Health Insurance Processing Center
P.O. Box 4405
Taunton, MA 02780-0419

[Member or ARD name]
[Member or ARD address]
[Member or ARD City, State, Zip]

Date: [Date]

Dear: [Member Name]

This letter is to explain the status of your MassHealth, Children's Medical Security Plan (CMSP), or Health Safety Net (HSN) benefits during the COVID-19 public health emergency. The benefits for the person listed below are:

Name: [First Name Middle Name Last Name Suffix], **Member ID:** [Member ID],
Date of Birth: [DOB] still qualifies for [RESINTATED_COVERAGE_TYPE].

During the public health emergency most members will not lose their coverage even if their circumstances change. This is because of the Families First Coronavirus Act, section 6008. The Families First Act says that MassHealth members can keep their coverage during the federal COVID-19 emergency even if their financial circumstances change. If you do lose your coverage MassHealth will send you a notice and tell you how to appeal.

When the federal public emergency ends, MassHealth will notify you of action you must take. It is important to keep MassHealth updated with the latest information to make sure you get the best benefit you qualify for at that time.

How to get the best benefit

To receive the best coverage, MassHealth should have the most current information. If you have had any changes to your circumstances, please report them as soon as possible. This will ensure that you are getting the best benefit you qualify for.

There is no cost to MassHealth members for vaccines, testing, or treatment for COVID-19.

C19-HIX-Prot-1221

Self-Attestation

During the federal public health emergency, we are allowing members and people who are applying to "self-attest." This means that you can tell us that certain information on your application is true if you and your household members are unable to provide proof due to the emergency. We will still try to verify your information using available federal and state data sources first.

If you have received a letter asking you for this information, please follow the steps in the letter to send that information to MassHealth as soon as possible.

Information you can self-attest to:
• Massachusetts Residency
• Access to health insurance
• Relationship
• Proof of Income/Assets
• Disability

You may also fill out and sign a self-attestation form as proof of your situation. The form can be found online at www.mass.gov/info-details/covid-19-emergency-related-waivers-for-members-and-applicants.

Important: We cannot accept self-attestation for proof of citizenship or immigration status.

How to send us information

You can send information in the following ways.

1. Online: (*Recommended*)**:** The fastest way to send proof is online. You can upload documents on our website at MAhealthconnector.org.

   ➢ If you already have an account, log in with your username. If you don't have one, go to the link below to create an account and see your information.

      [invitation code link]

   ➢ After you log in to your account click on "My Documents" at the top of the screen and follow the steps to upload documents.

2. Fax: 1-857-323-8300

3. Mail: Commonwealth of Massachusetts, Health Insurance Processing Center PO Box 4405 Taunton, MA 02780-0419

4. Call: **1-800-841-2900** (TTY: 1-800-497-4648 for people who are deaf, hard of hearing, or speech disabled).

Help with food

If you need help with food, you are not alone. As a result of COVID-19, one in three people in Massachusetts needs help getting food, many for the first time. Several programs can help you and your family get the food you need to stay healthy. Visit www.Mass.gov/FindFoodHelp for food assistance resources that can provide you with information about immediate access to food, as well as ongoing monthly financial support to buy food.

If you have questions

Go to **www.mass.gov/masshealth** or call MassHealth Customer Service at **1-800-841-2900**
(**TTY**: 1-800-497-4648 for people who are deaf, hard of hearing, or speech disabled).

Thank you.

MassHealth