HIV Drug Assistance Program (HDAP*) and the MA Health Connector: Open Enrollment 2027

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BRIDGE = Benefits, Resources, & Infectious Disease Guidance and Engagement

*HDAP is a program of the Massachusetts Department of Public Health

Webinar Overview

- Infectious Disease Drug Assistance Program (IDDAP)
- HDAP's New Eligibility and Enrollment System: Provide Enterprise (PE)
- The BRIDGE Team (Benefits, Resources, Infectious Disease, Guidance, and Engagement)
- Open Enrollment 2027 & MA Health Connector and Federal Policy Changes in 2027
- Applying for Health Insurance through the MA Health Connector
- The CHII Team (Comprehensive Health Insurance Initiative)
- CHII & the MA Health Connector
- MassHealth Changes
- Special Considerations for Immigrants
- Annual Medicare Enrollment Periods
- Resources

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Infectious Disease Drug Assistance Program (IDDAP)

The IDDAP program includes:

- HIV Drug Assistance Program (HDAP)
  - Health insurance premium assistance through the Comprehensive Health Insurance Initiative (CHII); and
  - Training and technical assistance to consumers and providers on navigating the complex health insurance landscape though the BRIDGE Team (Benefits, Resources, Infectious Disease Guidance and Engagement)
  - Houses of Correction Program (HOC)
- PrEP and PEP Drug Assistance Programs (PrEPDAP & nPEP)
  - Including Insurance Navigation
- Tuberculosis Drug Assistance Program (TDAP)

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Benefits of the HDAP and CHII Program

- Keeping clients active in HDAP is the best way to ensure that clients with a sudden change in circumstances (e.g., loss of or change in insurance coverage) can access the benefits of HDAP and CHII including:
  - Medication co-pay assistance
  - Health Insurance Premium Assistance through HDAP's CHII Program
  - Temporary 100% medication assistance for clients with a gap in insurance coverage
- **Please remember to notify HDAP and CHII about insurance changes, preferably before the changes take effect to keep their coverage active, especially important for CHII clients, and to avoid problems at the pharmacy!**

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HDAP's New Eligibility and Enrollment System: Provide Enterprise (PE)

- 9/1/26 HDAP's new client data system, Provide Enterprise (PE), went live.
- Staff must complete training to receive approval to use the system.
- Access to PE is granted through the Commonwealth's Virtual Gateway system (using MyMassGov).
- Providers are required to submit HDAP applications online through PE. Applications from providers submitted via email, fax, or mail will not be accepted.
- Effective 7/1/26 HDAP recertification changed to annual; all active clients on 7/1/26 received an automatic extension to their current coverage.
- The recertification window opens 3 months before a client's term date and application needs to be completed before a client's term date.

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HDAP's New Eligibility and Enrollment System: Provide Enterprise

- Health insurance premium payment documentation for clients covered by the Comprehensive Health Insurance Initiative (CHII) should be emailed to chiidocs@crihealth.org and **not** uploaded to PE.
  - This inbox is not monitored and should be used only to submit premium documents.

- Clients can submit their own applications and updates; these are routed to case managers to review and confirm before final submission.

- For training information or questions about the new system, please email DPH-BIDLS-IDDAP@mass.gov.

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Requesting 100% medication coverage

- Active HDAP clients' who lack insurance or prescription coverage may be eligible for temporary full pay (100%) coverage.
- Requests should be made as an Insurance update on the Portal.
- 100% coverage is temporary and granted on a month-by-month basis.

100%/ Full-Pay Requests should include:

1. When/why client lost insurance
2. What is being done to regain insurance coverage
3. What insurance and when it is expected to become active

NOTE – to extend full pay beyond one month, HDAP must be notified before the temporary coverage ends .

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BRIDGE Team (Benefits Resources Infectious Disease Guidance & Engagement)

- Provides health insurance and benefits program enrollment, guidance, outreach, and training to individuals and organizations throughout Massachusetts.
- We develop trainings and provide individualized assistance for case managers, community resource specialists, and health care consumers and providers.

BRIDGE can help:

- Guide clients living with HIV through health insurance plan selection, particularly during Open Enrollment periods.
- Assist clients with accessing health insurance, especially if a client's insurance terminates or if a client is in a transitional period, such as a loss or change in job and/or income or becoming Medicare eligible.
- Provide support and advocacy when clients face barriers to getting their medications and medical care that they need.

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Open Enrollment 2027 and Federal MA Health Connector Changes

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Federal Changes to Noncitizen Eligibility for Advance Premium Tax Credits (APTC) and ConnectorCare, effective 1/1/27

- Due to changes in federal law, in 2027, certain noncitizens will no longer qualify for Advance Premium Tax Credits (APTC) or ConnectorCare.
- Starting January 1, 2027, if you are lawfully present, you will still qualify to purchase a health or dental plan. However, to be eligible for help paying for health coverage (like APTC or ConnectorCare), a noncitizen must qualify as one of the following:
  - Lawful permanent resident (LPR), also known as a green card holder
  - Cuban and Haitian Entrant (CHE)*
  - Compact of Free Association (COFA) migrant, including people from Micronesia, the Marshall Islands, and Palau living in the U.S. under a special agreement

Source: https://www.mahealthconnector.org/updates#toc_Federal_Changes_to_Noncitizen_Eligibility_for_Advance_Premium

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Understanding “Cuban-Haitian Entrants" and Others Impacted by These Changes

- *The term “Cuban-Haitian Entrant” (CHE) relates to a benefit eligibility category rather than an immigration status. Not every national from Cuba or Haiti is a CHE. People who meet the definition of a CHE may be eligible for certain public benefits, including help paying for coverage through the Health Connector.
- Some examples of statuses that will no longer qualify for help paying for coverage include:
  - Asylees (granted asylum)
  - Refugees
  - Temporary Protected Status (TPS)
  - People with valid non-immigrant status, including visitor visas (B visa), student visas (F visa), crime victim visas (U visa), specialty worker visas (H visa), religious worker visas (R visa), and other non-immigrant visas

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Source: https://www.mahealthconnector.org/updates#toc_Federal_Changes_to_Noncitizen_Eligibility_for_Advance_Premium

What is the MA Health Connector's Open Enrollment?

Open Enrollment is the annual period when individuals and families can enroll in a new plan through the Health Connector or change their current plan, for the upcoming year.

Runs from **October 23, 2026 – January 23, 2027**

After Open Enrollment, members cannot usually change their plan until the next open enrollment, unless they experience a **qualifying life event** that makes them eligible for a **special enrollment period (SEP)**.

Clients who are denied eligibility for a SEP may complete an Open Enrollment Waiver Application from the Office of Patient Protection. If approved, OE waivers provide a 30-day SEP from the date of approval.
Online Request Form: https://www.mass.gov/how-to/how-to-request-an-open-enrollment-waiver

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Important Health Connector Dates

- Open Enrollment Dates: October 23, 2026 – January 23, 2027
- Mid October/early November: The Health Connector mails final eligibility notices showing 2027 plan enrollment with any subsidies.
- October 23: 1st day to shop, compare, and switch plans for 2027
- December 23: Deadline to enroll in a plan for January 1.
- January 1, 2027: New plan year begins.
- January 23: Deadline to enroll in a plan for February 1.

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Health Connector Open Enrollment Payment deadlines

Enroll for coverage and pay premium between **Oct 23, 2026 – Dec 23, 2026**

→ Coverage begins **Jan 1, 2027**

Enroll for coverage and pay premium between **Dec 24, 2026 – Jan 23, 2026**

→ Coverage begins **Feb 1, 2027**

Note: A 2025 Health Connector rule allows members to enroll from the 24th to the end of the month and retroactively effectuate coverage to the month they enrolled if their premium for both months is paid by the 23rd.

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Health Connector & MassHealth Applications



MA Health Connector: Streamlined application for:

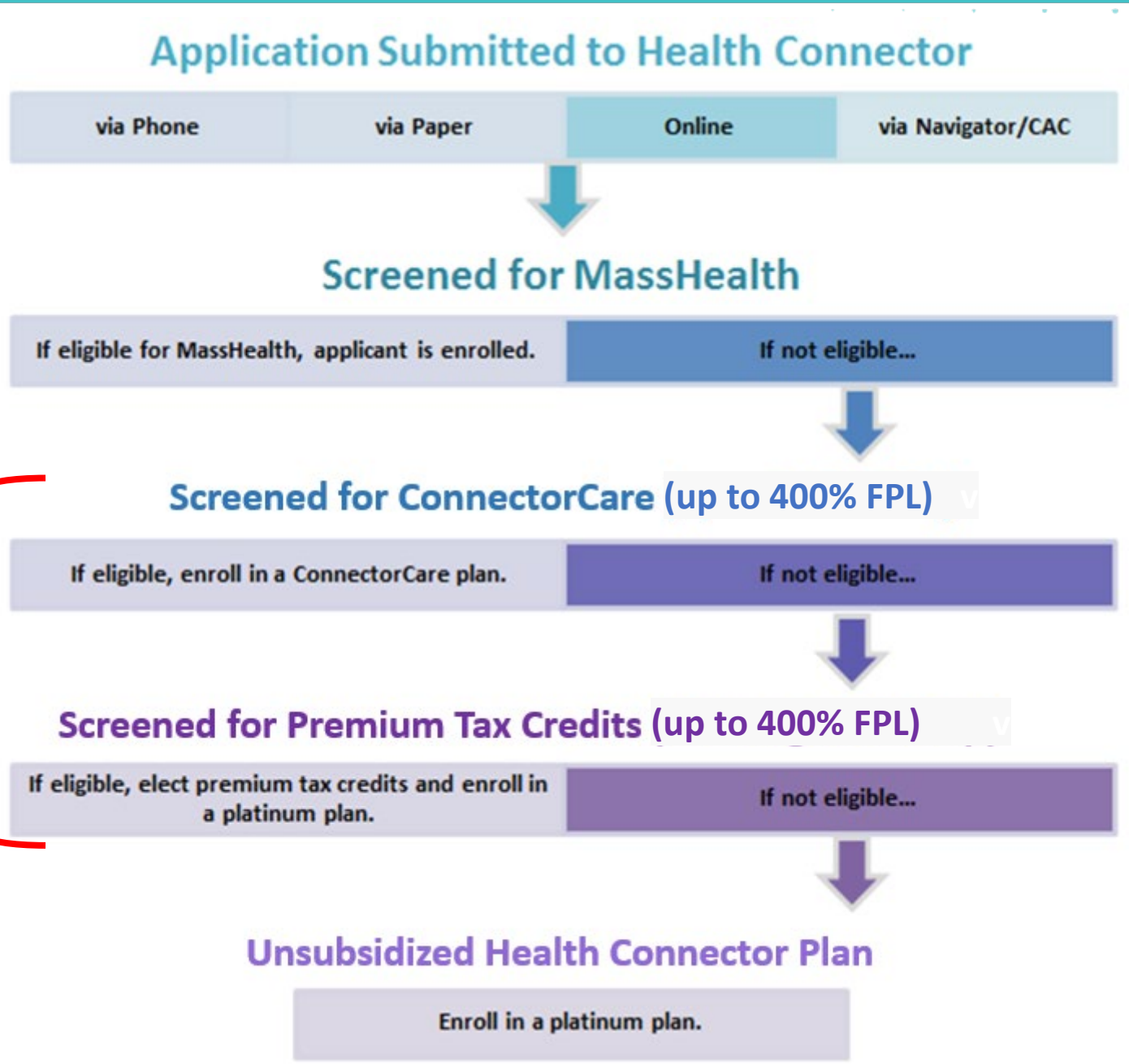
- MassHealth
- Health Safety Net (HSN)
- Eligibility for subsidies ("help paying for insurance costs")
  - Connector Care plans
  - Premium Tax Credits
- Unsubsidized Health Connector plans

Clients are required to apply for and accept all subsidies available to them.

- Must say "yes" when asked if they want help paying for insurance to apply for subsidies AND agree to file taxes.
- If eligible for MassHealth or ConnectorCare, must enroll in a MassHealth or ConnectorCare plan.
- If eligible for Advance Premium Tax Credits, must accept and receive them.

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Application Screening Process for Insurance Eligibility



The application will also screen people for MH Limited/HSN up to 300% of FPL for people whose immigration status makes them ineligible for other coverage.

Subsidies/ discounts

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Key Guidance for Clients – from the HC

Four steps to get ready

01 **Update your account.** Sign in to your account at MAhealthconnector.org. Update your information if any of these things have changed:

- Your income
- Your address
- Who lives in your home
- Any other important changes

02 **Send your documents.** The Health Connector may ask you for proof, such as proof of your income. Send any documents you owe. This helps confirm your information.

03 **Make sure your 2025 taxes are filed** if you have not done so already, so you don't miss out on any savings

04 **Read all messages from the Health Connector.** Open letters, emails, and texts we send you. These messages have important updates or information about your coverage.

Keep up with important federal policy updates at MAhealthconnector.org/updates

Online at
https://www.mahix.org/individual
easiest and fastest way to apply
Clients who have previously applied online can update their information by signing into their account

Call the Health Connector Customer Service:
1-877-623-6765
Say you want to update your income on your application

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Source: https://www.mahealthconnector.org/about/pressroom/social-media-toolkit/pre-open-enrollment-2027-toolkit

ConnectorCare Plans Available for 2027

ConnectorCare plans (include state subsidy & APTCs)

- $0 deductibles, $0 or low premiums and low out-of-pocket maximum
- $0 copay for PCP visit, lower out of pocket costs for medical care
- Insurance carrier options vary by member zip code
- The ConnectorCare plan type is determined by the household income
  - Covered services remain the same across plan type, but copays vary by plan type

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Sample Preliminary Eligibility Determination Notice

Update Health Connector application if:

- A clients 2027 "current income range" looks incorrect
- A client’s 2027 "expected program eligibility" has changed, especially if it has changed from "ConnectorCare" to "Health Connector Plan"
- If the "household members" listed are incorrect

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Responding to a Request for Information (RFI)

MassHealth or the Health Connector may require verification of eligibility to determine final eligibility. Commonly requested information includes proof of:

- *Massachusetts Residency*
- *Income*
- *Social Security Number*
- *Citizenship/Immigration status*

- Clients who are required to submit documents will receive written notice: Request for Information (RFI).
- Documents must be submitted before the deadline on the notice (usually 90 days)
- Failure to submit RFIs may result in a change in a members coverage including an automatic enrollment into an unsubsidized plans with a high deductibles or a loss of coverage!

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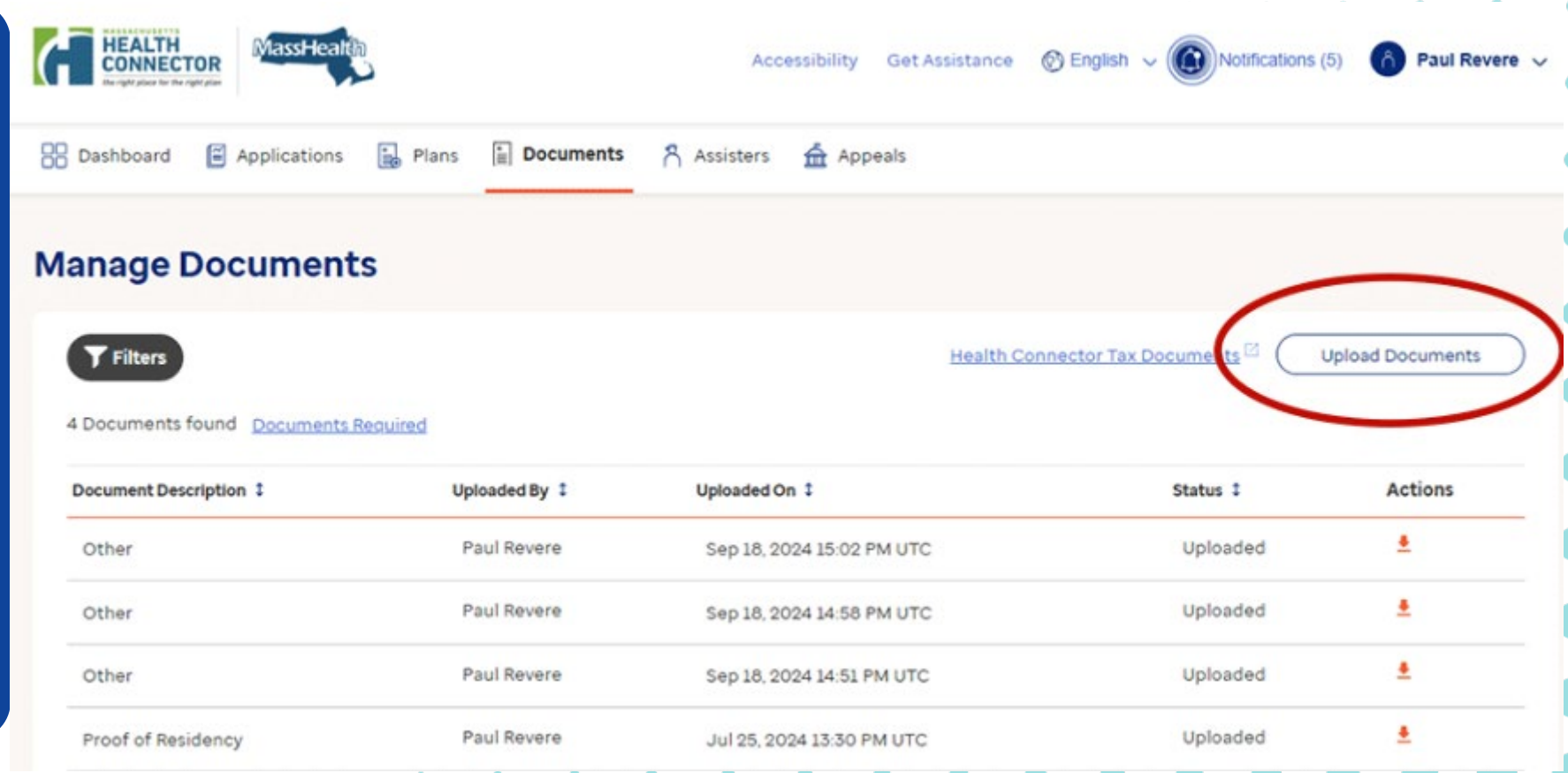
Uploading Documents to Health Connector

Documents can be submitted by:

1. **Uploading** to members online Health Connector Account (recommended)
2. **Faxing** to Health Insurance Processing 857.323.8300
3. **Mailing** to:

   Health Connector Processing Center
   PO Box 4404
   Taunton, MA 02780

These methods can also be used to submit documents requested by an RFI

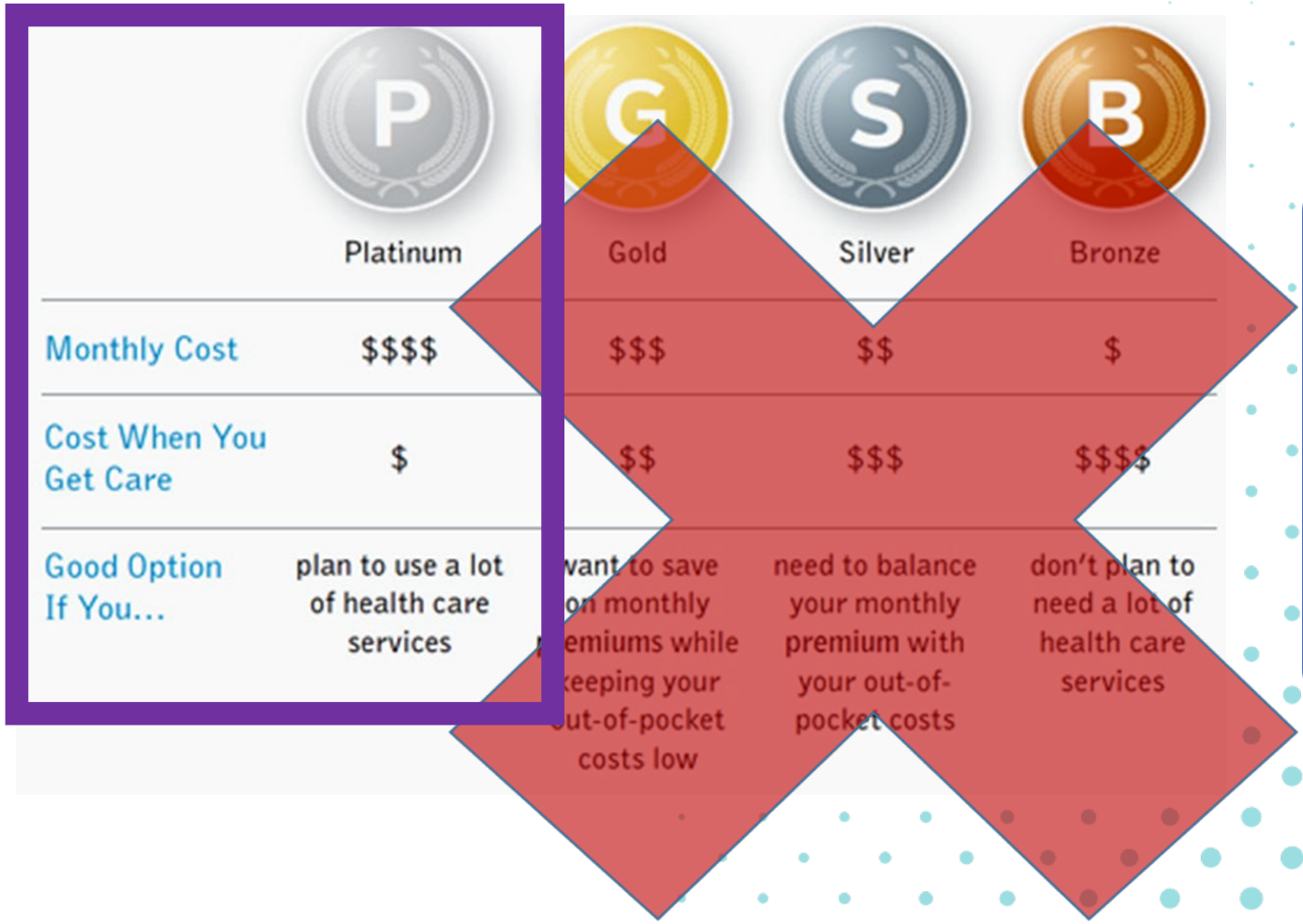


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Recommendations when client is not eligible for ConnectorCare level Health Connector Plans:

CHII Pays

You Pay



	Platinum	Gold	Silver	Bronze
Monthly Cost	$$$$	$$$	$$	$
Cost When You Get Care	$	$$	$$$	$$$$
Good Option If You...	plan to use a lot of health care services	want to save on monthly premiums while keeping your out-of-pocket costs low	need to balance your monthly premium with your out-of-pocket costs	don't plan to need a lot of health care services

If a client does not qualify for a ConnectorCare level plans, please enroll client into a $0 deductible **PLATINUM** plan!

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Selecting an Appropriate Plan

No Deductible	• Choose a plan with $0 deductible • **ConnectorCare** and **Platinum** Level Health Connector plans have $0 deductible
Accepted by Current Providers	• Check provider network on https://www.mahix.org/individual/ • **Call insurer to confirm your provider's participation or verify on insurer's website** • **Call your provider's office or billing dept to confirm which insurances they accept**
Covers All Prescriptions	• Check the insurer's drug formulary (list of covered drugs) to make sure it includes all your client's prescriptions • Call insurer to confirm your drugs are covered and ask if mail-order is required

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Open Enrollment Action Steps

If clients lose ConnectorCare eligibility in 2027, please take the following steps:

1. Update the Health Connector Insurance application:

- Make sure Proofs of Income are submitted

2. Enroll into a ConnectorCare or Platinum plan:

If eligible for ConnectorCare	→	Enroll in a ConnectorCare plan
If eligible for a Health Connector Plan	→	Enroll in a Platinum level plan

3. Send new plan premium to CHII at CHIIdocs@crihealth.org!

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CHII and the MA Health Connector



CHII Team (Comprehensive Health Insurance Initiative)

- Assists with paying the cost of health insurance premiums for eligible clients in our HIV Drug Assistance Program (HDAP).
- Helps clients enroll in and maintain insurance coverage or pay for their current insurance plan.
- **CHII can help:**
- Coordinate urgent payment requests to ensure timely effectuation of insurance plans
- Coordinate with the BRIDGE and Enrollment teams to integrate service delivery with HDAP
- Advise clients on plan options for ESI (employer-sponsored insurance) and non-group plans

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CHII premium assistance for Health Connector plans

In general, CHII can pay the premium for a Health Connector plan if:

- The client does not have access to comprehensive employer-sponsored insurance.
- The client is offered comprehensive employer-sponsored insurance, but the plan has a deductible of $500 or greater which the client would be responsible for OR the insurance doesn't cover ARVs.
- Client maintains active enrollment in HDAP and submits monthly premium bills to CHII.

Remember: HDAP/CHII must be "payor of last resort" so clients must:

- Say "yes" on their application to questions about "help paying for costs," say "yes" to agree to file a tax return (jointly if married), and say "yes" that they have filed a federal income tax return and reconciled any tax credits they have received in the past.
- Enroll in ConnectorCare level plans if eligible, and if not, enroll in a Platinum level QHP with a $0 deductible to minimize out-of-pocket costs.
- Accept MassHealth coverage if eligible (CHII can pay a MassHealth premium when applicable).

Sending Premium Bills to CHII

To keep your HDAP clients' CHII premium assistance active, CHII must have a current health insurance **premium statement** on file. Please submit the most recent bill or statement **each month** (include both sides of premium as the second page confirms who is enrolled in the coverage). Documents should include:

- The client's name or the plan subscriber's name
- Billing member ID or policy number
- Monthly premium amount and/or the current amount owed
- Premium remittance address
- Coverage period
- If any required information is missing, CHII may not be able to process the payment without additional documentation.

Email all premium bills monthly to:

chiidocs@crihealth.org

- This inbox is not monitored and should be used only to submit premium documents.
- Premium bills sent to CHII serve as payment requests. Failure to submit premium bills as a client receives them can put their coverage at risk of terming for non-payment of premium.
- CHII reviews premium bills, and payment requests, and adjusts the payments they are making if the bill reflects a change.

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CHII Monthly deadlines for 1st premium “Binder” Payment requests

CHII’s Deadline for receiving 1st premium Binder payment requests:	For coverage to begin on
11/9/26	12/1/26
12/10/26	1/1/27
1/8/27	2/1/27
2/9/27	3/1/27
3/10/27	4/1/27
4/9/27	5/1/27
5/10/27	6/1/27
6/9/27	7/1/27

Binder Payment = premium payment for the 1st month of coverage for a new insurance plan. If the "Binder Payment" is not received by the Health Connector by the 23rd of the month, the individual will receive a second initial bill reflecting two months of premium. If the two months’ payment is received by the Health Connector by the 23rd calendar day of the first coverage month, the client's coverage will be effectuated retroactively for the originally selected coverage effective date.

- Always mark binder payment requests as urgent.
- This includes new premiums for insurance carrier changes.
- New payment requests must be received and processed by CHII as noted on the table on the left to ensure payment is received and processed by the Health Connector by the 23rd of month.
- Contact CHII at chii@crihealth.org or call 617-502-1791 whenever you submit a “binder payment” request within a week of the CHII payment deadline to make sure CHII urgently reviews this request.

Please remember to submit your clients’ January 2027 plan information (including their December 2026 premium bill) to CHII on or before December 10, 2026!

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MassHealth Changes

Federal Changes Impacting Eligibility

- Effective 10/1/26, certain immigrants may lose their eligibility for MassHealth Standard because the federal government will stop paying for part of their care
- These immigrants include: Refugees, Asylees, Parolees & Certain victims of abuse & trafficking
- Some may be moved to MassHealth Family Assistance including adults age 65 or older and disabled adults age 21-64
- Adults age 21-64 who are not disabled will generally be moved to MassHealth Limited/Health Safety Net
- Children and pregnant and postpartum members will continue to get MassHealth Standard pending any change to their circumstances

Source: https://www.mass.gov/info-details/new-work-and-education-requirements-for-masshealth-members

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Work Requirements and Exemptions

- Effective 1/1/27, certain adults age 19-64 who are not disabled and not exempt will need to meet a work, volunteer or education requirement and renew their coverage every 6 months
- Exempt categories include:
  - Pregnant/Postpartum; Parent, Guardian or Caregiver for someone under age 14 or someone with a disability; adults enrolled in Medicare; adults with a serious mental health or medical condition (referred to as "medical frailty") or a substance use disorder that "significantly impairs" their ability to work, attend school or volunteer; adults who are in a treatment program for substance use disorder; blindness or disability based on Social Security rules; adults meeting a work requirement through TAFDC or SNAP
- Work Requirements include:
  - Work or volunteer or participate in a work program for 80 hours a month; be enrolled in an educational program at least half-time; any combination of the above totaling 80 hours a month; earnings of at least $580 a month

Source: https://www.mass.gov/info-details/new-work-and-education-requirements-for-masshealth-members

Special Considerations for Immigrants and Changes to Health Safety Net

HSN to HDAP Transition

The Massachusetts Department of Public Health (DPH) and MassHealth transitioned prescription medication assistance for people living with HIV from HSN to the HIV Drug Assistance Program (HDAP). **Beginning October 1, 2026, HDAP is covering prescription medications for HSN patients, but they must be enrolled in HDAP**.

NOTE: HSN will continue to pay eligible medical care costs. HSN Patients must continue to use HSN Pharmacies in order for their medication to be covered.

Please remind eligible patients of this change and support HDAP enrollment as soon as possible to help prevent interruptions in prescription coverage. The HDAP application is available online for case managers through the Provide Enterprise HDAP enrollment system, accessible through the Commonwealth's Virtual Gateway (VG). Please confirm whether patients are already enrolled in HDAP and begin gathering any required documentation so complete applications can be submitted before October 1, 2026.

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Health Safety Net & MassHealth Limited

- Health Safety Net (HSN) is an assistance program that pays for some health care services provided by acute care hospitals or community health centers for certain low income, uninsured, and underinsured Massachusetts residents and people whose immigration status makes them ineligible for more comprehensive coverage.
  - It is not insurance and cannot be used at tax time to show that someone was covered by health insurance
  - HSN covers routine care and medications when received at HSN sites and filled at HSN pharmacies, but effective 10/1/26 people living with HIV will need to enroll in HDAP to access their ARVs and other medications as well
  - A list of locations that accept HSN can be found here: https://www.mass.gov/service-details/information-for-patients
- MassHealth Limited provides emergency health services to people who have an immigration status that keeps them from getting more services. Covered services include:
  - Inpatient hospital emergency services, including labor and delivery
  - Outpatient hospital emergency services and emergency visits to emergency rooms
  - Pharmacy services for treating an emergency medical condition
  - Ambulance transportation for an emergency medical condition only

HSN Coverage Limitations



While HSN coverage is adequate for many clients, for some clients with multiple or complex medical conditions, HSN may not cover all of the medical services or specialists they need.



If HSN doesn't cover all of your client's healthcare needs, please consult with the BRIDGE team to explore other coverage options.



Unlike HSN, plans purchased directly from an insurance carrier will have MEDICAL CO-PAYS that clients will have to pay for out of pocket. Not reimbursable by HDAP/CHII.

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Medicare Changes and Annual Enrollment Periods

Federal Changes Impacting Medicare Eligibility

- Certain lawfully present immigrants will lose Medicare eligibility beginning February 2027
- Those who are not already enrolled in a MassHealth program should submit an application to be screened for eligibility ASAP

Who keeps eligibility?
U.S. Citizens
Legal permanent residents (“green card” holders)
Cuban Haitian Entrants
Compact of Free Association (COFA) immigrants

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Annual Medicare Enrollment Periods

Beneficiaries can enroll in a Medicare Supplement plan (aka Medigap) anytime throughout the year

Medicare Open Enrollment (October 15-December 7):
Beneficiaries with Medicare A and/or B can enroll in or change their Medicare Drug (Part D) plan. Those with A & B can enroll in or change their Medicare Advantage (Part C) or return to Original Medicare (Part A, B + Part D)

- *Coverage begins on January 1st, 2027*

Medicare Advantage Open Enrollment Period (January 1-March 31):
Beneficiaries **currently enrolled** in a Medicare Advantage plan can make a one-time change and enroll in a different Medicare Advantage plan or enroll in a Part D prescription drug plan and return to Original Medicare

- *Coverage begins on 1st of the month after your enrollment request*

Medicare General Enrollment Period (January 1-March 31):
Beneficiaries who did not enroll in Medicare Part B during their Initial Enrollment Period, or who missed a SEP (Special Enrollment Period) or lost their coverage for non-payment of premium can enroll in Part B.
This enrollment period can also be used for Voluntary Medicare Part A for those who do not qualify for "Premium Free Medicare Part A"
(Note: Those who are eligible for Premium Free Part A can enroll at any time of year, coverage may backdate 6 montths)

- *Coverage begins on 1st of the month after you submit your enrollment request*

General Tips for Medicare Open Enrollment Period
(October 15-December 7)

- Medicare beneficiaries may need or want to change their coverage, especially anyone who receive a notice that their plan or plan network is changing.
- Remind clients to check their mail for "annual change notices" about their 2027 Medicare Advantage or Part D and ask them to contact you if:
- They receive a notice that their Medicare Advantage or Part D is no longer available in 2027
- They receive a notice that their plan has automatically been changed. If so, does the new plan work for them?
- Their premium is changing? Beneficiaries who previously had MassHealth or a Medicare Savings Program may be losing "Extra Help" (a subsidy that may have made their plan "premium free") and may have a premium in 2027
- Help them confirm that their Medicare Advantage or Part D plan still covers their medications and works with their pharmacy of choice, healthcare providers and clinics
- Refer them to a BRIDGE Team SHINE counselor as needed to change their coverage or confirm benefits

Medicare Updates & Reminders

- Clients who are active CHII for one or more Medicare premiums should send their 2027 premium bills to CHIIdocs@crihealth.org
  - This includes both monthly and quarterly bills
- Annual premium "coupon booklets" (typically for Part D) should be sent to CHII one month at a time
- Screen clients who lose their Medicare rx coverage (Part D or a Medicare Advantage) plan for non-payment of premium for MassHealth Programs including Medicare Savings Programs to regain drug coverage or refer them to BRIDGE

Active HDAP clients should not enroll in a Medicare Prescription Payment Plan. But if they do, they can disenroll. Clients may contact BRIDGE Team for assistance.

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Who to Contact

HDAP 617-502-1700	BRIDGE BRIDGEteam@crihealth.org 617-502-1790	CHII CHII@crihealth.org 617-502-1791
• Questions about how to apply to HDAP/CHII • Questions about eligibility • To request urgent screening or 100% coverage • Problems at Pharmacy	• Questions about how to enroll in health insurance coverage • Assistance enrolling in and/or choosing a health insurance plan • Difficulties with the Health Connector or other insurance coverage • Questions regarding premium tax credits • Help with MassHealth or Health Connector applications • Medicare questions and enrollment	• Inquiries on insurance premium payments • Request for new or urgent insurance premium payments • Receiving health insurance premium refunds for clients who are or were active CHII • Receiving health insurance rebate checks for clients who are or were active CHII • Coordination of reimbursement for employer-sponsored insurance

Helpful links on our CRI website

- Main page: https://crihealth.org/
- BRIDGE Team: https://crihealth.org/insurance-support/bridge/
- Client Retention and Training: https://crihealth.org/insurance-support/bridge/outreach-and-training/
- HDAP: https://crihealth.org/drug-assistance/hdap
    - HDAP eligibility information, including income
- HDAP Provide Enterprise Training Resources
    - New HDAP Client Portal Setup Instructions
    - Provider Instructions for Accessing Provide Enterprise in the Virtual Gateway
    - Provide Enterprise Frequently Asked Questions:

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Open Enrollment and Other Resources

MA Health Connector Help Center:
http://www.mahealthconnector.org/help-center

MA Health Connector Login:
https://www.mahix.org/individual/

MassHealth Enrollment Centers:
https://www.mass.gov/service-details/masshealth-enrollment-centers-mecs

MassHealth Application (Under age 65)
https://www.mass.gov/doc/massachusetts-application-for-health-and-dental-coverage-and-help-paying-costs-0/download

SACA-2 Application (Age 65 and older)
https://www.mass.gov/doc/application-for-health-coverage-for-seniors-and-people-needing-long-term-care-services/download

MA Health Care Training Forum (MTF):
http://www.masshealthmtf.org/

IRS:
https://www.irs.gov/affordable-care-act/individuals-and-families/the-health-insurance-marketplace

HRSA ACE TA Center – Marketplace Coverage Tools and Resource:
https://taforhiv.org/ace/marketplace-coverage-tools-and-resources

Protecting Immigrant Families:
https://pifcoalition.org/

Massachusetts Law Reform Institute
https://www.mlri.org/

2026 Federal FPL Guidelines Chart
Poverty Guidelines | ASPE (hhs.gov)

Questions?

Contact Info

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Massachusetts HIV Drug Assistance Program (HDAP)
c/o Community Resource Initiative (CRI)
529 Main Street, Suite 301
Boston, MA 02129
https://www.crihealth.org
617.502.1700 (Phone)
617.502.1703 (HDAP fax)

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