

TIPS FOR MEETING A MASSHEALTH DEDUCTIBLE FOR PEOPLE WITH DISABILITIES UNDER AGE 65

Has Your MassHealth Standard Been Denied or Terminated Due to Excess Income?

If your income is over 133% of the federal poverty guidelines for your household size, and if you do not work an average of 40 hours per month, you must meet a one-time deductible to become eligible for MassHealth CommonHealth coverage.

What is a Deductible?

The amount of the one-time deductible is personal to you and is based upon the amount by which your countable income exceeds 133% of the federal poverty guidelines for your household size. You will receive notice from MassHealth of the amount of your deductible. You have up to 6 months to meet your deductible. The MassHealth notice will provide the dates of your 6 month deductible period.

To become eligible for CommonHealth by meeting a one-time deductible, you must submit proof of medical bills that equal or exceed the amount of the deductible. Bills used to meet the deductible will not be covered by MassHealth. MassHealth will pay for expenses over and above those used to meet the one time deductible.

- You must incur the expense. This means that you have received the service and have been billed. You can use a bill to meet the deductible, even if you have not paid it yet.
- You may use unpaid bills for services you received before or during the deductible period.
- You may use paid bills that you paid during the deductible period.
- If you incurred the bill prior to your 6 month deductible period and it is unpaid, it must be a “current liability” in the six-month deductible period. “Current liability” means that the provider is still trying to collect on it. The bill may be for any member of your household group (not just the person with the deductible).
- The bill must not be subject to further payment by health insurance or other coverage, including the Health Safety Net (i.e. the free care program).

What Out of Pocket Expenses Can be Used to Meet the One-Time Deductible?

Medical expenses can include items that are clearly medical, such as drugs, or items that are paid for over the counter normally, such as diapers for incontinent adults, aspirin, or a taxi ride to the doctor's office. Expenses that can be used include:

1. The Medicare Part B Premium for 6 months can be immediately applied toward the deductible.
2. The 6-month total health insurance premium for Medigap or Medicare HMOs, or private insurance, including COBRA coverage, can be used immediately.
3. Medicare deductibles and co-payments can be used.
4. Transportation to medical appointments.
5. Adult Day Health Programs.
6. Lifeline costs (Personal emergency response units).
7. Vision care.
8. Podiatry.
9. Dental Care.
10. Chiropractor care.
11. Adult Foster Care Program.
12. Bills for PCA services from the care attendant showing the dates services were provided, a description of the services and the amount charged.
13. Remedial services: These are non-medical services made necessary by the medical condition of the individuals, such as the installation of a ramp in the home of a person who uses a wheelchair. The need for the service must be documented by a competent medical authority.

What Do I Do When I Have the Bills?

The itemized bills and receipts must be provided to the MassHealth Electronic Document Management Center. Make sure to **keep a copy** of everything you send.

- Your Social Security Number must be written onto each itemized receipt as well as your name. Also note that the receipts are for the purpose of meeting the one-time deductible.
- The receipts should be mailed or faxed to MassHealth, PO Box 1231, Taunton, MA 02780, FAX 617-887-8777. Always keep a copy for your records.
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What Happens After I Send in the Bills to MassHealth?

Once the deductible is met, MassHealth will send out a notification letter informing you of the date you became eligible for MassHealth CommonHealth. Depending on income, there may also be a monthly premium. You should hear something within a few weeks. If you don't hear, call MassHealth at 1-888-665-9993. If you have a medical need you can call customer service and request that your case be expedited.