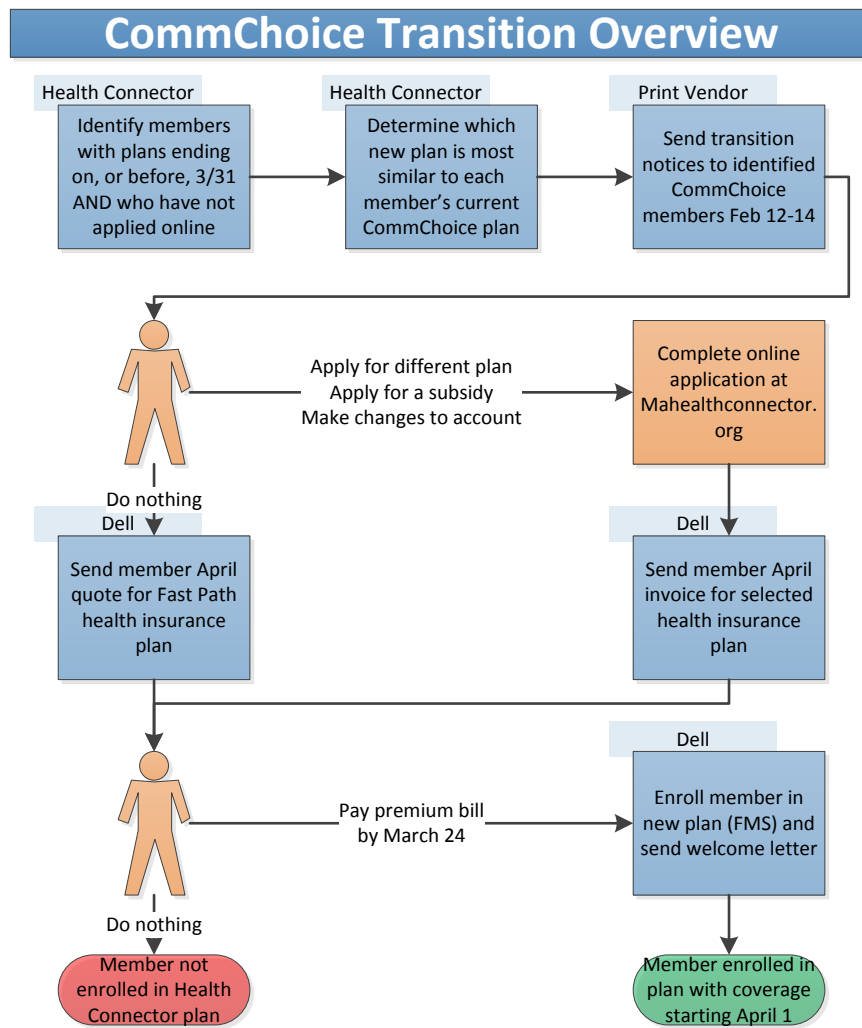


Commonwealth Choice Member Transition Overview

The Commonwealth Choice program is ending on March 31, 2014; all current members must enroll in a new health insurance plan to stay covered. Commonwealth Choice members with plans ending on or before March 31 (including 12/31, 1/31, 2/28 end dates, but not YAPs) will need to transition to a new plan for coverage beginning April 1. To ease this transition, the Health Connector has created a “Fast Path” to enrollment for these members who have not already completed an online application. This Fast Path allows members to easily enroll in the most similar Health Connector health insurance plan, as recommended by their current carrier. A notice has been sent informing members of this option and providing instructions on how to enroll in this plan, as well as other Health Connector health and dental plans. To enroll using the Fast Path option, members only need to pay their first premium bill, which will be automatically sent to them if they take no action.



Commonwealth Choice Member Transition & Notice Details:

Who will be sent transition notices?

Commonwealth Choice non-group members that have the plans ending on or before March 31, 2014 (including those with 12/31, 1/31, 2/28 end dates, but not YAPs) AND who have not successfully completed an application for a new Health Connector plan will be sent notices starting February 13, 2014. This includes 21,630 subscriber groups, representing 31,796 total members.

What information will the transition notice provide?

The notice will inform members that all Commonwealth Choice plans are ending by March 31, 2014 (or sooner), and they must enroll in a new health insurance plan to stay covered. For each member, the notice will identify the most similar Health Connector plan available in 2014, as recommended by their current carrier, and provide instructions on how to enroll. Members will also be reminded that the Health Connector offers many other health and dental plans that can be reviewed and applied for on the Health Connector website.

How will these members be instructed to proceed?

If account information has not changed and the member wants to enroll in a new Health Connector plan, they can either:

- Enroll in the Health Connector plan identified in the notice by paying the first premium bill when they receive their next invoice; or
- Enroll in a different Health Connector plan by applying online at MAhealthconnector.org and completing enrollment by March 24, 2014, in order to have coverage for April 1

If account information has changed, or if the information on file is wrong, the member will need to:

- Re-apply online at MAhealthconnector.org and complete enrollment by March 24, 2014, in order to have coverage for April 1

If the member wants to find out if they qualify for help paying for insurance, they should go to MAhealthconnector.org to fill out an application. In doing so, they should make sure to answer all questions about your household income in the application. If they have already submitted an application for help paying for insurance, they will get a notice from the Health Connector information about whether or not they qualify.

If the member no longer wants to get health insurance through the Health Connector, they should just ignore the premium bill that they receive in the mail. If they do not pay this bill, they will not be enrolled in a plan.

If the member has already started an application online, but did not finish, they can log back into their account and complete and submit the application.

How did we determine what plans to suggest as the most similar (*i.e. Fast Path*)?

We worked with each carrier to determine which new plan, available for coverage starting April 1, is most similar to each of their current Commonwealth Choice plans.

Where can members learn more about the plan suggested to them?

Members can learn more about the suggested plan, and others, on our website. To do so, they should go to MAhealthconnector.org, click on the green button on the left for 2014 coverage, then go to **Learn** in the top right-hand corner of the page, then **Plan Information**.

What is the payment deadline?

March 24 is the deadline for paying the first premium bill in order to have coverage that starts April 1.

Why must members attest to the eligibility requirements?

In order to comply with new health reform requirements, members with no account changes that choose to enroll in the plan suggested by their current carrier will, as an act of paying the first premium, attest that they comply with the following Health Connector eligibility requirements:

- Reside in Massachusetts;
- Are a U.S. citizen, national, or otherwise lawfully present in the U.S.; and
- Are not in jail at this time

Where can I view the transition notice that was sent a member?

A Commonwealth Choice mailing list (Excel file) that identifies all members who have been sent a transition notice will be provided to Dell CSRs. This list will also include information about each member's current plan and Fast Path plan details.