

Demographic	PRIVATE HEALTH INSURANCE		PRIVATE/PUBLIC PROGRAMS	PUBLICLY SPONSORED PROGRAMS			Other Programs & Resources	
	Small businesses (1-50 Employees)	Individuals recently covered by an employer health plan	Individuals and Families Above 300% of the FPL	Individuals, Families, and Groups Below 300% of the FPL	Women	Children		Seniors
Program	<p><b>U.S. Uninsured Help Line</b> 800-234-1317</p> <p><b>Group Plans</b> For help learning about plans contact: MA Association of Health Underwriters 800-649-1104 www.massahu.org</p> <p>Or</p> <p>MA Division of Insurance 617-521-7794 www.mass.gov/doi</p> <p>Or</p> <p>Commonwealth Connector 877-MAENROLL www.mass.gov</p>	<p><b>COBRA/MiniCOBRA</b></p> <p>...Or</p> <p><b>Conversion Then HIPAA</b> (Health Insurance Portability &amp; Accountability Act) 866-4-USA-DOL www.dol.gov</p>	<p><b>Individual Plans</b> For help learning about plans contact: MA Association of Health Underwriters 800-649-1104 www.massahu.org</p> <p>Or</p> <p>MA Division of Insurance 617-521-7794 www.mass.gov/doi</p> <p>Or</p> <p>Commonwealth Connector 877-MAENROLL www.mass.gov</p>	<p><b>Individual and Group Plans</b> For help learning about plans contact: MassHealth</p> <p><i>Families &amp; Children:</i> MassHealth Standard, MassHealth Family Assistance, Children's Medical Security Plan <i>Unemployed Adults:</i> MassHealth Essential, Medical Security Plan, MassHealth Basic <i>Pregnant Women:</i> MassHealth Prenatal, Healthy Start <i>Disabled:</i> MassHealth, CommonHealth 888-665-9993 (Enrollment Center) 800-841-2900 (Customer Service) 800-497-4648 TTY (Customer Service) www.ma.gov/masshealth</p> <p>Or</p> <p>Commonwealth Care 877-MA-ENROLL (623-6765) www.macommonwealthcare.com</p> <p>Or</p> <p>The Insurance Partnership (Group premium assistance) 800-399-8285 508-698-2070 www.insurancepartnership.org</p>	<p><b>Breast Cervical Cancer Treatment Program (BCCTP)</b> 877-414-4447 www.massresources.org</p>	<p><b>Children's Medical Security Plan (CMSP)</b> 888-665-9993 800-909-2677 www.cmspkids.com</p> <p><b>Women-Infant-Children (WIC)</b> 800-WIC-1007 www.mass.gov/search"WIC"</p>	<p><b>Medicare</b> 800-633-4227 1-800-MEDICARE www.medicare.gov</p> <p><b>Medicare Prescription Drug Program</b> 800-633-4227</p>	<p><b>MASS Medline</b> 866-633-1617 www.massmedline.com</p> <p><b>MASSCare (AIDS)</b> 617-994-9819 www.mass.gov/search"MassCare"</p> <p><b>AIDS Action Committee Hotline</b> 800-235-2331 617-624-5300 TTD:617-437-1672 www.state.ma.us/dma</p> <p><b>Health Coverage Tax Credit</b> 866-628-HCTC www.irs.gov (key word HCTC)</p> <p><b>VA Medical Benefits Package</b> 877-222-8387 www.va.gov</p> <p><b>Partnership for Prescription Assistance</b> 888-4PPA-NOW (888-477-2669) www.pparx.org</p>
Coverage	<p>Employers may choose one or more employer-sponsored plans for their eligible full-time employees among several carriers and plan designs including Health Savings Accounts plans. Employers may also facilitate the offering of non-employer sponsored plans through the Connector for their part-time and ineligible employees and establish a Section 125 plan enabling employees to use pre-tax dollars to pay health insurance premiums. Each employee can then choose among any of the carriers and plans offered through the Connector.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>Cobra Subsidy:</b> 9 months of partially subsidized COBRA premium</p> <p>These programs are mandates that help employees maintain their same health plan and transition to a new plan without a break in health coverage if they meet certain eligibility criteria</p> <p>COBRA/MiniCOBRA coverage available for 18-36+ months depending on qualifying events; benefits are same as group program</p> <p>HIPAA individual-plan conversion benefits are based on the program selected, no expiration</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Commonwealth Choice plans (Gold, Silver, or Bronze) are lower cost private plans that are available through the Commonwealth Connector and directly through the different insurance carriers. The that are offering the plans: Blue Cross Blue Shield of Massachusetts, Fallon Community Health Plan, Harvard Pilgrim Health Care, Health New England, Neighborhood Health Plan, and Tufts Health Plan.</p> <p>Young Adults Plans (YAP) are available to people between 18-26 to years of age and can only be purchased through the Commonwealth Connector.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>MassHealth</b> members get similar benefits depending on the MassHealth plan they qualify for. There are differently named plans just for children, adults, families, pregnant women, undocumented immigrants, the disabled and more.</p> <p><b>CommonHealth Care</b> benefits include: your own health care provider; preventative care checkups, care when you are sick or injured; prescriptions at your local pharmacy; treatment for alcohol, drug abuse, and mental health problems; vision care; dental care (available to some members only). CommonHealth Care offers four types of plans. Plan Type 1, 2, 3 or 4. A Plan Type is a certain list of health benefits and co-payments that is available to members based on their income.</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Screening will be done through the Women's Health Network. Insurance coverage will be issued through MassHealth Standard. This coverage includes cancer treatment and comprehensive medical care. You will get your benefits through the Primary Care Clinician (PCC) plan (cannot get coverage through HMO)</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p><b>CMSP:</b> covers doctor visits with your child's regular doctor and specialists (like a heart doctor); immunizations (shots); eye exams and hearing tests; X-rays and labs; some mental health care; and dental care.</p> <p>Children with pre-existing health conditions are covered for visits.</p> <p><b>WIC:</b> Nutrition education and services; Breastfeeding promotion and education; A monthly food prescription of nutritious foods; and Access to maternal, prenatal and pediatric health-care services</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	<p>Medicare offers two standard plans, A: Hospital Insurance and B: Medical Insurance, as well as several supplemental and advantage plans</p> <p><i>Pre-Existing Health Conditions Covered</i></p>	
Eligibility	<p><b>GUARANTEED COVERAGE</b></p> <p>Employers with one or more full-time employees may establish a group plan with employer contributions so long as the premium contribution towards full-time non-bargaining employees (defined by the state as working 35 hours or more) is not discriminatory. An employer may also establish a Section 125 plan for employees who are not eligible for their group plan and allow them to purchase insurance through the Commonwealth Connector.</p> <p>A full-time employee is: Someone who works 35 hours or more per week at a Massachusetts location (even if they live in another state). A full-time employee is not: 1) Independent contractors 2) Seasonal employees. 3) Temporary employees are not considered full-time employees. 4) Workers from temp agencies (they are the temp agency's employees).</p> <p>Employers with 11 or more full-time equivalent employees have four requirements: 1) You must offer a Section 125 cafeteria plan that meets Commonwealth Connector regulations. If you don't offer a Section 125 cafeteria plan, you will pay the Free Rider Surcharge if your employees or their dependents get medical care that is paid by the state's Free Care Pool- now called the Health Safety Net -for the uninsured; 2) You must make a "fair and reasonable" contribution to your employees' health insurance or pay a Fair Share Contribution or fine of up to \$295 per employee per year (see below); 3) Employers must complete an Employer Health Insurance Responsibility Disclosure (HIRD) Form/Report which must be filed on-line, to report if you offer a Section 125 Plan that complies with Commonwealth Connector regulations; 4) Employers must collect an HIRD Employee Form from employees who decline your employer sponsored health insurance and/or your employer sponsored Section 125 Plan.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Cobra Subsidy:</b> If you were involuntarily terminated between Sept 1, 2008 and Dec 31, 2009, you are eligible for a COBRA subsidy from the Federal Government. If you become eligible for other insurance, you will no longer be eligible for the subsidy. If you turned down COBRA from Sept 1, 2008 to Feb 17, 2009, you are eligible for the subsidy. Must have an income at or below \$125,000 for individuals or \$250,000 for couples.</p> <p>All coverage terminated within last 60 days (COBRA), or 63 days (HIPAA) for reasons other than gross misconduct or fraud</p> <p>COBRA is for groups with 20+ employees, Mini: 1-19</p> <p>For HIPAA: recently covered by group program or a COBRA plan for 12 continuous months (COBRA option must have been selected if available and exhausted); partial coverage may be available</p> <p>State Continuation Coverage lasts up to 6 months. Must have had group plan for 3 months and request coverage within 10 days of termination</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Anyone can qualify for these plans</p> <p>There is no medical underwriting</p> <p>Commonwealth Choice plans (Gold, Silver, or Bronze) may be right for you if: you are a resident of Massachusetts or are employed by a Massachusetts-based employer, you are age 18 or older, you are not eligible for Commonwealth Care products because family's income before taxes is above 300% of the federal poverty level</p> <p>Young Adults Plan (YAP) is available to people between 18-26 to years of age.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>Note:</b> Those who are self employed, are seasonal workers and/or have income is not solely from W-2 income sources with regular pay stubs, should contact an enrollment specialist to determine what their gross income is and to determine what programs they are eligible for.</p> <p><b>MassHealth</b> you must be one of the following: a parent living with your children under age 19, an adult caretaker relative living with children under age 19 to whom you are related by blood, adoption, or marriage, or are a spouse or former spouse of one of those relatives, and you are the primary caretaker of these children when neither parent is living in the home; or you are under age 19, whether or not you live with your family; you are pregnant, with or without children; or you have been out of work for a long time; or disabled or HIV positive.</p> <p><b>CommonHealth Care</b> you must be 19 or older and have a family gross income below 300% of the FPL; must be deemed uninsured and eligible as defined by the Commonwealth Connector's regulations; and must be a U.S. citizen/national, qualified alien, or alien with special status. You are considered uninsured if: you are currently insured under COBRA; are paying a full premium for you health insurance in the non group insurance commercial market; are in a waiting period prior to becoming eligible under an employer-provided health plan (where employer covers at least 20% of the annual cost of the premium of a family health pan or 33% of an individual plan).</p> <p><b>The Insurance Partnership</b> offers employers with 50 or fewer full time employees assistance with their premiums or their business and income eligible employees. To be eligible, employers must offer (or plan to offer) comprehensive health insurance to its employees and must contribute (or be willing to contribute) at least 50% of the cost of the insurance purchased by the employee. Eligible employees must have family gross income below 300% of the FPL, be between the ages of 19 and 64 (inclusive) and must not have been offered health insurance by their current employer in the past six months, and not have been eligible for health insurance through their spouse's employer in the past six months.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>You are under 65. You have been screened for breast or cervical cancer at a Women's Health Network site and found in need of treatment. Your income is no greater than 250% of the FPL. Your insurance coverage does not cover the treatment you need. You meet the other eligibility requirements for MassHealth.</p>	<p><b>GUARANTEED COVERAGE</b></p> <p><b>CMSP:</b> Children under 19 who do not have other insurance. Children can get this insurance even if their family makes too much money for other programs.</p> <p><b>WIC:</b> Live in Massachusetts, have a nutritional need (WIC staff can help you determine this), are a child under 5, a new mom, or a pregnant or breastfeeding woman, Income must be: Family of 1: \$1604 , Family of 2: \$2159, Family of 3: \$2714, Family of 4: \$3269, \$555 for each additional family member</p>	<p><b>GUARANTEED COVERAGE</b></p> <p>Disabled or age 65 and older or people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).</p>	
Monthly Cost	<p>Employers must make a "fair and reasonable" contribution to your employees' health insurance or pay a Fair Share Contribution or fine of up to \$295 per employee per year.</p> <p>A "fair and reasonable" contribution by an employer is: (i) 25% of an employer's full-time employees* are participating in the employer's group health plan or (ii) an employer's contribution of at least 33% toward a health plan premium for all full-time employees* who are employed more than 90 days. An employer who meets either (i) OR (ii) will not be subject to the Fair Share Contribution of up to \$295 per employee</p>	<p><b>Cobra Subsidy:</b> 35% of monthly premium</p> <p>Costs range from <b>102-150%</b> of group health rates</p>	<p>Costs on the Commonwealth Choice Plans Members must pay a monthly premium. The premium the members pay will depend on the health plan and benefit package they choose, and must be paid every month, even if no services are used. Members must pay a fee co-payment each time they use benefits. In addition, there may be a deductible an amount that the member must pay out-of-pocket for services before the health plan begins paying. This amount will vary by health plan and there will be different family and individual out-of-pocket maximum amounts.</p>	<p><b>MassHealth and CommonHealth Care</b> costs vary depending on which program suites you best. The costs of each plan are based on a sliding scale.</p> <p><b>The Insurance Partnership</b> will pay small businesses up to \$1,000 a year toward health insurance costs for each qualified employee. The amount depends on the tier of coverage chosen by the employee.</p>	<p>No monthly premium for participants with an income below 133%. Participants with an income between 133-250% of the FPL will pay a monthly premium.</p> <p><b>Note:</b> Massachusetts residents age 18 and older under the Individual Mandate law are required to have health insurance that is deemed by the state to be affordable to them at their income level or they risk being fiscally penalized on their personal state income taxes. There is also a waiver/appeals process from the Individual Mandate. On January 1, 2009, individuals, who are NOT exempt from the Individual Mandate, will have to have health insurance that is deemed affordable to them at their income level AND meets "Minimal Creditable Coverage" (MCC) standards set by the Connector. For help contact the local organizations listed in "Other Sources of Information".</p>	<p><b>CMSP:</b> Depending on your income costs will vary (Premiums between \$0-38.99 per child; Co-pays \$2-8, Pharmacy \$3-4).</p> <p><b>WIC:</b> \$0 to minimal share of cost</p>	<p><b>\$0</b> and share of cost for certain services; deductibles for certain plans</p>	

**NOTE:** Government programs look at each family's circumstance to determine eligibility.

Income and assets tests may be required to determine eligibility for publicly sponsored programs.

**FPL** means Federal Poverty Level. See explanation on reverse side of this matrix.

**Guaranteed Coverage** means you cannot be turned down due to your health conditions.

Programs and plan availability, eligibility requirements, costs, and coverages are subject to change.



## Using this Health Care Options Matrix

Each state has a variety of health care coverage options. This Matrix is designed to help residents determine which option is best for them.

**STEP 1** For applicants potentially eligible for public programs, check the chart below to determine his/her FPL percentage.

**STEP 2** See reverse side of this Matrix brochure to determine options for which the applicant might qualify.

**STEP 3** Make a list of the programs and insurance coverage options that may apply to the applicant and then use the contact information provided to access coverage or services.

### Your Federal Poverty Level (FPL) (Based on monthly family income)

Family Size (Household)	25%	50%	75%	81%	100%	133%	175%	200%	250%	300%
1	\$226	\$451	\$677	\$731	\$903	\$1,200	\$1,579	\$1,805	\$2,256	\$2,708
2	\$304	\$607	\$911	\$983	\$1,214	\$1,615	\$2,125	\$2,428	\$3,035	\$3,643
3	\$381	\$763	\$1,144	\$1,236	\$1,526	\$2,029	\$2,670	\$3,052	\$3,815	\$4,578
4	\$459	\$919	\$1,378	\$1,488	\$1,838	\$2,444	\$3,216	\$3,675	\$4,594	\$5,513
5	\$537	\$1,075	\$1,612	\$1,741	\$2,149	\$2,858	\$3,761	\$4,298	\$5,373	\$6,448
6	\$615	\$1,230	\$1,846	\$1,993	\$2,461	\$3,273	\$4,306	\$4,922	\$6,152	\$7,383
7	\$693	\$1,386	\$2,079	\$2,246	\$2,773	\$3,687	\$4,852	\$5,545	\$6,931	\$8,318
8	\$771	\$1,542	\$2,313	\$2,498	\$3,084	\$4,102	\$5,397	\$6,168	\$7,710	\$9,253

- A pregnant woman counts as two for the purpose of this chart.
- Add \$311/month for each additional family member after eight.
- Contact individual programs for deduction allowances on child/dependent care; working parent's work expenses; alimony/child support *received* or court ordered amount *paid*.

Source: Federal Register Vol. 74, No. 14, January 23, 2009, pp. 4199-4201. Monthly percentage data calculated by FHCE and rounded to the nearest dollar.

Note: There is no universal administrative definition of income that is valid for all programs that use the poverty guidelines. The office or organization that administers a particular program or activity is responsible for making decisions about the definition of income used by that program (to the extent that the definition is not already contained in legislation or regulation). To find out the specific definition of income used by a particular program or activity, you must consult the office or organization that administers that program.

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## Other sources of information

### Financial aid and free or low-cost benefits

#### Government Benefits Finder

800-FED-INFO  
[www.benefits.gov](http://www.benefits.gov)

(Search tool for grants, loans and other benefits)

#### Catalog of Federal Domestic Assistance

[www.cfda.gov](http://www.cfda.gov)

(Search tool for grants, loans and other benefits)

### Finding local health care options

#### Bureau of Primary Health Care

888-ASK-HRSA  
[www.ask.hrsa.gov/pc](http://www.ask.hrsa.gov/pc)

(Search tool by zip code)

#### Department of Health and Human Services

[www.hhs.gov](http://www.hhs.gov)

(Various health care search tools)

#### Self Help Clearing House

[www.mentalhelp.net/selfhelp](http://www.mentalhelp.net/selfhelp)

(Search tool for people sharing information on hundreds of diseases, health conditions and other health care related situations)

#### Massachusetts Department of Public Health

617-624-6000

617-624-6001

[www.mass.gov/dph/](http://www.mass.gov/dph/)

(State program information)

### Laws and regulations

#### Massachusetts Division of Insurance

617-521-7794  
[www.mass.gov/doi/](http://www.mass.gov/doi/)

(General information on all types of insurance)

#### Employee Benefits Security Administration

[www.dol.gov/ebsa](http://www.dol.gov/ebsa)

(Official information and rules from the U.S. Department of Labor)

### Help with this Matrix or finding a broker or agent

#### Massachusetts Association of Health Underwriters

[www.masshu.org](http://www.masshu.org)

(State organization of insurance brokers)

### Local Organizations Providing Free Assistance

#### Healthcare for Artists

617-464-3559  
[feedback@healthcareartists.org](mailto:feedback@healthcareartists.org)  
[www.healthcareforartists.org](http://www.healthcareforartists.org)

#### Health Care For All Help Line

800-272-4232  
[www.hcfama.org](http://www.hcfama.org)

#### The Access Project

866-918-5232x231 (toll free)  
[acohen@accessproject.org](mailto:acohen@accessproject.org)  
[www.accessproject.org](http://www.accessproject.org)

(Provide help with medical debt)

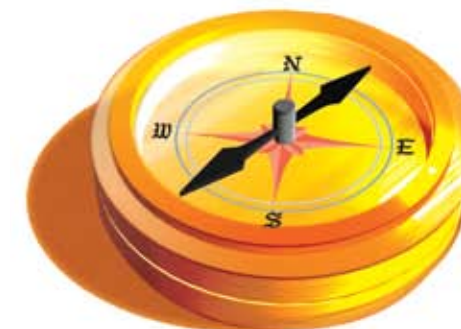
The Foundation for Health Coverage Education® has created the Matrix public education program to ensure that every American has complete information about access and affordability to quality health care coverage. Every effort has been made to include the most up-to-date information available at the time of printing. Program and plan availability, eligibility requirements, costs, and coverages are subject to change. You are encouraged to call or visit the websites listed for each program to ensure that you have the most accurate information available.

## MASSACHUSETTS

# Health Care Options Matrix™



This Matrix offers information about free and low-cost health care coverage for individuals, families, and small businesses.



Helping people navigate their health care options