

MassHealth Member

Your Rights and Responsibilities

» Nondiscrimination

MassHealth complies with applicable federal civil rights laws. We do not discriminate against, exclude, or treat people differently because of race, color, national origin, age, disability, religion, creed, sexual orientation or sex, including gender identity and gender stereotyping.

MassHealth provides free aids and services to people with disabilities to communicate effectively with us. These services include

- qualified sign language interpreters
- written information in other formats, including large print, braille, accessible electronic formats, and other formats.

We also provide free language services to people whose primary language is not English. These services include

- qualified interpreters
- information written in other languages.

If you need these services, contact us at (800) 841-2900, TTY: (800) 497-4648.

If you believe that MassHealth has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, religion, creed, sexual orientation, or sex including gender identity and gender stereotyping, you can file a grievance with:

Section 1557 Compliance Coordinator
1 Ashburton Place, 11th Floor
Boston, MA 02108

Phone: (617) 573-1704

TTY: (617) 573-1696

Fax: (617) 889-7862, or

Email at: Section1557Coordinator@state.ma.us.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Section 1557 Compliance Coordinator can help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights in the following ways:

Electronically through the Office for Civil Rights Complaint Portal at

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Mail

U.S. Department of Health and Human Services

200 Independence Avenue SW

Room 509F, HHH Building

Washington, DC 20201, or

Phone: (800) 368-1019,

TTY/TDD: (800) 537-7697.

Complaint forms are available at

www.hhs.gov/ocr/office/file/index.html.

» Privacy and confidentiality

MassHealth and the Health Connector are committed to keeping the personal information we have about you confidential. All personal information we have about any applicant or member, including medical data, health status, and the personal information you give us during your application for and receipt of benefits, is confidential. This information may not be used or released for purposes not related to the administration of MassHealth or the Health Connector without your permission unless required by law or a court order.

You can give us your written permission to use your personal health information for a specific purpose or to share it with a specific person or organization. You can also give us your permission to share your personal information with your authorized representative, Certified Application Counselor (CAC), or Navigator, if you have one, by filling out an Authorized Representative Designation Form, a Certified Application Counselor Designation Form, or a Navigator Designation Form.

For more information about how MassHealth and the Health Connector may use and share your information and what your rights are regarding your information, please review the MassHealth Notice of Privacy Practices and the Health Connector's Privacy Policy. You can get a copy of the MassHealth Notice of Privacy Practices by calling (800) 841-2900, TTY: (800) 497-4648, or by visiting www.mass.gov/mashealth. You can view the Health Connector's Privacy Policy at www.mahealthconnector.org/site-policies/privacy-policy.

» Authorized representative

An authorized representative is someone you choose to help you get health care coverage through programs offered by MassHealth and the Massachusetts Health Connector. You can do this by filling out the Authorized Representative Designation Form (ARD) or a similar designation form. An authorized representative may fill out your application or eligibility review forms, give proof of information given on these eligibility forms, report changes in your income, address, or other circumstances, get copies of all MassHealth or Health Connector eligibility or enrollment notices sent to you, and act on your behalf in all other matters with MassHealth or the Health Connector.

An authorized representative can be a friend, family member, relative, or other person or organization of your choosing who agrees to help you. It is up to you to choose an authorized representative, if you want one. MassHealth or the Health Connector will not choose an authorized representative for you.

You must designate in writing on the Authorized Representative Designation Form or a similar designation document or authorization document the person or organization you want to be your authorized representative. In most cases, your authorized representative must also fill out this form or a similar designation document or authorization document. This form is included in the application packet, or you can call us at (800) 841-2900, TTY: (800) 497-4648, or visit www.mass.gov/mashealth, to get one. Please see the instructions on the form for more details.

An authorized representative can also be someone who is acting responsibly on your behalf if you cannot designate an authorized representative in writing because of a mental or physical condition, or has been appointed by law to act on your behalf or on behalf of your estate. This person must fill out the applicable parts of the Authorized Representative Designation Form or provide a similar designation document. If this person has been appointed by law to represent you, either you or this person must also submit to MassHealth or the Health Connector a copy of the applicable legal document stating that this person is lawfully representing you or your estate. This person may be a legal guardian, conservator, holder of power of attorney, or health care proxy, or if the applicant or member has died, the estate's administrator or executor.

» Permission to share information

If you want us to share your personal health information, including sending copies of your eligibility notices, with someone who is not your authorized representative, you can do this by giving us written permission. We have forms you can use to do this. You can call us, or visit www.mass.gov/lists/hipaa-forms-for-mashealth-members, to get a copy of the right form.

» How we use your social security number

Unless one of the exceptions on page 6 applies, you must give us a social security number (SSN) or proof that one has been applied for, for every household member who is applying. MassHealth may require you to give us the SSN, if you can get it, of any person not applying who has or who can get health insurance that covers you or any member of your household.

We use SSNs to check information you have given us. We also use them to detect fraud, to see if anyone is getting duplicate benefits, or to see if others (a "third party") should be paying for services.

We match the SSN of anyone in your household who is applying and anyone who has or who can get

health insurance for any such persons with the files of agencies, including the following:

- Internal Revenue Service
- Social Security Administration
- Department of Homeland Security
- Centers for Medicare & Medicaid Services (CMS)
- Registry of Motor Vehicles
- Department of Revenue
- Department of Transitional Assistance
- Department of Industrial Accidents
- Division of Unemployment Assistance
- Department of Veterans' Services, Human Resource Division
- Bureau of Special Investigations
- Bureau of Vital Statistics (Department of Public Health)
- Banks
- Other financial institutions

If MassHealth pays part of your health insurance premiums, MassHealth may add your SSN or the SSN of the policyholder in your household to the State Comptroller's vendor file. You or the policyholder in your household must have a valid SSN before you can get a payment from MassHealth.

Files may also be matched with social service agencies in this state and other states, and computer files of banks and other financial institutions, insurance companies, employers, and managed care organizations.

» Giving correct information

Giving incorrect or false information may end your benefits. It may also result in fines, imprisonment, or both.

» Reporting changes

Once you start getting benefits, you must let us know about certain changes within 10 days of the changes or as soon as possible. See Section 12, Where to Get Help, for information on where to report changes. These include any changes in income, household size, employment, disability status, health insurance, and address. If you do not tell us about changes, you may lose your benefits. MassHealth will perform information matches with other agencies and information sources when an application is submitted, at annual review, and periodically to update or prove eligibility. These agencies and information sources may include, but are not limited to: the Internal Revenue Service, the Social Security Administration, the Department of Revenue, the Division of Unemployment Assistance, and banks and other financial institutions.

Income information will be obtained through an electronic data match and compared to the income amount you stated on your application ("attested amount") to determine if the data source amount and the attested amount are reasonably compatible. If these amounts are reasonably compatible, the attested income is considered verified for purposes of an eligibility determination.

To be reasonably compatible

- both the attested income and the income from the data sources must be above the applicable income standard for the individual, or
- both the attested income and the income from the data sources must be at or below the applicable income standard for the individual, or
- the attested income is at or below the applicable standard and the income from the data sources is above the applicable standard but their difference is 10% or less; or
- the attested income is above the applicable standard and the income from the data sources is at or below the applicable standard.

When self-attested income is reasonably compatible with the electronic data, the income amount used to determine eligibility is the self-attested amount.

If electronic data sources are unable to prove attested information or are not reasonably compatible with attested information, additional documentation will be required from the applicant.