



Disability Law Center's Self-Advocacy Materials

Updated February 2018

Health Care

This document is designed for people with disabilities. The information is about your legal rights and how to advocate for yourself as a resident in Massachusetts.

Contact us to request this information in an alternative format.

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Funding

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<http://www.dlc-ma.org/about/funding/>

New MassHealth Managed Care Health Plans

You Will Learn About:

- New MassHealth Managed Care Health Plans Starting March 1, 2018
- Who Must Enroll and What You Need to Know

This document includes general information about legal issues and is intended to be used for informational purposes only. These informational materials should not be taken as legal advice, and do not create an attorney-client relationship. The outcome of any particular matter will depend on a variety of factors. For specific legal problems you would need to contact an attorney.

New MassHealth Managed Care Health Plans

Who must enroll in a Managed Care Health Plan?

You must enroll in a health plan if you:

- Are under age 65, and
- Do not have other health insurance, including Medicare, and
- Live in the community (for example, not in a nursing home), and
- Have MassHealth Standard, CommonHealth, Care Plus, or Family Assistance

Who is not eligible to enroll in a Managed Care Health Plan?

You cannot enroll in a health plan if you:

- Have other health insurance coverage (for example, Medicare or employer-sponsored health insurance)
- Are eligible for or enrolled in One Care, Senior Care Options (SCO), or PACE
- Are a senior eligible for MassHealth based on your age
- Are only eligible for or enrolled in MassHealth Limited

If I am a MassHealth Member who must in enroll in a managed care health plan, what are my managed care health plan choices?

You must in choose and enroll in one of the following:

- A Managed Care Organization (MCO); or
- An Accountable Care Organization (ACO); or
- The Primary Care Clinician Plan (PCC)

In most parts of Massachusetts, MassHealth members required to enroll in managed care will have the following health plan choices:

- One or more ACO, and
- Two MCOs - 1) Tufts Health Together, and 2) BMC HealthNet, and
- The Primary Care Clinician (PCC) Plan

What is a MassHealth ACO?

ACOs are Accountable Care Organizations. MassHealth ACOs are a new kind of managed care option. ACOs are groups of doctors, hospitals, and other health care providers who come together with the goal of giving coordinated, high-quality, cost-effective care to MassHealth members.

There are **two types of MassHealth ACOs**: the **Accountable Care Partnership Plan** and the **Primary Care ACO**. In both of these types of ACOs you must choose a Primary Care Physician (PCP) from within the plan or a PCP will be assigned to you. You may receive behavioral health services or long-term services and supports (LTSS) from a Community Partner (see more on this below). And, after your “plan selection period”, you will have a “fixed enrollment period” with the ACO (see more on the plan selection period below).

The differences in these two types of ACOs are these.

1. To use the Accountable Care Partnership, you must live in the plan’s service area and must use the plan’s provider network.
2. The Primary Care ACO does not have a service area. It uses the MassHealth network of specialists and hospitals and provides direct access to providers in the ‘referral circle.’ The Massachusetts Behavioral Health Partnership (MBHP) provides behavioral health services.

What is a MassHealth MCO?

Managed Care Organizations (MCOs) are health plans run by insurance companies. They provide care through their own networks. Each MCO’s network includes Primary Care Physicians (PCPs), hospitals, behavioral health providers, and specialists. They also have care coordinators who work for the MCO. MCOs are not new in MassHealth, but there are new MCO choices starting March 1, 2018.

To enroll in an MCO, you must live in the service area the MCO covers. You must use the MCO network of providers. You must choose a PCP or one will be assigned to you. You cannot choose a PCP who is part of an ACO. You can change your PCP within the MCO’s network at any time. After your “plan selection period”, you will have a “fixed enrollment period” in the MCO (see more about this below).

What is the Primary Care Clinician (PCC) Plan?

The PCC Plan is a statewide managed care health plan for MassHealth members. In the PCC plan, primary care providers (PCPs) are called primary care clinicians (PCCs). The MassHealth network of PCCs, specialists and hospitals delivers services. The Massachusetts Behavioral Health Plan (MBHP) provides behavioral health services.

If you choose the PCC Plan, you cannot choose a PCP who is part of an ACO.

If you enroll in the PCC Plan you must choose a PCC from the MassHealth list or a PCC will be assigned to you. You can change your PCC at any time. You can also change from the PCC plan to an ACO or MCO at any time.

When do new plan choices go into effect?

The new MassHealth managed care plan options, including ACOs, are available starting **March 1, 2018**. If you are a MassHealth member required to choose a managed care health plan, you can start looking now and even enroll now for care starting March 1, 2018. If you received a green-stripe letter, these new options apply to you.

You may have already been assigned to a new ACO that MassHealth thinks would meet your needs – but you can change plans during the “plan selection period” if you’d prefer a different managed care plan (see the next question/answer).

Will I be able to change my ACO or other managed care health plan? And, what is a “plan selection period” and what is a “fixed enrollment period”?

This year, MassHealth members have a **90 day “plan selection period” – from March 1, 2018 until May 31, 2018**. During the plan selection period, you can choose and also change your health plan if you change your mind about your choice. However, after the plan selection period ends, MassHealth members can only change plans for certain limited reasons, until March 1, 2019. This is called the **“fixed enrollment period”**.

People who become eligible for MassHealth after March 1, 2018 will have 90 days from the start of their MassHealth coverage to choose/change plans. MassHealth will tell them what their plan selection period is and the dates of their fixed enrollment periods.

What is Continuity of Care?

To help make sure MassHealth members do not miss care during this time of transition all the managed care plans must provide “continuity of care” for at least 30 days from March 1, 2018. This means that your new plan must pay for scheduled and prior authorized services during that “continuity of care” period.

MassHealth members with complex care needs, including behavioral care needs, will have a longer continuity of care period, up to 90 days.

Existing prior authorizations will be honored through the authorized period or through the continuity of care period, whichever comes first.

Existing prescription drug refills will be honored unless the drug requires a new prior approval. In that case, you will be given at least a 72 hour supply while your new plan seeks prior approval.

It is important reach out to your new plan with your needs. See the attached list of customer service numbers for each new managed care health plan.

What are Community Partners?

Community Partners are community-based experts who can work with you and your health plan to get and arrange for behavioral health (mental health and/or substance use disorder) and Long-Term Services and Supports (LTSS) services. LTSS help with activities of daily living (such as eating, bathing, dressing, preparing meals, managing medication, and housekeeping).

Who is eligible for Community Partners services?

If you have a high need for behavioral health or LTSS, the ACOs and MCOs are now able to help more by providing you with support from a Community Partner.

When will Community Partners services be available?

Community Partners will begin providing services to MassHealth ACO and MCO members with high behavioral health and LTSS needs on June 1, 2018.

Where can I get more information about my enrollment options?

- Call MassHealth at 1-800-841-2900.
- Call Customer Service for Each Plan (see attachment)
- Visit the new MassHealth website at <https://www.masshealthchoices.com> (you can choose from 12 languages other than English in which to see the information).
- Go to <https://www.masshealthchoices.com/compare> to learn how to compare plans to make your choice.
- Go to <https://www.masshealthchoices.com/member-materials> to see the MassHealth Enrollment Guide and other member information.
- Go to <https://my.mahealthconnector.org/enrollment-assisters> to find an enrollment assister in your community.
- Go to <https://www.masshealthchoices.com/person-help> to find in-person help at several locations around the state.