mark are now up for their renewal. Here's a new term, qualified member, which means, individual members that's been selected for MassHealth's renewal process.

So, Joanna and Mark are qualified members as they both are selected for their renewal. MassHealth pings the state and federal data sources to verify their information. The results indicate that their household income went up to 175% of FPL for both Joanna and Mark.

[Scenario #1]

So, let's look at Joanna's situation first. For Joanna, when we individually renewed her, we were, MassHealth was able to auto-renew her coverage as she's pregnant and her income threshold is still under 200% of the federal poverty level. So, she continues to be eligible for MassHealth Standard.

When we ping the hub, we weren't able to auto-renew Mark. It indicated that his income went up above the CarePlus threshold.

[Question]

So, a question for you and Sue's going to help us. She'll bring up the poll in a minute

But the question is, Mark, as the head of household will receive the blue a renewal packet from MassHealth.

Now, from what we already know, who will need to complete the renewal? Will it be both Mark and Joanna? B. Will it only be Joanna? Will it only be Mark? Or they don't need to complete a renewal as they were MassHealth was able to auto-renew their benefits. Or the last selection is that you're not sure.

[Answer]

So, the correct answer is Mark. Mark is the only one that would need to complete his renewal. Okay.

[Scenario #1: Possible Outcome #1]

So, as the head of household, when we're now doing renewals at the individual level, the head of household, that's Mark. He'll get the renewal packet. Within that packet, the cover letter will let him know that Joanna was auto-renewed because she was still eligible for MassHealth Standard.

And, Mark, since we weren't able to automatically verify his income, he needs to complete this renewal, submit it before the deadline. And if there's no changes to that information, an RFI will go out requesting that he verifies his income.

And in this outcome, he responds to that RFI on time. And when we go back to verify all of his information. As he's indicated, there's no change to his income and he's verified that information. He's still eligible for CarePlus and will remain in CarePlus.

[Scenario #1: Possible Outcome #2]

Now here's another outcome. For this outcome, Mark didn't respond to his renewal on time. So, as a result, Joanna, we already know she is still eligible for MassHealth Standard, so she'll remain covered under MassHealth.

And using the information matched for Mark through data sources, Mark is determined eligible for Health Connector and that depends on the income which plan he may be

eligible for, whether it's ConnectorCare or QHP with HSN.

So, Mark will receive two notices, a notice letting him know that he's eligible for the Health Connector program. He does need, it'll give him instructions on selecting a plan and paying for a plan. And he'll also get a denial notice from MassHealth, as he's no longer eligible for MassHealth coverage.

Now, here's the important piece. The renewal date for Joanna. Her renewal date will be March of 2026. However, for Mark, he'll be renewed during the fall during the Health Connector's next Redetermination and Renewal process. That's the fall of 2025. So here their renewal date is misaligned now. So, they do have different renewal dates moving forward.

[Scenario #1: Possible Outcome #3]

Here's another possible outcome. Joanna was auto-renewed. No change. She's still eligible for MassHealth Standard. And Mark is a QHP member. It's the fall of 2025, and Mark is up for renewal through the Health Connector's renewal process.

So, what we know is that Joanna will continue to be eligible for MassHealth Standard, as she's continuously eligible. She's in her postpartum period. And her next renewal date is March of 2026.

Mark will receive his renewal notice from the Health Connector, and he will need to respond and pick a plan during the open enrollment period for a 1/1/2026 effective date.

[Key Takeaways]

So, to review, some key takeaways from the updated renewal structure. Renewals will now happen individually for all MassHealth members by auto-renewals or pre-populated forms or, for those members over 65, they will receive their SACA renewal form. Members of the same households may have different renewal dates. There will be new notices, new notice language reflecting these changes. The reported change or changes in circumstances submitted by a household member could affect other household members not up for renewal.

So, this isn't a total change in our process but just wanted to indicate that if a member or somebody within the household makes a change or updates their information, it could impact other household members that are not up for renewal.

[Ways to Renew Benefits]

Also to recap here. Here are the different ways a member can submit their renewal. Online, that's going to be the fastest way to submit a renewal for those members younger than 64, and their application is in [mahealthconnector.org](https://mahealthconnector.org). Members can also call MassHealth Customer Service to complete their renewal. They can also drop off their renewal in person at a local MassHealth Enrollment Center. Or if they have questions, they can connect with a MEC staff by scheduling a phone or a video appointment if they don't want to go in person. For certain members 65 and older, they will have, when they get their renewal notice, they may be able to renew via e-submission so that information will be in their renewal notice. And if you want more information about how members can renew their coverage, you can go to the MassHealth website. Renew your MassHealth coverage.

[Children's Medical Security Plan (CHIP) Premiums and Copays]

Now moving to the next set of updates. Children's Medical Security Plan Updates.

[Elimination of Premiums and Copays]

As of January 1st, MassHealth eliminated premium charge charges. Sorry. Let me try again. As of January 1st, MassHealth eliminated premiums charged to children enrolled in Children's Medical Security Plan (or CMSP) with income up to 300% of the federal poverty level. MassHealth also eliminated copays for all children enrolled in CMSP, regardless of their household income.

And just as a reminder for those that have heard this information before, since April 1st of 2024, MassHealth eliminated copays for MassHealth and HSN members. You can read more about co-pays in this link for you, provided for you at [MassHealth Copays](#).

[MassHealth Dental Provider Update]

As you heard earlier, BeneCare will be the new dental third-party administrator for MassHealth, The Children's Medical Security Plan, and HSN members. The operational start date has been delayed. Once that information is available, it will be published on the MassHealth website. And as Lydia mentioned, continue to call DentaQuest if you have any questions. And until the transition to BeneCare.

[For Participating Providers and Members]

So going on to the next slide. In addition, the dental team did create an initial frequently asked question about the upcoming transition to BeneCare. It was created and is available online. They'll continue to update this resource as more information becomes available. If you want to stay up to date with this transition, you can sign up to receive that information by email. And anyone can sign up to join this listserv. You don't need to be a dental provider.

So please use the sign-up form if you are not a provider and enter your organization or N/A under dental practice name. And if you have any questions regarding the upcoming MassHealth Dental Administrator transition, you can reach out to the mailbox here.

[How to Stay Updated]

Oh, going on to the next slide. There you go. So, the mailbox is [providerrelations@massdhp.com](mailto:providerrelations@massdhp.com). If you have any questions regarding the transition and for those looking for information about dental services available to MassHealth adults and kids, please visit Learn about MassHealth Dental Benefits on mass.gov.

And lastly, I'm going to have Chris to provide Certified Assistants in the audience (CACs) the 2025 CAC Recertification process.

[2025 CAC Recertification]

(Chris Abate) Thank you, Kara. Chris Abate from MassHealth here. So, for our CACs in the audience, just really quickly, to go over the Recerts schedule coming up.

So, our current certificates that you all have are set to expire on April 30th. We're going to open the recertification period to renew your certification in the beginning of March. And that is going to run through the end of April. So be on the lookout for communication from us regarding that. I will be sending out emails, will be sending out email blasts with all the information that is included here in this slide.

So, like usual, the recertification will include an exam, along with some other required courses that we're finalizing right now - what are those going to be. One of them is going to be the revised MassHealth Redetermination and Renewal course. We also just rolled out a DTA and SNAP course, which is going to be a prerequisite as well.

So, if you want to get a head start on things, feel free to dive in and do that course before recertification begins. And then, you know, as usual, if you're not able to recertify, that will result in you losing access to the LMS, the Assister Portal, and the Assister Line.

[Thank You!]

(Sue Kane) So, I want to thank everybody for joining us today. And special thanks to our presenters, Lydia and Kara and Chris. Also, the subject matter experts who helped answer the questions, Angela and Ben from Health Safety Net and Heather Rossi from MassHealth. Thank you again everyone and have a great day and be safe if you're out in the roads tomorrow. Bye-bye. Thanks everyone.