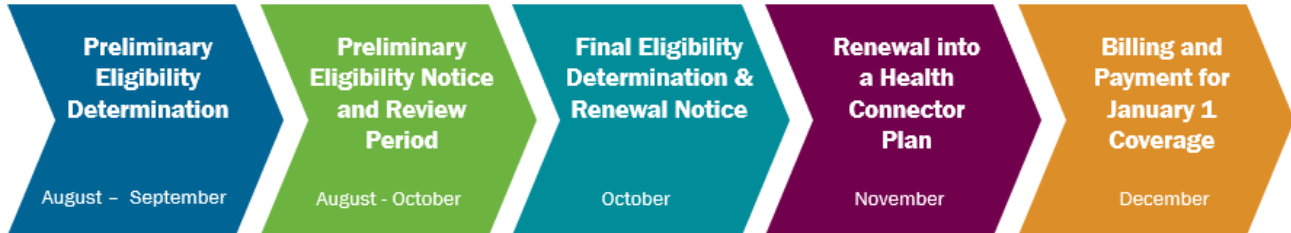


**Open Enrollment is the time of year when anyone can newly apply for coverage, current members' coverage is renewed for the upcoming year, and everyone can shop and change plans for the new coverage year.**

The Health Connector's Redetermination and Renewal Processes are activities that occur each year, over several months, before and during the Open Enrollment Period.



Many of the processes and timelines for Open Enrollment 2024 will be the same as previous years. However, for plan year 2024 there will be new plan options and increased access to subsidies for those eligible for ConnectorCare, in addition to increased activity as the MassHealth renewals process continues.2024

### ***Health Connector Redeterminations and Renewals Review:***

- In August and September, the Health Connector makes a preliminary eligibility determination for actively enrolled Health Connector members and Health Connector members who are part of mixed households.
  - Mixed households are households that have both Health Connector members and MassHealth members.
- Available federal and state data sources are used to check for income and other factors.
- If a member has income that **was verified with documents provided by the member within the last year**, that income will be used to determine eligibility for 2024 coverage.
- If the household **has not verified their income in the last year** and data sources are incompatible, Health Connector will make the determination using available electronic data sources.
- If household has not verified their income in the last year and data sources are **compatible with the income we are using**, we will continue to use the current (attested) income to determine eligibility for 2024.
- If there is no available data about a member, we will not be able to determine eligibility for MassHealth or a subsidized Health Connector plan

### **How can Assistors Help?**

- If someone is projected to lose subsidies for 2024, edit their application and walk through the income section to confirm everything is up to date, then resubmit the application.

- Members who have outstanding verifications should send them as soon as possible, as the verified information will help create the most accurate 2024 eligibility.
- Members who owe verifications when their preliminary eligibility is determined may see changes on their 2024 eligibility online and in their notice.
  - For example, someone may see that they may be renewed into a higher cost ConnectorCare plan or may not be found eligible for any subsidy because they owe income verifications.
- **Notices** with the results of the preliminary eligibility determination are **sent in August and September** to all Health Connector enrollees that applied for financial assistance.
  - Households with only Health Connector members will get:
    - Health Connector Preliminary Eligibility notice
  - Mixed Households will receive either a:
    - Health Connector Preliminary Eligibility notice (for Mixed Households who can be auto-renewed); or a
    - Combined (co-branded) Health Connector and MassHealth notice for Mixed Households with a MassHealth pre-populated form (for those Mixed Households who cannot be auto-renewed).
      - Encourage all members to update their applications for 2023 and 2024, and return or respond to any notice received from the Health Connector or MassHealth
  - Depending on the type of household you are working with, the review period is between 30 – 45 days.
- **In October a Final Eligibility and Renewal notice is sent to All households** with at least one eligible and enrolled Health Connector health plan member that continues to be eligible for a Health Connector plan the following year.
  - This notice will include the health plan name and premium for the upcoming year, and their APTC amount.
  - Those who were determined eligible but not enrolled and got a 2024 application will get a 2024 eligibility notice during this timeframe. It will not include any renewal information.
  -
- **Open Enrollment begins on November 1st.** The Health Connector follows guidelines to place members into their dental and medical plans each year.
- For coverage effective January 1, 2024, payment is due on December 23, 2023.

## Medicare Reminders:

Health Connector members who are **identified as Medicare eligible** in their 2024 application will lose access to State and Federal subsidies.

- They can remain in an unsubsidized Health Connector plan through the end of the calendar year.
- These individuals will not be renewed for the upcoming year (they will lose their Health Connector health plan at the end of the calendar year).  
If they are enrolled in a Health Connector Dental plan, they will be eligible to stay enrolled in Dental for the next year.

## Special Considerations for Coverage Year 2024:

### Pilot expansion of ConnectorCare reshapes affordability and plan options through the Health Connector

- **The Health Connector Board of Directors approved regulatory changes that will expand access to the Marketplace's landmark ConnectorCare program through a two-year pilot program**
- The ConnectorCare expansion that is part of the state budget increases the income limits in the program up to 500 percent of the federal poverty level, up from the current limit of 300 percent, creating the opportunity for tens of thousands of people to access more affordable health care.
- These changes create the largest state-level expansion in health care affordability since the Health Connector was created in 2006 and means people can access plans that deliver important benefits, while saving thousands of dollars a year on the cost of health care.
- Along with expanding income levels, all carriers who participate in the Health Connector will offer plans in ConnectorCare for the first time, beginning in 2024.
- Blue Cross Blue Shield of Massachusetts, Harvard Pilgrim Health Care and UnitedHealthcare join current participating carriers Fallon Health, Health New England, Mass General Brigham Health Plan, Tufts Health Plan, and WellSense Health Plan.
- All of these changes will be in place for the New Year, with Open Enrollment shopping starting on November 1.

### **What does this mean for Massachusetts residents?**

- ConnectorCare includes significantly reduced premiums, lower co-pays, and eliminates the deductible from the plan.
- For an individual, the change increases the income limit for ConnectorCare from \$43,470 a year to \$72,900 a year.
- For a family of four, the change increases the income limit for ConnectorCare from \$90,000 a year to \$150,000 a year.

## Failure to Reconcile (FTR) Changes

- Like last year, members that fail to reconcile (FTR), will not lose tax credits in 2024.
- Again this year, the IRS will not send FTR indicators and the Health Connector will not use FTR as part of its renewal process.
- Members and applicants should file Form 8962 with their taxes for 2023 if they believe they should receive additional premium tax credits beyond what they received in advance. **Mixed Households**
- Like last year, members who are part of mixed households (households with both Health Connector & MassHealth members) will receive a preliminary eligibility notice from the Health Connector and may receive a renewal form from MassHealth.
- As the MassHealth renewals process continues, encourage members to update their applications for 2023 and 2024 as needed and submit requested documents or respond to any notice received from the Health Connector or MassHealth.

## Getting Support:

- We will continue to encourage those who need in person help to call ahead to schedule an appointment with an Assister
- Most of the Health Connector walk-in centers have reopened. Visit the Health Connector's website for updated information:  
<https://www.mahealthconnector.org/about/contact>