

# MASSACHUSETTS RESOURCE LIST FOR UNION MEMBERS AND THEIR FAMILIES

Information for working families struggling with financial strain and unemployment

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# Unemployment Insurance

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## Overview of Unemployment Benefits

The Massachusetts Division of Unemployment Assistance (DUA) provides unemployment insurance (UI) benefits and transitional services to help Massachusetts citizens get back on the road to re-employment. Unemployment Insurance is a temporary income protection program for workers who have lost their jobs but are able to work, available for work and looking for work.

### 1. Weekly Benefits

Claimants receive a weekly benefit of approximately 50 percent of their average weekly wage, up to the maximum set by law. The current maximum benefit rate is \$629 a week.

The duration of benefits – the maximum number of weeks you would be able to collect benefits – is determined by the total amount of your wages paid and the amount of your benefit rate.

The maximum number of weeks a claimant can collect full benefits is 30 weeks. Under Massachusetts law, regular benefits are capped at 26 weeks (instead of the maximum of 30 weeks) whenever there is a program of extended benefits. However, many individuals qualify for less than the maximum weeks of coverage. The maximum benefit credit amount is \$18,870, which equals \$629 a week for 30 weeks.

If you are eligible for UI benefits in Massachusetts, you will receive a weekly payment for the prior week's benefit. If you have children, you may be eligible to receive an additional \$25 per child per week up to a maximum of 1/2 of your weekly benefit amount.

Through the Emergency Unemployment Compensation (EUC) Program, Massachusetts claimants may be eligible for federal extended benefits.

## Additional Emergency Unemployment Compensation Benefits Legislation Passed

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Information posted on November 30, 2009.

New legislation signed by President Obama on November 6, 2009 provides up to 14 weeks of additional benefits for states with a three-month average unemployment rate above 6% (Tier III),

and an additional 6 weeks for states with a three-month average unemployment rate above 8.5% (Tier IV) if Congress acts to extend the program overall in 2010. Massachusetts currently qualifies as a high unemployment state.

The legislation became effective November 8, making the week ending November 14 the first payable week. Eligible claimants will receive the same weekly benefit amount as previous federal extensions. To be eligible for this additional benefit, claimants must meet these requirements:

- Be currently unemployed
- Are not eligible to establish a regular unemployment benefit claim
- Have exhausted the extended benefits previously available

Due to the complex nature of the procedures required to implement the program, interim measures have been undertaken to ensure that claimants are paid as quickly as possible. Eligible claimants who have exhausted all benefits prior to the most recent extension will be issued check payments based on this schedule:

- First payment issued on December 15. This check will include payments for up to 4 weeks of benefits, including the weeks ending November 14, 21, and 28, and December 5. Claimants must be eligible for the most recent extension in those weeks and certify for those weeks.
- Second payment issued on January 5 for 3 weeks ending December 12, 19, and 26.

The Massachusetts Division of Unemployment Assistance (DUA) provides unemployment insurance (UI) benefits and transitional services to help Massachusetts citizens get back on the road to re-employment. Unemployment Insurance is a temporary income protection program for workers who have lost their jobs but are able to work, available for work and looking for work.

## Have you exhausted your UI Extended Benefits or are you about to exhaust them?

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This information provides you with alternative assistance options if you have already received or will soon receive your final unemployment insurance extension payment. As a reminder, claimants are currently eligible for up to 79 weeks of benefits, which includes up to 26 weeks of regular unemployment insurance, up to 33 weeks of federal Emergency Unemployment Compensation, and up to 20 weeks of federal-state Extended Benefits. If additional benefits become available, you will receive notification and instructions from the Division of Unemployment Assistance.

**Once your final check arrives, you will have exhausted all of the unemployment benefits, including extensions, to which you are currently entitled.** You may be eligible for assistance from other state agencies and nonprofits to help you make ends meet while you continue to look for employment. For information about cash assistance, food and nutrition assistance, child care, transportation, housing, home energy and heating, health care, health insurance, consumer protection, and more, **please visit the "[For Residents](#)" tab at [www.mass.gov](http://www.mass.gov).**

You may also find it helpful to **contact the Mass 2-1-1 Call Center.** This is a statewide phone-based information and referral service. The Mass 2-1-1 Call Center information and referral line is free and confidential. This service is available seven days a week, twenty-four hours a day. By dialing 2-1-1, callers are connected to a trained specialist who can provide information about critical health and human services available in your community.

You can log in at [www.mass.gov/dua/webcert](http://www.mass.gov/dua/webcert), and click on '*check the status of your claim*', to check your balance and the date of your most recent payment. If you have any questions about your unemployment insurance, please call **1- 877-626-6800**.

Please continue to visit the One Stop Career Centers for assistance with your job search and training. **To find the career center near you, visit [www.mass.gov/careercenters](http://www.mass.gov/careercenters) or call 1-877-US-2JOBS.**

# General Assistance in Massachusetts

## **DEPARTMENT OF TRANSITIONAL ASSISTANCE**

For food and nutritional assistance, cash assistance, and employment supports.

[WWW.MASS.GOV/DTA](http://WWW.MASS.GOV/DTA)

Application Information Hotline 1-800-249-2007.

SNAP Hotline (Supplemental Nutrition Assistance Program, formerly known as Food Stamps) 1-866-950-FOOD (3663)

## **MASSACHUSETTS HEALTH INSURANCE CONNECTOR**

For assistance with finding a health insurance plan.

[WWW.MAHEALTHCONNECTOR.ORG](http://WWW.MAHEALTHCONNECTOR.ORG) 1-877-623-6765

## **DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT**

For housing, shelter and fuel assistance.

[WWW.MASS.GOV/DHCD](http://WWW.MASS.GOV/DHCD)

Division of Housing Stabilization 1-877-418-3308

Fuel Assistance and Weatherization 1-800-632-8175

## **DEPARTMENT OF VETERAN SERVICES**

Benefits and resources for veterans and their families may be available through your local Veterans Service Officer. To find one near you, go to “Quick Links” on the following website:

[WWW.MASS.GOV/VETERANS](http://WWW.MASS.GOV/VETERANS)

## **DEPARTMENT OF REVENUE, CHILD SUPPORT ENFORCEMENT**

For assistance with child support orders.

[WWW.MASS.GOV/CSE](http://WWW.MASS.GOV/CSE) 1-800-332-2733

## **ATTORNEY GENERALS OFFICE**

For residents who are facing challenges in the area of consumer protection, fraud,

civil rights violations, health care, and insurance issues.

[WWW.MASS.GOV/AGO](http://WWW.MASS.GOV/AGO)

Public Inquiry & Assistance Center Hotline 1-617-727-8400

**PROJECT BREAD FOODSOURCE HOTLINE**

To locate food pantries and other nutrition resources in your community.

[www.PROJECTBREAD.org](http://www.PROJECTBREAD.org) 1-800-645-8333

**MASSACHUSETTS ASSOCIATION OF COMMUNITY ACTION**

**AGENCIES (MASSCAP)** Community Action Agencies (CAA) provide various services including fuel and weatherization assistance, homelessness prevention, emergency food assistance, and job training. To find one near you, go to “Site Map” on the following website:

[WWW.MASSCAP.ORG](http://WWW.MASSCAP.ORG)

**Homeownership Preservation Foundation**

**Foreclosure Hotline 888.995.4673**

**[www.995hope.org](http://www.995hope.org)**

**Pro Bono Foreclosure Assistance Hotline 800.342.5297 617.603.1700**

**Dept. of Housing and Community Development [www.mass.gov/dhcd](http://www.mass.gov/dhcd)**

**Food Source Hotline 800.645.8333**

**Greater Boston Food Bank 617.427.5200**

**Worcester County Food Bank 508.842.3663**

**The Food Bank of Western MA 413.247.9738**

**Merrimack Valley Food Bank 978.454.7272**

# Utility Assistance in Massachusetts

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## If you have a Financial Hardship

You are protected from having your electric or gas service shut off if you have a financial hardship **AND**

1. you, or someone in your home, is seriously ill; or
2. you have an infant in the home under 12 months; or
3. it is between November 15 and March 15 and you need the service to heat your home; or
4. all adults in the home are age 65 or older and a minor child resides in the home.

A **financial hardship** exists when a customer is unable to pay an overdue bill and such customer meets income eligibility requirements for the Low-Income Home Energy Assistance Program (“LIHEAP”) administered by the Department of Housing and Community Development. You may be eligible for assistance if your household income does not exceed 60% of the state median income. More information can be found on the [Department of Housing and Community Development](#) website. For the most recent [LIHEAP Income Eligibility Chart PDF](#) information, look in the “60% of Estimated State Median Income” column. Alternatively, the Department of Public Utilities may determine that a financial hardship exists. [220 C.M.R. § 25.01](#).

If you have a financial hardship, you should inform your utility company immediately. Your company will send you a certifying form. You will have seven days to return it to the Company with documentation supporting your need for protection.

## If you are age 65 or older

Utility companies may not shut off service to households where all residents are 65 years or older without written approval from the Department of Public Utilities. If all residents of your household are over age 65, you should inform your utility company. [220 C.M.R. § 25.05](#).

## Is assistance with my fuel bills available?

Yes, there are a number of programs available.

For the [Massachusetts Department of Housing and Community Development Energy Assistance Programs](#), call 1 (800) 632-8175.

If you are not eligible for fuel assistance, you may be eligible for help from the [Salvation Army's Good Neighbor Energy Fund](#), which offers one-time grants for eligible consumers. For more information about eligibility criteria and where to apply, please call **1 (800) 334-3047** in area codes 617/508/781/978 or **1 (800) 262-1320** in area code 413. Or, you may visit the [website](#) to learn about the program and review the Fund's income eligibility guidelines.

### **Am I eligible for a discount rate?**

If you either (1) receive any means-tested public-benefit program or (2) are eligible for the Low-Income Home Energy Assistance Program (LIHEAP), you may be eligible for a discount rate from your gas and electric companies. [220 C.M.R. § 11.04 \(5\)](#); [220 C.M.R. § 14.03 \(2A\)](#). For more information on [LIHEAP](#) or for the most recent LIHEAP [Income Eligibility Chart PDF](#), you may visit their website. Look in the "60% of Estimated State Median Income" column. You may also [contact your gas or electric company](#) to determine if you qualify for the discount rate.

### **What is budget billing?**

Budget billing is an arrangement you make with your utility company for equal monthly payments. [220 CMR 25.01\(2\), 25.02\(6\)](#). Your gas or electric usage is estimated for the year, divided by 12 months, and you pay the same amount each month. However, if you are using more or less energy than estimated, your bill may be increased or decreased during the year. At the end of the year, your company will reconcile your bill with the amount actually used. Then you will receive a credit if you overpaid or a bill if you underpaid. By the end of the year, you will have been billed for the actual amount used. [Contact your utility company](#) to set up a budget plan.

### **What is a payment plan?**

A payment plan is a payment arrangement for overdue charges. [220 CMR 25.01\(2\), 25.02\(6\)](#). A monthly payment is due in addition to your current monthly bill. [Contact your utility company](#) to set up a payment plan. If you have a billing dispute with your utility company, you may contact the [DPU's Consumer Division](#).

Commonwealth of Massachusetts Programs

### **Other Shopping Options**

Even if you are not eligible for the programs described, you may still have options to reduce your heating costs or spread them out over the year.

### **For Oil Heat Customers**

Oil Co-Ops: You may consider joining an oil cooperative (co-op). Co-ops often save their members money on their oil and other services, such as energy efficiency services. They may offer discounts to low-income customers. Many co-ops also offer discount membership fees for senior citizens.

**Mass. Energy Consumers Alliance 1-800-287-3950 (Formerly Boston Oil Consumer Alliance)**

**Comfort Crafted Oil Buying Network 1-800-649-7473**

**Cape Self Reliance Corporation: 1-888-808-0120**

**Laconia Consortium: 1-781-862-1943**

**Pioneer Valley Heating Oil Cooperative 1-413-545-0865 (Administered by UMASS Community Services)**

**Center for Ecological Technology 1-413-445-4556**

(For complaints or problems about fixed-price contracts or other heating oil issues, call the Attorney General's Office at 617-727-8400) Budget Payment Plans: Some dealers offer payment plans, allowing you to pay your heating bill over time rather than at the time of delivery. Check with your dealer to see whether this option is available for you.

### **For Natural Gas and Electric Customers**

The Department of Public Utilities approves Natural Gas and Electric rates. Contact your utility to see if you qualify for the Discount Rate. Utility customers may also qualify for LIHEAP and other energy assistance programs offered by utilities. Consumers can also check with their utility/distribution company to see whether they offer Level-Pay (or Budget) Billing. This option allows customers to pay the same amount each month. Each year your utility will reconcile your bill. Then you will receive a credit (if you overpaid) or a bill (if you underpaid) for the balance.

# Mortgage Assistance – Foreclosure Avoidance

If you are at risk of falling behind on your monthly mortgage payments

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- **1-888-995-HOPE (4673)/NeighborWorks America**

If you have an adjustable interest rate that is scheduled to re-set and you suspect that you might have difficulty paying the new, higher monthly payment, it is important that you contact your lender to discuss your situation now. You may be able to refinance to a fixed interest loan, or arrange to alter the terms of your loan in such a way that you can still afford the monthly payment.

You can also call 1-888-995-HOPE (4673). This toll-free foreclosure hotline is staffed by trained professionals from the Home Ownership Preservation Foundation and NeighborWorks America who will provide guidance to you on steps you can take to deal with increased mortgage payments.

- **Home Saver Program/MassHousing**

The state has a new homeowner counseling and mortgage re-financing program called Home Saver that may also be of help to you. For certain qualified homeowners the program offers the opportunity to refinance an existing mortgage into an affordable fixed rate mortgage through the Massachusetts Housing Finance Agency, a state authority with more than 35 years of experience in providing affordable home loans for low- and moderate-income families.

If you are a good fit for the Home Saver loan, counselors will connect you with a responsible and reputable lender who has been pre-selected by MassHousing to complete the loan application process.

- **Mortgage Relief Fund**

On December 20, 2007, Governor Patrick joined Boston Federal Reserve President & CEO Eric Rosengren to announce a \$125 million Mortgage Relief Fund established by Citizens Bank, Sovereign Bank, TD Banknorth, Webster Bank and Bank of America. This Fund is aimed at helping homeowners who are current on their mortgage payments to refinance into

more conventional fixed-rate loans that will better meet their needs and help them stay in their homes.

- **Neighborhood Assistance Corporation of America (NACA)**
- **Pro Bono Foreclosure Assistance Hotline**

Individuals facing foreclosure may benefit from qualified legal counsel to represent them in foreclosure proceedings.

The Attorney General's Office, in partnership with several bar associations, legal services organizations and advocacy groups, announced the establishment of a Pro Bono Foreclosure Assistance Hotline. Low-income Massachusetts residents who are facing foreclosure may call (800) 342-5297 or (617) 603-1700 and leave a message in the foreclosure assistance mail box.

## If you have received a foreclosure notice or a foreclosure date has been set

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- **1-888-995-HOPE (4673)**

If you have recently received a foreclosure notice or a foreclosure date has been set, you are urged to contact NeighborWorks' HOPE Hotline at 1-888-995-HOPE (4673). HOPE counselors are available 24 hours a day, 7 days a week to advise you on the resources available to Massachusetts homeowners.

- **Massachusetts Division of Banks Hotline 1-800-495-BANK (2265)**

Last April, Governor Patrick directed the Division of Banks to seek delays from mortgage lenders for any Massachusetts homeowner facing imminent foreclosure who has filed a complaint with the Division. Since then, the Division has halted foreclosure proceedings for a period of 30- to 60-days for more than 500 homeowners.

If a foreclosure is scheduled in the next seven days, you can contact the Division of Banks directly for help in securing a delay in the foreclosure process until you reach a counselor.

The Division of Banks Hotline 1-800-495-BANK (2265) is open Monday through Friday from 8:45 a.m. to 5 p.m. Homeowners can file a complaint by completing [the consumer complaint form](#).

- **Neighborhood Assistance Corporation of America (NACA)**
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Individuals facing foreclosure may benefit from qualified legal counsel to represent them in foreclosure proceedings.

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# Health Insurance

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Starting July 1st, 2007, all Massachusetts residents age 18 and over must have health insurance. Every year, you will need to show proof of health insurance on your state income tax return. If you do not have health insurance, you will face a stiff tax penalty. For the 2007 tax year, this penalty is the loss of your personal exemption. In later years, it could be up to 50% of the amount of the cheapest health insurance plan offered through the Commonwealth Connector. If you need to buy health insurance, many new health plans are now available.

## **\*\*Open Enrollment for all Plans\*\***

Perhaps the most important thing to know if you currently need health insurance is the one-time open enrollment period. If you enroll in any individual plan between May 1, 2007 and July 31, 2007, you will not have any pre-existing condition provision or waiting period provision. If you are currently uninsured and have previously been shut out from coverage because of pre-existing condition provisions, you now have an opportunity to obtain coverage. This special open-enrollment period will only take place once, so don't miss it.

## **Learn More About Your Options**

If you are one of the 500,000 Massachusetts residents currently shopping for health care, you can learn about some of your options here. You should also visit the [www.mahealthconnector.org](http://www.mahealthconnector.org) to learn more about special Connector plans. Click on the links below to learn about where to get coverage and information for specific groups:

Where Can I Get Coverage?

### **Employer Plans**

**Through your Employer:** If you work and your employer offers health insurance, you will probably want to get your health insurance through your employer. Many employers pay part of the premium for individuals and families. Other plans let you pay your premium with pre-tax dollars. See your employer for information on the available health plans.

**COBRA and Mini-COBRA:** You may stay on the group health insurance offered by your employer for up to 18 months after the date your employment ends. The employer will give you forms that let you stay in the group if you pay the premium yourself. However, you may need to pay up to 102% of the premium that your former employer pays the carrier.

### **Directly from an Insurance Company**

You can call a health insurance company directly to enroll in a plan designed for individuals, families and small groups. Many self-employed residents obtain health coverage this way. You can find a list of the companies that offer these plans at the Division of Insurance [website](#) or call 617-521-7794 to learn more.

### **Commonwealth Connector**

**Commonwealth Choice:** You can go to the Commonwealth Connector to select a “Commonwealth Choice” plan. These plans have the Connector Seal of Approval, certifying that the plans provide good value to consumers.

**Commonwealth Care:** If your family income is less than 300% of the federal poverty level, and you meet certain qualifications, you can to buy a “Commonwealth Care” plan from the Connector. If your family income is under the federal poverty level, you may be eligible for a plan with no premium. If your family income is between 100% and 300% of the federal poverty level, you may be eligible for discounted premium.

Call 1-877-MA-ENROLL or go to [www.mahealthconnector.org](http://www.mahealthconnector.org) to learn more about these plans.

### **Special Information for Senior Citizens**

If you are on Medicare, this will meet the new requirement to have health insurance. For information on Medicare plans available in Massachusetts, visit the Division of Insurance [website](#) or the SHINE website [www.mass.gov/elder](http://www.mass.gov/elder).

If you need to buy health insurance, many new health plans are now available. If you enroll in an individual plan between May 1, 2007 and July 31, 2007, you will not have any pre-existing condition provision or waiting period provision. This special open-enrollment period will only take place once, so don't miss it.

### **Young Adults and Recent Graduates**

#### **Qualified Student Health Insurance Plans (QSHIP)**

If you are enrolled as a student in a Massachusetts college or university, you can buy a special health plan directly from your school. This Qualified Student Health Insurance Plan (QSHIP) has benefits designed for students, but it is only available while you are an enrolled student.

### **Your Parent's Plan**

Your parent or guardian may keep you on their health insurance until your 26<sup>th</sup> birthday, or 2 years after the last year you were claimed as a dependent on your parent or guardian's federal

income tax return - whichever comes first. This dependant care requirement does not apply to self-funded health plans or plans written outside of Massachusetts.

**Young Adult Health Benefit Plan:** If you are between the ages of 19 and 26, and you don't have access to health insurance subsidized by your employer, you may be able to join a Young Adult Health Benefit Plan. Call 1-877-MA-ENROLL or go to [www.mahealthconnector.org](http://www.mahealthconnector.org) to learn more about these plans.

## Financial Assistance

### MassHealth

If your income is below the MassHealth eligibility threshold or are disabled, you may qualify for MassHealth. Call 1-800-841-2900 for more information and an application.

### Medical Security Plan

If you are receiving unemployment compensation, you may qualify for the Medical Security Plan, a state subsidized health insurance plan for people who are receiving unemployment benefits. Call 1-800-914-4455 for more information.

### Commonwealth Connector

**Commonwealth Care:** If your family income is less than 300% of the federal poverty level, and you meet certain qualifications, you can buy a "Commonwealth Care" plan from the Connector. If your family income is under the federal poverty level, you may be eligible for a plan with no premium. If your family income is between 100% and 300% of the federal poverty level, you may be eligible for discounted premium

## Children's Medical Security Plan

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### About the Program

The Children's Medical Security Plan (CMSP) is a program that provides certain uninsured children and adolescents with primary and preventive medical and dental coverage.

### Populations Served

CMSP is for children under the age of 19 who are Massachusetts residents at any income level, who do not qualify for MassHealth (except MassHealth Limited), and who are uninsured. The amount a family pays for CMSP coverage depends on family size and income. There may be a waiting list to receive CMSP coverage.

## Service Offerings

CMSP-covered services include

- preventive pediatric care (well-child visits and immunizations)
- office visits (sick visits and follow-up care)
- urgent care visits not including emergency care in a hospital outpatient or emergency department
- diagnostic laboratory tests and X rays
- hearing tests
- annual and medically necessary eye exams
- outpatient surgery and anesthesia for tympanostomy (ear) tube placement and for inguinal hernias
- durable medical equipment, up to \$200 per state fiscal year, with an additional \$300 per state fiscal year for equipment and supplies related to asthma, diabetes, and seizure disorders only
- outpatient mental health services including substance abuse treatment not to exceed 20 visits per state fiscal year
- prescriptions, up to \$200 per state fiscal year
- dental services, up to \$750 per state fiscal year, including preventive dental care

Some examples of services not covered by CMSP include

- early intervention
- inpatient hospital care and any charges related to inpatient hospital care
- ambulance and other medical transportation services
- emergency room services
- cosmetic or surgical dentistry

Please contact CMSP Customer Service at 1-800-909-2677 for more information about services that are not covered.

CMSP benefits are calculated on a state fiscal-year basis. The state fiscal year starts on July 1 and continues through June 30.

Some children are also eligible for MassHealth Limited, which covers emergency services and care.

Children covered by CMSP with family incomes up to 400% of the [federal poverty level](#) are eligible for the Health Safety Net (HSN) at Massachusetts acute hospitals and community health centers for medically necessary services not covered by CMSP. A deductible, based on family size and income, may apply.

## Premiums and Copayments

Copayments may apply as follows.

- prescriptions: \$3 for generic drugs and \$4 for brand-name drugs
- dental services: \$2, \$4, or \$6 depending on family size and income

CMSP premium amounts are as follows.

- income is less than or equal to 199.9% of the [federal poverty level](#): no premium charge
- income is 200% to 300.9% of the [federal poverty level](#): \$7.80 per child/\$23.40 maximum per family
- income is 301% to 400% of the [federal poverty level](#): \$33.14 per family
- income is greater than or equal to 400.1% of the [federal poverty level](#): \$38.99 per child per month

Download the [CMSP Premium and Copayment Chart \(PDF\)](#) | [TEXT](#) to help you determine your premiums and copayments.

[Find out if you might be eligible.](#)

## Application Process

Call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648) to request a Medical Benefit Request (MBR), or download a MBR:

Application forms may also be requested from and submitted to hospitals, community health centers, and community agencies.

## Contact Information

MassHealth Customer Service: 1-800-841-2900 (TTY: 1-800-497-4648)

Office Hours: Monday through Friday, 8:00 A.M. to 5:00 P.M.

CMSP Customer Service: 1-800-909-2677

Office Hours: Monday through Friday, 8:30 A.M. to 5:00 P.M.

## Healthy Start

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About the Program

The Healthy Start Program provides health insurance to low-income, uninsured pregnant women in order to improve access to early, comprehensive, and continuous prenatal care to improve the health of newborns and their mothers.

#### Populations Served

Healthy Start is for low-income, uninsured pregnant women who are also eligible for MassHealth Limited. Family-group income must be at or below 200% of the [federal poverty level](#).

#### Service Offerings

The Healthy Start Program provides coverage for the following pregnancy-related services.

- pregnancy-related primary and specialty visits
- outpatient behavioral health visits
- prescriptions
- pregnancy-related radiology and laboratory services
- amniocentesis
- prescribed durable medical equipment, up to \$300 per pregnancy
- home nursing postpartum visits (limited to two visits for pregnancies without complications and limited to five visits for pregnancies with complications or C-sections)
- office visits, including family planning
- postpartum obstetric and gynecological care
- newborn hospital and outpatient care including one postpartum pediatric ambulatory visit

Individuals enrolled in Healthy Start are also eligible for MassHealth Limited, which covers emergency services including inpatient labor and delivery and emergency transportation. In addition, Healthy Start members are eligible for the Health Safety Net (HSN), which covers some other medically necessary services at Massachusetts acute hospitals and community health centers for services not covered by the Healthy Start Program. A deductible, based on family size and income, may apply.

Healthy Start benefit limitations are based on a pregnancy basis, rather than a fiscal-year or lifetime basis. If a woman becomes pregnant again, and is eligible for the Healthy Start Program, she is eligible for these benefits.

Newborns born to mothers enrolled in Healthy Start and MassHealth Limited will receive MassHealth Standard benefits starting at birth through the first year of life.

#### Eligibility Criteria

Healthy Start criteria are

- a pregnant woman, and
- not eligible for MassHealth (except MassHealth Limited), and
- have family-group income at or below 200% of the [federal poverty level](#).

[Find out if you might be eligible.](#)

#### Application Process

Call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648) to request a Medical Benefit Request (MBR), or click on the links below to download a MBR.

Submit the completed application to:

MassHealth Enrollment Center  
Central Processing Unit  
P.O. Box 290794  
Charlestown, MA 02129-0214

#### Contact Information

MassHealth Customer Service: 1-800-841-2900 (TTY: 1-800-497-4648)

Office Hours: Monday through Friday, 8:00 A.M. to 5:00 P.M.

Healthy Start Program Customer Service: 1-888-488-9161

Office Hours: Monday through Friday, 8:30 A.M. to 5:00 P.

## Health Safety Net

### 1. What is the Health Safety Net?

The Health Safety Net is a fund set up to help pay for health services for certain low income uninsured and underinsured individuals. The Health Safety Net used to be called the Uncompensated Care Pool (UCP), or Free Care.

### 2. Where can I use the Health Safety Net?

You can use the Health Safety Net at hospitals and community health centers. However, at most hospitals, the doctors bill separately. The Health Safety Net will pay for hospital facility charges (for example beds, nurses, and equipment), but you may have to pay bills for the doctors and for services like lab tests and x-rays. Be sure to check with your doctor first to see if the Health Safety Net will cover all the services you receive, or just some.

### 3. How long will I be eligible for the Health Safety Net?

You may have Health Safety Net eligibility for up to a year, but you may receive review forms before the year is over. If you get review forms or any other forms asking for information, please

complete them as soon as possible. If your address, phone number, health insurance, or income changes, you need to call the MassHealth office (1-888-665-9993) immediately to give them your new information.

#### **4. Do I need to be a U.S. Citizen to be eligible for the Health Safety Net?**

You do not need to be a U.S. Citizen to be eligible for the Health Safety Net. You do need to live in Massachusetts.

#### **5. What are Health Safety Net - Primary and Health Safety Net - Secondary?**

If you do not have any other insurance, and qualify based on income, you will have Health Safety Net - Primary. If you have other insurance, and qualify based on income, you will get Health Safety Net - Secondary. If you have Health Safety Net - Secondary, your other insurance will need to be first billed for health services you get before the Health Safety Net is billed.

#### **6. How do I apply for the Health Safety Net?**

You may apply using the MassHealth application called the Medical Benefit Request (MBR) form. You can get a paper application by calling MassHealth at 1-800-841-2900 or meet the financial counselors at your local hospital or community health center for help with the application.

#### **7. I have a letter that says I am eligible for Commonwealth Care. What happens if I do not enroll in Commonwealth Care? Can I still get health services from the Health Safety Net?**

If you have been determined eligible for Commonwealth Care, you have 90 days of HSN eligibility starting on your date of application to enroll in a Commonwealth Care plan. If you do not enroll within this time period, you will no longer be eligible for HSN.

#### **8. I have a deductible listed for my Health Safety Net. Where should I send that payment?**

You can pay your deductible to the hospital or community health center after you get services. The hospital or community health center will bill you for the amount that you owe. It is very important to keep track of your payments so that you have a record of when you reach your deductible.

#### **9. I have Medicare. Am I still eligible for the Health Safety Net?**

Yes, if you have Medicare, the Health Safety Net can still pay for services that Medicare does not cover, as long as you get the care at a hospital or community health center. The Health Safety Net pays for your services after Medicare or any other insurance you may have has already been billed.

#### **10. What are the co-payments for the Health Safety Net?**

Patients ages 19 and older who use the Health Safety Net have to pay co-payments for prescription drugs. The copayment amounts are \$1 for a generic drug and \$3 for a brand-name drug.

### **11. Where can I fill my prescriptions with the Health Safety Net?**

HSN has a limited number of CHC or hospital outpatient pharmacies in its network and each requires that your prescription be written by a clinician who works at that affiliated facility. In most cases, you will need to see a doctor at the hospital or community health center where the pharmacy is located in order to have your prescription filled there. The Health Safety Net will not pay for prescriptions you get filled at a local retail pharmacy (for example, CVS, Walgreens, etc.) unless they have a special agreement with a neighboring Community Health Center.

### **12. I have private insurance with a high hospital deductible. Am I eligible for the Health Safety Net?**

Yes, as long as you qualify based on your income. Your provider will first bill your insurance for services. Then your provider will bill you for any deductible required for the Health Safety Net. Only afterwards, will the hospital be able to bill the Health Safety Net for the deductible required by your private insurance. The Health Safety Net will pay for deductibles and coinsurance, but not for co-payments required by private insurance plans.

### **13. I had Commonwealth Care, but did not pay my premium. Am I eligible for the Health Safety Net?**

No. Patients who fail to pay their Commonwealth Care premiums are not eligible for the Health Safety Net. You may be able to work out a payment plan with the Connector, even after termination. Please contact the Connector at 1-877-MA-ENROLL for more information

## **About Prescription Advantage Benefits**

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### How Prescription Advantage Works For You

#### For Members with Medicare

Important Note: Reductions to the current fiscal year budget for Prescription Advantage require that benefits be changed effective January 1, 2010. Prescription Advantage will no longer pay any part of the Medicare Part D plan premium for members in categories S1, S2 and S3.

Members in these categories will be responsible for paying the premium invoices from their Medicare Part D plans to ensure that their Medicare Part D coverage continues. Co-payment assistance from Prescription Advantage is only available to members enrolled in a Medicare Part D drug plan or creditable coverage plan.

## Medicare Prescription Drug Plan Co-payments

Prescription Advantage will provide supplemental coverage for members enrolled in Medicare prescription drug plans. Assistance with co-payments is based on annual household income. There is no separate monthly premium for Prescription Advantage membership, but members are required to pay the Part D premium amounts that their Medicare Drug Plan bills them for.

## Annual Out-of-Pocket Spending Limit

Prescription Advantage provides an annual out-of-pocket spending limit. Once this limit is reached, Prescription Advantage will cover prescription drug co-payments for the remainder of the plan year.

## Formulary

Prescription Advantage will provide assistance only for drugs covered by a member's Medicare prescription drug plan. However, Prescription Advantage will cover benzodiazepines for members, but will not cover other drugs excluded from Medicare coverage, such as barbiturates and over the counter drugs.

## Plan Year

*The Prescription Advantage plan year runs from January 1 – December 31 of each year.* For members who reach their annual out-of-pocket spending limit, Prescription Advantage covers drug co-payments for the rest of the plan year.

Please read [Prescription Advantage Rate Schedule Guide for Members Eligible for Medicare](#) for more information.

For more information on how Prescription Advantage will work with Medicare prescription drug plans, see "How Prescription Advantage Works with Medicare's Prescription Drug Coverage (Part D)".

- [How Prescription Advantage Works with Medicare's Prescription Drug Coverage \(Part D\) \(PDF\) | Word](#)

## For Members with Creditable Coverage

For members enrolled in creditable coverage plans, coverage that is equal to or better than Medicare prescription drug coverage, Prescription Advantage may provide assistance with plan co-payments. Members in creditable coverage plans are responsible for their plan's monthly premiums. There is no separate monthly premium for Prescription Advantage membership.

## For Members Not Eligible for Medicare

## Deductible and Co-payments

Deductible and co-payments are based on annual household income. There is no monthly premium for Prescription Advantage membership. When you purchase prescription drugs, you first satisfy your deductible, then you pay a modest co-payment. Some members may qualify to have part or all of their deductibles waived, depending on their annual household income.

#### Annual Out-of-Pocket Spending Limit

Prescription Advantage provides an annual out-of-pocket spending limit. Once the amount you have paid in deductible and co-payments reaches your annual out-of-pocket spending limit, Prescription Advantage will cover prescription drug co-payments for drugs that are on the plan formulary for the remainder of the plan year.

#### Formulary

The Prescription Advantage formulary, for members not eligible for Medicare, includes most prescription drugs. Please visit the [Prescription Advantage Non- Medicare Formulary Prescription Drug Web Tool](#) for more information about the formulary for non-Medicare members.

The formulary for non-Medicare members in Prescription Advantage categorizes prescription drugs into three categories: generic drugs, brand-name drugs, and additional brand-name drugs. Generic drugs have the lowest co-payment, while additional brand-name drugs have the highest co-payment. The Plan's formulary covers most outpatient oral prescription drugs, including insulin and disposable insulin syringes with needles.

#### Plan Year

The Prescription Advantage plan year runs from January 1 – December 31 of each year. For members who reach their annual out-of-pocket spending limit, Prescription Advantage pays the full cost of their covered prescription drugs through the end of the plan year.

Please read [Prescription Advantage Rate Schedule Guide for Members Not Eligible for Medicare \(PDF\)](#) | [Word](#) for more information.

#### Medmetrics Health Partners

Effective July 1, 2006, all Prescription Advantage members will have their prescription drug claims processed through Medmetrics Health Partners.

Also starting July 1<sup>st</sup>, Walgreen's Mail Service will be the new prescription drug mail service provider for Prescription Advantage. Please read [Mail Order Prescriptions: What You Need To Do](#) for more information on mail order through Walgreens Mail Service.

- [Mail Order Prescriptions: What You Need To Do \(PDF\)](#) | [RTF](#)

Please note: The legislation which funds Prescription Advantage requires the Executive Office of Elder Affairs to operate the program within its appropriation for the current fiscal year; thus, during the course of the year, the Plan may be required to impose cost containment measures.

For More Information

Call 1-800-AGE-INFO (1-800-243-4636)

TTY 1-877-610-0241

Customer Service Representatives are available to answer your questions Monday-Friday, 9 AM – 5 PM EST

## **COBRA**

Under the American Recovery and Reinvestment Act of 2009, certain individuals who are eligible for continued health insurance coverage under the federal COBRA law, or the MA mini-COBRA law, may receive a subsidy for 65% of the costs of their health care premium.

<http://tinyurl.com/c66fjg>