

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied

Appeal Number: 2176714

Decision Date: 11/03/2021

Hearing Date: 10/25/2021

Hearing Officer: Susan Burgess-Cox

Appearance for Appellant:



Appearances for MassHealth:

Sherri Paiva & Gladys Pacheco



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Premium Assistance
Decision Date:	11/03/2021	Hearing Date:	10/25/2021
MassHealth's Reps.:	Sherri Paiva & Gladys Pacheco	Appellant's Rep.:	
Hearing Location:	All Parties Appeared by Telephone	Aid Pending:	No

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated August 4, 2021, MassHealth notified the appellant that they were stopping his premium assistance payments because he is eligible for Medicare. (130 CMR 506.012; Exhibit 1). The appellant's father filed an appeal on August 27, 2021. (130 CMR 610.015(B); Exhibit 2; Exhibit 4). On September 2, 2021, the Board of Hearings dismissed the appeal as it was not filed by the appellant or an individual providing written authorization or a legal document conveying the appointment of a representative. (Exhibit 3). On September 21, 2021, the appellant's father provided a copy of a decree and order of appointment of guardianship naming himself as the appellant's legal guardian. (Exhibit 4). The Board of Hearings vacated the dismissal and scheduled a hearing for October 25, 2021. (Exhibit 5).

A decision regarding the scope or amount of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified the appellant that he can no longer receive Premium Assistance because he is eligible for Medicare.

Issue

Whether MassHealth was correct in determining that the appellant's eligibility for Medicare makes him ineligible for Premium Assistance.

Summary of Evidence

The representative from the Taunton MassHealth Enrollment Center (Taunton MEC) testified that the appellant is a disabled adult who receives Supplemental Security Income (SSI). The appellant's MassHealth eligibility and benefits are administered through the Social Security Administration. Individuals who receive SSI are eligible for MassHealth Standard. The appellant has private insurance and was receiving premium assistance.

The representative from the Premium Assistance Unit (PAU) testified that the appellant's premium assistance payments ended as of August 4, 2021 because he became eligible for Medicare. The PAU representative noted that the regulations at 130 CMR 506.012(c) state that MassHealth members who have Medicare coverage are not eligible for premium assistance payments. The regulations have an exception to this restriction for MassHealth members who are a parent or caretaker of a child under 19 years of age. However, the appellant does not fall under this exception.

The appellant's father testified that the appellant needs premium assistance to cover health care costs. The appellant is enrolled in private insurance through his father. The appellant's father testified that premium assistance payments were used to cover services such as medications and other out-of-pocket costs. The appellant's father testified that he has an appeal pending regarding the appellant's enrollment in Medicare as he does not want the appellant to be enrolled in Medicare due to his enrollment in a private insurance plan and eligibility for MassHealth Premium Assistance.

The MassHealth eligibility representative noted that the appellant is still eligible for MassHealth Standard to cover costs that are not paid by private insurance or Medicare.

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. The appellant is a disabled adult who receives SSI.
2. The appellant is eligible for and receives MassHealth Standard.
3. The appellant has access to private insurance.
4. The appellant was eligible for premium assistance.
5. In August 2021, the appellant became eligible for Medicare.
6. As of the hearing date, the appellant has Medicare coverage.

Analysis and Conclusions of Law

MassHealth Standard serves children young adults, parents, caretaker relatives, pregnant women, disabled individuals and others who meet the income and categorical requirements. (130 CMR 505.002). The appellant is a disabled adult who receives Supplemental Security Income. Therefore, he is eligible for MassHealth Standard. (130 CMR 505.002).

MassHealth is the payer of last resort and pays for health care and related services only when no other source of payment is available, except as otherwise required by federal law. (130 CMR 503.007). Every applicant and member must obtain and maintain available health insurance in accordance with 130 CMR 505.000: Health Care Reform: MassHealth: Coverage Types. (130 CMR 503.007(A)). Failure to do so may result in loss or denial of eligibility unless the applicant or member is:

- (1) receiving MassHealth Standard or MassHealth CommonHealth;
and
- (2) younger than 21 years of age or pregnant. (130 CMR 503.007(A)).

Applicants and members must use potential health insurance benefits in accordance with 130 CMR 503.007: Potential Sources of Health Care, and must enroll in health insurance, including Medicare, if available at no greater cost to the applicant or member than he or she would pay without access to health

insurance, or if purchased by MassHealth in accordance with 130 CMR 505.002(O) or 506.012: Premium Assistance Payments. (130 CMR 505.002(M)). Members must access other health insurance benefits and must show their private health insurance card and their MassHealth card to providers at the time services are provided. (130 CMR 505.002(M)).

Eligibility for MassHealth premium assistance is determined by the individual's coverage type and the type of private health insurance the individual has or has access to. (130 CMR 506.012(C)). MassHealth has three categories of health insurance for which it may provide premium assistance:

- (1) Employer-Sponsored Insurance (ESI) Plans to which the employer contributes at least 50% towards the monthly premium;
- (2) Other Group Insurance Plans to which the employer contributes less than 50% towards the monthly premium amount; and
- (3) Non-group unsubsidized Health Connector individual plans for children only, provided that such plans shall no longer be eligible for premium assistance as of January 1, 2019. (130 CMR 506.012(C))

MassHealth members who have Medicare coverage are not eligible for premium assistance payments as described in 130 CMR 506.012(C). (130 CMR 506.012(C)(5)).

The appellant has Medicare coverage. Three separate sections of the MassHealth regulations clearly speak to the requirement that the appellant obtain and maintain Medicare coverage and that this coverage makes him no longer eligible for premium assistance payments. (130 CMR 503.007; 130 CMR 505.002(M); 130 CMR 506.012(C)(5)). While the appellant's father does not agree with the decision made by MassHealth and does not want the appellant enrolled in Medicare, a decision not to enroll in Medicare may result in a loss or denial of MassHealth eligibility as stated in the regulations at 130 CMR 503.007(A)). Additionally, MassHealth premium assistance payments are for health insurance coverage. (130 CMR 506.012(F)). The testimony and argument presented by the appellant's father regarding the need for these payments to cover out-of-pocket costs is not consistent with the regulatory requirements of applying these payments to health insurance coverage.

The decision made by MassHealth regarding the appellant's eligibility for premium assistance was correct.

This appeal is denied.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Susan Burgess-Cox
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

