

Health Safety Net (HSN) Eligible Services Regulation Public Hearing August 22, 2007**Clarifications to the Proposal**

	Issue	Clarification
1	Commonwealth Care, MassHealth Basic, and MassHealth Essential gap periods	The Division intends to amend the proposed regulation to provide HSN coverage for 10 days prior to and 90 days after an application for benefits for individuals determined eligible for Commonwealth Care, MassHealth Essential or MassHealth Basic insurance programs.
2	Hospital licensed health centers	The Division intends to amend the proposed regulation in order to limit cost sharing at hospital licensed health centers, hospital school based health centers, and other satellite locations in order to treat these sites of care consistent with community health centers.
3	Coverage for individuals waived from the individual mandate	Individuals waived from the individual mandate will be eligible for HSN coverage provided they meet income eligibility requirements.
4	Citizenship and identity	Cases pending MassHealth determination due solely to citizenship and identity documentation may be eligible for the HSN.
5	QSHIP and Young Adult Plans	Individuals enrolled in these plans may be eligible for HSN Secondary or HSN Partial.
6	Private health plans	Individuals enrolled in private health plans, including Commonwealth Choice plans may be eligible for HSN Secondary or HSN Partial, depending on income level. This will be revisited when Minimum Creditable Coverage standards are fully implemented in January 2009.
7	Coinsurance	HSN will permit hospital and community health center billings for coinsurance for individuals with HSN Secondary eligibility and for individuals with HSN Partial eligibility after the HSN deductible is met.
8	Employer sponsored insurance gap period	Low income individuals with access to affordable employer sponsored insurance but who cannot enroll until their employer's next open enrollment period may be eligible for the HSN until that time.

9	Cost-sharing for children	There will be no cost-sharing of any type for services provided to children.
10	Copayments at community health centers	Community health centers may only charge HSN-eligible individuals copayments for prescription drugs.
11	Copayments for individuals with family income under 100% of the Federal Poverty Level	There will be no copayments for individuals with family income under 100% FPL except for prescription drug copayments.
12	Copayments at hospitals exempt from the Critical Access Services requirements	There will be no patient copayment requirements for non-emergency outpatient services at these hospitals, except for pharmacy services if applicable. Copayments will apply for emergency services and inpatient services.
13	Patient deductibles at hospitals exempt from the Critical Access Services requirements	There will be no patient deductible payment requirements for non-emergency outpatient services at these hospitals. Patient deductibles will apply for emergency services and inpatient services.
14	Prior authorization for prescription drugs	Prior authorization will be required for HSN eligible patients for prescription drugs that are not listed on the MassHealth preferred drug list.
15	\$35 Monthly deductible for individuals between 150% and 200% of the Federal Poverty Level	HSN patient deductible payment may not exceed the cost of the services provided.
16	Confidential minors	Minors may apply for HSN eligibility based on their own income only for services related to family planning and sexually transmitted diseases.
17	Battered and abused confidential applicants	Battered and abused individuals may apply for HSN eligibility based on their own income. These individuals will be eligible for all HSN reimbursable services.