Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Approved and

Dismissed

2305805

Appeal Number:

Decision Date: 10/4/2023 **Hearing Date:** 08/15/2023

Hearing Officer: Thomas Doyle Record Open to:

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Hector Rivera, Springfield MEC Karishma Raja, Premium Billing

Interpreter:



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: Approved and Issue: Eligibility; Over

Dismissed Income; Under 65;

Premium Billing

Decision Date: 10/4/2023 **Hearing Date:** 08/15/2023

MassHealth's Rep.: Hector Rivera Appellant's Rep.: Pro se

Karishma Raja

Hearing Location: Remote (phone) 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 June 13, 2023, MassHealth terminated the appellant's application for MassHealth because MassHealth determined that the income of appellant was too high. (Ex. 1).¹ The appellant filed this appeal in a timely manner on July 11, 2023. (Ex. 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth terminated appellant from benefits because his income was too high.²

¹ There was a second notice from MassHealth, dated July 30, 2023 and marked as Exhibit 2 but it is not the subject of this appeal.

² In testimony, the MassHealth representative also stated that appellant had turned "and the system would no longer provide benefit for him and he needed to fill out a Senior Application to continue with benefits."

Issue

The appeal issue is whether MassHealth was correct in terminating the benefits of appellant.

Summary of Evidence

The MassHealth representative testified that an application for appellant was first processed on July 27, 2020. He stated there was a note in the system that appellant had submitted an application for himself and his spouse. There was an attempt to call appellant, but someone spoke to his spouse instead. After some information that was missing was confirmed, the application for benefits was initiated. A redetermination was done on March 4, 2023. Appellant was then provided with Common Health, with a monthly premium of \$330.00 a month. Verifications were requested for appellant and his spouse. No verifications were received by MassHealth. Appellant's benefits were protected during the public health emergency (PHE) due to Covid. When the PHE ended, a review of appellant's income through matching with state and federal data showed his income was too high, therefore his benefits were terminated.

The representative for Premium Billing testified that during the Covid protection period, appellant did not get a bill for his monthly premium payment. When Covid protections ended on May 31, 2023, appellant was sent a bill for his June 2023 premium.

Appellant testified he never applied for, or asked for, MassHealth. He stated when he got the June 13, 2023 notice from MassHealth stating he did not qualify for MassHealth because his income was too high, he thought "that was fine" because he did not want MassHealth benefits anyway and he believed that would be the "end of any issues" he had with MassHealth. He stated he did not know why he was getting "all the mail from MassHealth". He testified he has insurance through the Federal government and secondary insurance through private insurance that he pays for himself. He confirmed he had never paid a monthly premium. He appealed the June 13, 2023 notice because he was told by MassHealth he would still have to pay the premium that was due for June 2023 even though his benefits had been terminated.

Findings of Fact

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

- 1. In July 2020, an application for MassHealth was begun for appellant. (Testimony).
- 2. A redetermination was completed on appellant's application on March 4, 2023. Through data matching, he was found to qualify for MassHealth CommonHealth with a premium of \$330.00 a month. (Testimony).

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- 3. Because of protections afforded by the public health emergency, appellant received no bills for the monthly premium until June 2023. (Testimony; Eligibility Operations Memo 23-13).
- 4. On April 1, 2023, protections due to the public health emergency against termination of benefits ended. (Testimony; Eligibility Operations Memo 23-13).
- 5. Appellant had MassHealth Common Health from February 2, 2023 until June 27, 2023. (Testimony).
- 6. MassHealth attempted to confirm the income of appellant and when no information was forthcoming, after obtaining matching data showing appellant's income was too high, MassHealth terminated appellant's benefits for Common Health, effective June 27, 2023. (Testimony; Ex. 1).
- 7. Appellant turned in March 2023. (Testimony; Ex. 6).
- 8. Because appellant was no longer under 65, he would have to reapply for MassHealth with an over 65 application. (Testimony).
- 9. Appellant never reapplied for MassHealth by filling out an over 65 application. (Testimony).
- 9. When appellant received his termination notice dated June 13, 2023, he believed his interactions with MassHealth were over. When he called MassHealth to inquire about having to pay the \$330.00 June 2023 bill, he was told he still owed that money. (Testimony).
- 9. Appellant appealed the June 13 2023 termination notice due to the obligation to pay the June 2023 premium. (Testimony).
- 10. Appellant was billed \$330.00 for the June 2023 premium. (Ex. 5).
- 11. Appellant does not have any benefits provided through MassHealth but is covered by Medicare and a secondary private health insurance that appellant pays for himself. (Testimony).

Analysis and Conclusions of Law

Appellant was adamant in his testimony that he never applied for MassHealth. He did not understand why he was receiving all the correspondence from MassHealth. He stated he has Medicare and secondary insurance coverage that he pays for himself. He testified that when he got the termination notice dated June 13, 2023, he thought that was the end of any issues he had with

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MassHealth. Then he received the bill for \$330.00 for the month of June and that prompted him to call MassHealth. He was told even though his MassHealth benefits were terminated, he still owed the \$330.00. He stated that is why he appealed the termination notice. Appellant accepts the termination because he never wanted MassHealth. He has not filled out an over 65 application and will not be filing one out at any time in the future. He just wants his interactions with MassHealth to end. The MassHealth representative testified appellant's benefits have been terminated. The Premium Billing representative stated that, because appellant was covered by insurance after the public health protections ended, he still owed the June payment of \$330.00. MassHealth never spoke to appellant before this hearing.³ System matches with data from the Federal and State governments appear to be the way MassHealth confirmed appellant was eligible for benefits and then, subsequently, over income for those same benefits. Unsurprisingly, when MassHealth did not hear back from appellant to verify his income, they terminated his coverage. Again, this was fine with appellant as he never wanted MassHealth. Appellant and MassHealth have ended their interaction. The only issue left is the June bill for \$330.00. It does not seem fair to have appellant pay a bill for a service he never wanted or used.

I find the testimony of appellant credible that he never wanted or used the MassHealth benefits. This appeal is approved and dismissed as appellant no longer has MassHealth benefits. Premium Billing is ordered to waive the June payment of \$330.00.

Order for MassHealth

Waive the June 2023 bill for \$330.00.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should

³ It appears there was some contact with the wife of appellant at the very beginning of the process. (Testimony).

contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Thomas Doyle Hearing Officer Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186

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