

Western Massachusetts

Health Access Network Notes



COMMUNITY PARTNERS, INC.

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Jones Library – Amherst, MA

GUEST PRESENTATION From Free Care to Health Safety Net

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Chapter 58, the Health Care Reform law, mandates changes to the Uncompensated Care Pool. The Pool is administered by the Division of Health Care Finance and Policy (DHCFP). DHCFP released draft regulations and held hearings in August. Changes to and clarifications of the proposed regulations came out of this process, and some are noted here:

Health Safety Net Trust Fund: As of October 1st, the Pool's name will change to the Health Safety Net (HSN).

Coverage Gap: For people who are determined eligible for MassHealth Essential, Basic or RCC, HSN coverage is approved for 10 days prior to and 90 days after the date the application was submitted.

Cost sharing: Cost-sharing charges will be waived at Community Health Centers and critical access hospitals. Children are never subject to cost-sharing. Adults will face cost-sharing at non-critical access hospitals.

Health coverage affordability waiver: Individuals waived from the mandate who would otherwise be eligible for HSN coverage will be approved for HSN coverage.

Citizenship & Identity: Cases pending citizenship/identity proof are eligible, provided they are otherwise eligible.

Prior authorization & formulary: HSN will align its processes and formularies with MassHealth procedures.

HSN deductible – a clarification: the total deductible amount may not exceed the cost of the service provided. For people under 150% FPL, there is no deductible. For those over 150%, \$35 per month is proposed; details on the final amount are not available, but some level of deductible will be required. There is no deductible at community health centers.

Medical hardship: Excessive medical debt can qualify people for the “medical hardship” category. Eligibility will be based on a sliding scale of medical expenses relative to income. If expenses exceed the defined percentage of income, HSN will reimburse providers for unpaid medical expenses in excess of the threshold. Medical hardship will be an event- specific designation made by DHCFP and coverage will be retrospective for the 12 months prior to the determination. It is not an aid category and will not show up in REVS. This is a change. See chart (slide 20)

Implementation: Implementation will happen incrementally. No one will be terminated on October 1st.

Questions & Answers:

Q: Will the term UCP disappear on Oct 1?

A: Yes, the name will change.

Q: When will the regulations be finalized?

A: The earliest date is September 20, but it could be as late as September 29.

Q: Will the HSN “wrap” like the Pool does currently?

A: CommonHealth co-pays or deductibles (used to meet the spend-down) may no longer be billed to the HSN. Also, full MassHealth will no longer be wrapped.

Q: What does HSN do for people who are “eligible but not enrolled” in other kinds of insurance?

A: Students eligible for QSHIP who do not enroll may not use HSN. Those eligible but not enrolled for Commonwealth Care may not use the HSN. Those eligible for employer-sponsored insurance but not enrolled may use HSN Secondary.

Q: Who keeps track of HSN co-pays and deductibles?

A: The medical provider, unless the patient is using multiple sites, in which case it is the patient’s responsibility.

(CP update: A final version of the regulations was approved on September 21. Click here:

<http://www.compartners.org/node/819> for more information.)