

Suggested Advice for HUSKY A Parents Being Cut off of TMA 7/31/16 Regarding Protecting Themselves if Becoming Uninsured

It is very important to include information on how HUSKY A parents being cut off of the one year of Transitional Medical Assistance (TMA) on July 31, 2016 might be able to retain eligibility under other Medicaid categories or buy into a qualified health plan from the exchange (Access Health-CT). For more information about alternative Medicaid eligibility categories or buying insurance on the exchange, go to www.accesshealthct.com, www.ct.gov/dss/cwp/view.asp?a=2345&q=490624, or call 1-855-371-2428.

Also, affected HUSKY A parents should be encouraged to request a hearing with DSS before July 31, 2016 if there is a possibility a mistake was made; **coverage will then continue uninterrupted pending the hearing and hearing decision**, which often takes several months.

However, we know, based on what happened to the 1200 parents who were cut off of HUSKY A last year when the income limit was reduced, because they were ineligible for TMA (due to lack of any earned income), that most of those who lose Medicaid coverage will **not** be able to afford to buy insurance on the exchange and will become uninsured (or will be dropped after signing up, due to non-payment of premiums). Given that reality, affected parents should also be provided with information to help prepare in case they will in fact be uninsured starting on August 1st. A few options:

- First and foremost, affected parents need to talk with their providers – even if they move to an Access Health-CT plan, they may not be able to see the same providers.
- They should schedule any preventive care, elective surgery and other treatment, or medical or dental care that is going to be needed fairly soon anyway, to occur **now** – Many patients put off getting treatment thinking there is no harm in waiting; even if that is true in terms of medical harm, as a practical matter, without insurance, they will not be able to afford the services later, so appointments before August 1st should be strongly encouraged. If the provider's office says there are no appointments before then, they should be encouraged to explain why they need one sooner.
- If there are prescription drugs or medical supplies for which longer supplies can be provided, like a 90 day supply instead of a 30 day supply, the longer supply should be sought and obtained.
- People with ongoing health problems must talk with their provider about how to continue with care – how to find another provider and where services can be obtained free of charge, such as from Federally Qualified Health Centers; how to negotiate prices and a payment plan with a provider, if necessary; and how to explore pharmacy assistance programs and low cost medication options. For further information, contact 2-1-1, the Office of the Healthcare Advocate, 1-866-466-4446 (1-866-466-4446), or <http://uwc.211ct.org/files/2015/01/HealthCareUninsuredGuide2008.pdf>
- If all else fails, they should be encouraged to seek treatment from hospital emergency rooms if they have any concerns about their health and cannot see any other qualified provider. They should be told about free bed funds (certain hospitals' obligation to provide free or reduced cost treatment under money donated to them in trust for this purpose) to cover the bill.
- A parent who loses HUSKY A and then incurs large medical bills may be able to get back on it for six months, if they present proof of such bills through the process of "spending down."

Questions? Contact Sheldon Toubman, NHLAA, 203-946-4811, ext. 148 or stoubman@nhlegal.org