

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2308933
Decision Date:	1/9/2024	Hearing Date:	10/26/2023
Hearing Officer:	Thomas Doyle	Record Open to:	11/16/23

Appearance for Appellant:



Appearance for MassHealth:

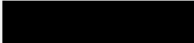
Georges Jorcelin, Charlestown MEC
Katie Mullen, Premium Assistance

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:	Denied	Issue:	Premium Assistance; Under 65
Decision Date:	1/9/2024	Hearing Date:	10/26/2023
MassHealth's Rep.:	Georges Jorcelin Katie Mullen	Appellant's Rep.:	
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 August 9, 2023, MassHealth stopped premium assistance payments. (Ex. 1). The appellant filed this appeal in a timely manner on September 23, 2023. (Ex. 2). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth stopped appellant's premium assistance payments.

Issue

The appeal issue is whether MassHealth was correct to stop appellant's premium assistance payments.

Summary of Evidence

The appeal representative (appeal rep), who is appellant's husband, the MassHealth worker (worker) and a representative from Premium Assistance (PA rep) all appeared by phone and were sworn. The sole issue on appeal is the ending of premium assistance payments due to the appellant's son¹ now being enrolled in Medicare. For background, the worker testified that appellant's son has MassHealth Standard through a MassHealth system called Paces. He stated it is an old system used by MassHealth but the benefits provided under Paces will not stay active for long, although he did not have a timeline for the end of the coverage afforded by Paces. The worker testified first that the last proof of income from appellant was received by MassHealth on January 10, 2019. The last renewal for coverage was on October 15, 2019. The worker stated after the pandemic hit, protections were in place and no members coverage was downgraded or changed. The worker testified that if appellant wanted to move forward with MassHealth coverage, she needed to do a renewal and provide proof of income for herself and her husband. Once those actions have been taken, that will allow Premium Assistance to make a determination. (Testimony).

The PA rep testified to the following. Premium assistance began in August 2002 with a present monthly payment of just under six hundred dollars. She stated that premium assistance received a system notice in June 2023 that the eligible member, the son of appellant, was now enrolled in Medicare, with Medicare coverage beginning in September 2023. Premium assistance received this notice through the Massachusetts Medicaid Information System. She stated this system is "where Medicare and MassHealth eligibility lies." The PA rep testified since the member was now enrolled in Medicare, a termination notice was sent to appellant on August 9, 2023, that notice being the subject of this appeal. (Ex. 1). The PA rep testified that MassHealth regulations prohibit someone on Medicare from receiving premium assistance and cited 130 CMR 506.012 (C)(5). She offered the appeal rep a chance to speak to a representative of Medicare. She would pass on to that representative the phone number of the appeal rep so they could speak about the appeal rep's desire to decline Medicare. (Testimony). The record was left open for this communication between the appeal rep and the Medicare representative to confer. The PA rep notified this hearing officer that conversation took place between the appeal rep and the Medicare representative. (Ex. 6).

The appeal rep testified he wanted to maintain their private insurance with premium assistance from MassHealth. He stated it was his understanding his son was automatically enrolled in Medicare when he either turned 23 or his SSI was changed to SSDI or a combination of both. He stated he believed turning 23 is a determining age. He testified they received a letter on September 1, 2023 from Medicare to choose a new doctor. (Testimony).

Findings of Fact

¹ [REDACTED]

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

1. Appellant has private insurance and received premium assistance from MassHealth. (Testimony; Ex. 1).
2. Appellant has been receiving premium assistance since August 2002. (Testimony).
3. Appellant's son is enrolled in Medicare. (Testimony).
4. MassHealth terminated appellant's premium assistance in August 2023. (Testimony; Ex. 1).

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007). Moreover, "[p]roof by a preponderance of the evidence is the standard generally applicable to administrative proceedings." Craven v. State Ethics Comm'n, 390 Mass. 191, 200 (1983).

506.012: Premium Assistance Payments

...

(C) Eligibility. 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.

(5) The following MassHealth members are not eligible for premium assistance payments as described in 130 CMR 506.012(C) from MassHealth:

(a) MassHealth members who have Medicare coverage.

The issue is whether appellant maintains eligibility to receive premium assistance payments because she has private health insurance. The appeal rep does not deny his son is enrolled in Medicare. The regulation cited above is clear. MassHealth members who have Medicare coverage are not eligible for premium assistance. Adhering to the regulation, Premium Assistance was correct in terminating premium assistance payments. 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.

Thomas Doyle
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129

Kate Mullen, Premium Assistance

Appeal Representative:

