



How to Apply for **MassHealth** for Your Child

If you have any questions, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

MassHealth is the state Medicaid program. More than 1,000,000 people in Massachusetts get help from MassHealth.

- To get MassHealth Standard, a family's income must be less than 150% of the federal poverty level¹.
- For families whose income is too high to qualify for MassHealth Standard there is CommonHealth.
- CommonHealth is part of MassHealth. It provides help for children and for adults with disabilities.
- There is no income limit for CommonHealth. There is a sliding scale premium based on family income and some families may have to pay a one-time deductible.

Some parents or caregivers may want to get MassHealth or CommonHealth so that their children may use behavioral health services. This guide is for them. This guide may also be useful for anyone else who would like to apply for this benefit.

A. How do I apply for MassHealth for my child?

You must first fill out a Medical Benefit Request (**MBR**) form. You can get the form in two ways

- Go to www.mass.gov/mashealth. and in the lower corner under "Publications" click on [Applications and Member Forms](#). You can print the MBR and fill it out by hand, or type in the form and then print the completed MBR.
- You can also call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-496-4648 for people with partial or total hearing loss) and they can send you an MBR by mail.

There are places that can help you fill out and send in the application.

- You can find a list of organizations [here](#).
- You can also find this list on www.mahealthconnector.org.
 - Click on "About Us." Scroll down and click on "Background on Commonwealth Care." Then click on "Learn more about the application process" under the "How to Apply" heading. You can find the link to the 2009/2010 EOHHS Health Care Reform Enrollment, Outreach and Access to Care organizations halfway down the page.

¹ At this time, the federal poverty level for a family of four is \$33,084. This amount is based on the federal poverty level set for 2011. This amount may change each year. Call MassHealth Customer Service if you are unsure if your family income level meets this requirement.

If you have questions or need help filling out the MBR, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-496-4648 for people with partial or total hearing loss).

Send your completed MBR, along with proof of family income², citizenship and identity³ to: MassHealth Enrollment Center – CPU. P.O. Box 290794, Charlestown, MA 02129-0214.

Keep a copy of everything you send for your records.

- If you mail your application at the post office make sure to ask for a return receipt. This way you know MassHealth got your application. The delivery date may be important to you in the future.
- Do not send more than one copy of your application. The extra paperwork will delay review. It can take up to 45 days to review an application.

B. My child already has MassHealth Basic, Family Assistance, or Essential. How do I apply for CommonHealth?

If your child has a disability, you should call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-496-4648 for people with partial or total hearing loss).

- Ask for a [MassHealth Child Disability Supplement](#) form.
- Also request copies of the [MassHealth Medical Records Release](#) Form (five of these forms are included in the disability supplement).
- In Section C below, see instructions on how to find these forms on the MassHealth Web site. Fill them out and send them to: Disability Evaluation Services, P.O. Box 2796, Worcester, MA 01613-2796.

Keep a copy of everything for your records. If you mail your application at the post office make sure to ask for a return receipt. This way you know MassHealth got your forms.

C. My child does not have MassHealth. How do I apply for CommonHealth for my child?

- Follow the steps from Section A to get and fill out a Medical Benefit Request ([MBR](#)).
 - Be sure to answer “yes” to the question: “Does the person have a disability?”
 - Be sure to fill out the blue Supplement A: Injury, Illness, or Disability Questions form, for the child with a disability.
- If you have questions or need help completing the MBR or the Supplement A form:
 - Call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).
- When you have filled out the forms, send them with proof of family income, citizenship, and identity to: MassHealth Enrollment Center – CPU P.O. Box 290794 Charlestown, MA 02129-0214

Keep a copy of everything for your records. If you mail your application at the post office make sure to ask for a return receipt. This way you know MassHealth got your application.

² Provide a copy of two recent pay stubs. You do not have to send proof of social security or SSI income. If you have questions, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

³ Click [here](#) for more information. See “U.S. citizenship/national status and identity requirements for MassHealth/Commonwealth,” in the MassHealth Member Booklet on page 28. You need to send proof of citizenship only for the family member applying to MassHealth. If you still have questions, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

MassHealth sends this information to the UMass/Disability Evaluation Service (DES).

- DES works with MassHealth to look at disability requests.
- DES will follow up with you and may send you more paperwork to complete.
- The paperwork DES sends you is to help them look at your child's disability request for MassHealth. This process can take up to 90 days.

Can I do anything to help speed up the disability review process?

Yes. These steps will help. (To download the forms described below, go to www.mass.gov/masshealth and in the lower right corner under "Publications" click on [Applications and Member Forms](#). Scroll halfway down and you will find the Medical Release Form and Child and Adult Disability Supplement forms.)

1. When you get the MBR, download or ask for this form:

- [MassHealth Medical Records Release Form](#)
 - Sometimes, MassHealth may need more information about your child's medical conditions. The Disability Evaluation Services (DES) Unit needs your OK to contact your child's providers for this.
 - This form gives DES permission to ask for this information. This information helps them decide if your child is disabled under state and federal law.
 - Fill out one form for each provider by name.
 - If your child is in Early Intervention or has an IEP or 504 plan at school, you will need to fill out a release form for these providers/teachers.

2. When you get the MBR, also download or ask for one of these two forms:

- [MassHealth Child Disability Supplement Form](#)

Fill out this form if your child is aged 17 or younger. It tells MassHealth about your child's medical and mental health providers, daily activities, and educational background.
- [MassHealth Adult Disability Supplement Form](#).

If your child is age 18 or older⁴, you need to fill out this form.

If you need help filling out these forms, you can call the UMass/Disability Evaluation Services Help Line at 1-888-497-9890 (TTY: 1-866-963-1390 for people with partial or total hearing loss).

3. Send the completed Disability Supplement and Medical Records Release forms to:

Disability Evaluation Services, P.O. Box 2796, Worcester, MA 01613-2796

If you have any of the following, send copies with the Medical Records Release and Disability Supplement forms. Sending these documents can help speed up the review process:

- your child's medical records;
- individualized family services plan (IFSP);
- individualized educational plan (IEP), testing, or other records that describe your child's condition(s).

⁴ For youths between ages 18 and 21 years old some work requirements may apply. Click [here](#) for more information or go to "MassHealth CommonHealth" found in the MassHealth Member Booklet on page 10. If you still have questions, call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648 for people with partial or total hearing loss).

Keep a copy of everything you send for your records. If you mail your application at the post office make sure to ask for a return receipt. This way you know DES got your forms.

After you have sent in this information, a staff member from the UMass/Disability Evaluation Service may contact you if they need more information.

4. Follow-up with your child's medical or mental health providers.

Check with your child's provider(s) to make sure they sent the requested information to the UMass/Disability Evaluation Service.

Required Documents for applying to MassHealth

Send the following documents to: MassHealth Enrollment Center – CPU, P.O. Box 290794, Charlestown, MA 02129-0214.

- Filled out MBR
- Proof of citizenship
- Proof of identity
- Proof of family income†

Additional documents required for CommonHealth. Send these documents to Disability Evaluation Services, P.O. Box 2796, Worcester, MA 01613-2796

- Completed Supplement A
- Completed MassHealth Child Disability Supplement (or Adult Disability Supplement for your children over 18 years old)
- Completed MassHealth Medical Records Release Form(s)
- Copies of records that describe your child's condition. Examples include medical records, an Individualized Educational Plan (IEP), an Individualized Family Services Plan (IFSP), or psychological testing results.

* *Keep a copy of everything you send for your records. If you mail it at the post office make sure to request a **return receipt**. This way you know MassHealth and/or DES got your documents.*