

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



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|-------------------------|--------------------|-----------------------|------------|
| Appeal Decision: | DENIED | Appeal Number: | 2306535 |
| Decision Date: | 10/25/2023 | Hearing Date: | 09/08/2023 |
| Hearing Officer: | Kenneth Brodzinski | | |

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Michael Bates



*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

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|---------------------------|---------------|--------------------------|------------------------------------|
| Appeal Decision: | DENIED | Issue: | Cancellation of Premium Assistance |
| Decision Date: | 10/25/2023 | Hearing Date: | 09/08/2023 |
| MassHealth's Rep.: | Michael Bates | Appellant's Rep.: | Pro se |
| Hearing Location: | Quincy | | |

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 3, 2023, MassHealth informed Appellant that her Premium Assistance coverage had stopped (Exhibit A). Appellant filed this appeal in a timely manner on August 3, 2023 asserting she was never notified that she would have to pay a premium (see 130 CMR 610.015(B) and Exhibit A). Adverse coverage determinations constitute valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

Through Premium Assistance, MassHealth assessed a monthly premium and subsequently stopped Appellant's Premium Assistance benefits.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) when, through Premium Assistance, MassHealth assessed a monthly premium and subsequently stopped Appellant's Premium Assistance benefits.

Summary of Evidence

Both parties appeared by telephone.

The MassHealth representative testified that the subject notice of August 3, 2023 notifying Appellant that her Premium Assistance coverage has stopped resulted from Appellant's call to MassHealth that same day asking that her coverage be terminated. According to system notes, Appellant stated that she was not aware that she would have to pay a monthly premium and that she could not afford the premium. The MassHealth representative further testified that the Premium Assistance award letter was sent to Appellant's verified address on May 2, 2023. That letter notified Appellant that MassHealth would assist in reducing her healthcare premium, but she would still have to pay a specific portion.

Appellant testified that she was receiving premium assistance and then got an unexpected bill in July 2023. Appellant testified that she did not know she would be billed for a portion of the premium, so she called to cancel the coverage. Appellant testified that she now owes about \$200 which cannot afford to pay. Appellant acknowledged that MassHealth did have her correct address, however, she testified that her mail carriers have been inconsistent and there have been problems with her mail delivery. She stated that her roommate also did not receive several credit card bills. Appellant testified that she never received the May 2, 2023 Premium Assistance award letter and believes that it is not fair to owe charges that she was not notified of.

Findings of Fact

By a preponderance of the evidence, this record supports the following findings:

1. MassHealth sent a Premium Assistance award letter to Appellant's verified address on May 2, 2023.
2. The Premium Assistance award letter notified Appellant that MassHealth would assist in reducing her healthcare premium, but she would still have to pay a specific portion.
3. Appellant received a premium bill from MassHealth in July 2023.
4. Appellant called MassHealth on August 3, 2023 asking that her coverage be terminated.
5. During her call, Appellant stated that she was not aware that she would have to pay a monthly premium and that she could not afford the premium.
6. MassHealth issued notice dated August 3, 2023 informing Appellant that her Premium Assistance coverage had stopped (Exhibit A).

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)).

The appealed action is the assessment of a monthly health care premium. MassHealth sent the Premium Assistance award letter to Appellant's correct address with information about a reduced monthly premium and the need for Appellant to pay a portion herself. While Appellant claims she never received the notice and would not have elected to proceed with the benefit had she known that she would have to pay a portion of the premium, she nonetheless received the benefit of a reduced premium and health coverage up until she called to cancel coverage on August 3, 2023. Having received the benefit, she owes her portion of the premium for that period.

This record provides no basis to conclude that MassHealth made an error of fact or law. If any error did occur, it was on Appellant's end with her mail delivery which she knew to be problematic and which MassHealth cannot be held responsible.

For the foregoing reasons, the 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171