

## January Messaging

### Talking Points

January 2016

- There is less than one month left in Open Enrollment, which started on November 1 and runs through January 31. Open Enrollment is the time of year when individuals and families can shop for health insurance for any reason without needing a qualifying event. Anyone without insurance can apply for and enroll in health or dental insurance coverage, and current members can switch plans for any reason. Current members, in particular, may wish to shop and compare options for 2016 if their needs have changed or if their premium has changed.
- If renewing members did not actively choose a different plan before December 23, 2015, they were automatically renewed for 2016 into the same or similar plan listed in their renewal letter. They need to keep paying their premium, which may be different for 2016 than it was for 2015, to stay in their plan for 2016.
- If a member decides they want a different plan for 2016, they can go online and shop for a plan with coverage starting February 1 or March 1. Below are the enrollment/payment deadlines for the different coverage start dates available during Open Enrollment:

| Choose a plan and pay Enrollment Bill by:       | To be enrolled in a new plan starting: |
|---|--|
| January 23                                      | February 1                             |
| January 31 (select by date, pay by February 23) | March 1                                |

- Members have three ways to pay their premiums:
  - Pay online at **Payment.MAhealthconnector.org**,
  - Drop off a check or money order at any of the Health Connector's six walk-in centers (see below for locations), or
  - Mail in a check or money order. Payments must be received (not postmarked) by the 23rd of the month.
- The provider search tool (**ProviderDirectory.MAhealthconnector.org**) allows shoppers to review plans offered by the Health Connector to see if their provider is covered by a certain plan. Shoppers can also compare plans in the tool to review provider availability for different plans. While all data in the tool comes from our health plans and is validated, we encourage shoppers to call their doctor's office to confirm that the doctor takes the plan before checking out, as provider networks can change.
- The plan comparison tool (**www.MAhealthconnector.org/compare-plans**) is helpful for current members who wish to compare their 2015 plan benefits with 2016 plan benefits. This is especially helpful to see if a renewal plan has changed from 2015 to 2016.

- Members can get in-person help at the Health Connector’s walk-in centers, or help from enrollment assisters located around the state. A list of walk-in centers is included below and can also be found at [www.MAhealthconnector.org/about/contact](http://www.MAhealthconnector.org/about/contact). A list of enrollment assisters can be found at [www.MAhealthconnector.org/help-center](http://www.MAhealthconnector.org/help-center) and a list of Navigator organizations and their contact information is attached.
  - Service at our walk-in centers is provided on a first-come, first-served basis, but individuals should call ahead to schedule an appointment with an enrollment assister (such as a Navigator).
- The Health Connector’s six walk-in centers for members and new enrollees to get in-person help this Open Enrollment are:

| <b>Center</b>                                       | <b>Address</b>                   | <b>OE Hours (hours vary by walk in center)</b>  |
|---|----------------------------------|---|
| <b>Boston</b> —Health Connector                     | 133 Portland Street<br>Boston    | Mon-Fri 8am-7pm<br>Sat 9am-5pm<br>Sun 11/1/15 & 1/31/16 open 9am-5pm<br>Closed 3pm 12/31<br>Closed New Year's Day |
| <b>Worcester</b> —Health Connector                  | 146 Main Street<br>Worcester     | Mon-Fri 8am-7pm<br>Sat 9am-5pm<br>Sun 11/1/15 & 1/31/16 open 9am-5pm<br>Closed 3pm 12/31<br>Closed New Year's Day |
| <b>Springfield</b> —MassHealth MEC                  | 333 Bridge Street<br>Springfield | Mon-Fri 9am-5pm<br>Closed on all state holidays*  |
| <b>**Lowell</b> Community Health Center             | 161 Jackson Street<br>Lowell     | Mon, Wed, Thurs, Fri 8am-5pm<br>Tues 8am-8pm<br>Sat 8am-1:30pm  |
| <b>**Fall River</b> Health First Family Care Center | 387 Quarry Street<br>Fall River  | Mon-Fri 8am-8pm<br>Sat 9am-1pm  |
| <b>**Brockton</b> Neighborhood Health Center        | 63 Main Street<br>Brockton       | Mon-Thurs 8am-8pm<br>Fri 8am-6pm<br>Sat 9am-1pm   |

\*There is one state holiday during the remainder of Open Enrollment, Martin Luther King, Jr. Day (January 18, 2016).

\*\*Important: Fall River, Brockton and Lowell will only be in operation during the Open Enrollment period and their hours are subject to change.

- The Health Connector’s walk-in centers in Boston and Worcester will be open Sunday, January 31, from 9am-5pm to help individuals sign up or make changes or payments on the last day of Open Enrollment.
- The Health Connector call center is open on weeknights (until 9pm) and weekends (Saturdays & Sundays, 9am-5pm) for individuals seeking support at off-peak dates and times. The call center phone number is 1-877-MA-ENROLL (1-877-623-6765).
- The Health Connector continues to encourage people without health insurance to apply, select a plan and pay until the end of Open Enrollment on January 31. People who do not have health insurance can apply online or visit a walk-in center or assister to complete an application.

### Open Enrollment Communications

- In mid-January, the Health Connector plans to send an “Open Enrollment is ending” and payment reminder e-mail, letting individuals know that they have until January 23 to pay for coverage effective February 1, and until January 31 to pay for a plan and enroll in 2016 coverage.
- In early January, members who had a Bronze plan in 2015 will be sent a “shopping reminder” communication, reminding them of the increased cost-sharing in 2016 Bronze plans and encouraging them to compare plans, shop around and enroll in a plan that they can afford and that will be best for them and their family.
- In early to mid-January, subscribers renewing into a different carrier who did not pay in time for a January 1, 2016 renewal date and are now renewing for a February 1 effective date, and new subscribers who are enrolling for a February 1 effective date, will receive automated phone calls reminding them to pay their bill by January 23.
  - Subscribers renewing into a different carrier will hear this message: “Hello, this is the Health Connector calling with an important message about 2016 insurance coverage. Individuals who recently selected a new insurance carrier must make their first payment by January 23, 2016 in order to complete the enrollment process for coverage effective February 1, 2016. Payments can be made online at **Payment.mahealthconnector.org**. This message will now repeat.”
  - New subscribers will hear this message: “Hello, this is the Health Connector calling with an important message about 2016 insurance coverage. Individuals must make their first payment by January 23, 2016 in order to complete the enrollment process for coverage effective February 1, 2016. Payments can be made online at **Payment.MAhealthconnector.org**. This message will now repeat.”
  - Subscribers will not be called again once they listen to the message or they make their payment.

- New Health Connector members will receive a brief survey in early January, via e-mail, with a few questions asking why they decided to sign up for health insurance and where they heard about the Health Connector. (See attached for talking points dedicated to this survey.)

### Tax Form Communications

- In mid to late January, the Health Connector will mail 1099-HC and 1095-A forms to a portion of 2015 enrollees.
- Health Connector members enrolled in Commonwealth Care in January 2015 will receive a 1099-HC form from the Health Connector for state tax purposes.
  - They will receive a 1095-B for federal purposes from MassHealth because Commonwealth Care was authorized under MassHealth’s Section 1115 waiver.
- Health Connector members enrolled in a Qualified Health Plan at any point in 2015 will receive Form 1095-A for federal tax purposes. This form contains information about the months an individual had health insurance coverage and their amount of premium tax credits. Members need this form in order to file their taxes.
  - They will receive a 1099-HC for state tax purposes from their health plan.
  - Catastrophic plan enrollees and Small Business Health Options Program (SHOP) enrollees will not receive Form 1095-A from the Health Connector; they will receive Form 1095-B from their health plan.
- Members who received Advance Premium Tax Credits (APTCs) during 2015 MUST file federal income taxes to determine the correct amount of premium tax credit they were entitled to.
  - Members who received tax credits must file a federal return even if they have not filed in the past or their income is below the tax filing threshold.
  - Members who received tax credits must use Form 8962 to determine the correct amount of 2015 premium tax credits and must include Form 8962 with their return.
  - Failure to file or failure to include Form 8962 will result in the member being ineligible for APTCs in the future.
- The Health Connector will send “what to expect during the tax filing process” e-mails, and mailers for those who don’t have e-mail addresses, in early January. This communication will remind members that they need to wait to receive their Form 1095-A in the mail before they file their taxes and that they must file taxes, even if they have not filed in the past due to their income. The filing requirement applies whether or not premium tax credit recipients are required to file a tax return. If members file a federal income tax return before they’ve received their 1095-A, they may need to file an amended return with the Internal Revenue Service (IRS). Members need the information from Form 1095-A in order to fill out Form 8962 when they file their tax returns. (See attached for talking points dedicated to this communication.)
- In early January, **MAhealthconnector.org** will have updated web content with information on tax filing and tax forms.

- Many people can get free tax help from programs such as Volunteer Income Tax Assistance (VITA) and Tax Counseling for the Elderly (TCE). Go to our website at [www.MAhealthconnector.org/taxes](http://www.MAhealthconnector.org/taxes) to learn more about getting free help with your taxes. Or you can call 800-906-9887 to find help near you.

### Verification Documents

- After completing their eligibility applications, individuals who have outstanding verifications need to send in their documentation for proof that the information they have submitted is accurate or else they risk losing coverage or help paying for coverage.
- The requested verification documents can be faxed to the Health Connector at 857-323-8300 or mailed to:

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

- For more information, please visit [www.MAhealthconnector.org/verification-documents](http://www.MAhealthconnector.org/verification-documents).

### Member Identification Cards

- If an individual paid right near the December 23 deadline for new coverage starting January 1, they may not have received their health insurance ID cards or other information from their carrier yet. However, if they paid their premium on time, they will have coverage that starts January 1.
- It can take up to 10 business days for a carrier to process a new enrollment after the individual has paid.
- If a new member has not received an ID card from their carrier and needs services, they can call their health plan directly. The plan can confirm eligibility and provide an ID number if they have processed their enrollment to that point. The member should contact the carrier before going to an appointment or visiting a pharmacy.
- If the health plan does not find the member in the system, they can call the Health Connector and the Health Connector can confirm the enrollment was delivered or identify any outstanding steps needed to complete an enrollment.
- Enrollments have been delivered on a timely basis by the Health Connector to the plans, but it can take 10-14 days for an ID card to be delivered to a member.

- For renewing members, some carriers may send new ID cards for their 2016 coverage. If a member renewed into the same carrier and same plan, and are concerned about their ID card, they can call the health plan call center to confirm if they should use the same ID card to seek services.

### Key Takeaways

- There is less than one month left in Open Enrollment, which started on November 1 and runs through January 31. Open Enrollment is the time when anyone can apply for coverage or change plans through the Health Connector.
- Members do not have to take action and choose a new plan for 2016. If they did not actively choose a new 2016 plan in November, they were auto-renewed into their same or a similar plan. As long as they **continue to pay their 2016 premiums**, they will be able to stay in their plan (or a similar renewal plan) into 2016.
- A member can still switch plans any time in January for a prospective effective date, but when they change and pay will determine the coverage effective date for their new plan.
- New online tools, including the plan comparison tool (**[www.MAhealthconnector.org/compare-plans](http://www.MAhealthconnector.org/compare-plans)**) and provider search tool (**[ProviderDirectory.MAhealthconnector.org](http://ProviderDirectory.MAhealthconnector.org)**), make it easier for members to find the information they need in order to make an informed choice about their 2016 coverage.
- If members have an eligibility change that makes them eligible for a new program in 2016, they should pay special attention to the changes in their out-of-pocket costs and monthly premiums. Some members may need help in understanding why changes are happening and what their options are for finding a plan they can afford that meets their needs for 2016.
- In particular, members who were enrolled in Bronze plans in 2015 will have significant out-of-pocket cost increases in 2016. In November, a letter was sent to Bronze members, making them aware of the increased cost sharing in 2016 and encouraging them to shop and compare their plan options for 2016, and a “shopping reminder” email will be sent to Bronze members in early January. Members should make sure they can afford these out-of-pocket costs before deciding to keep a Bronze plan for 2016.
- Anyone who was covered through the Health Connector for at least one month in 2015 should expect to receive a Form 1095-A in the mail by the end of January. These members should wait to file their federal income tax return until they’ve received this important form.