

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part	Appeal Number:	2312508
Decision Date:	01/23/2024	Hearing Date:	01/05/2024
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via videoconference:



Appearance for MassHealth:


Via videoconference:

Kaila Keddle, Tewksbury MEC



*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 in part; Denied in part	Issue:	Eligibility; Under 65
Decision Date:	01/23/2024	Hearing Date:	01/05/2024
MassHealth's Rep.:	Kaila Keddie	Appellant's Rep.:	
Hearing Location:	Tewksbury MassHealth Enrollment Center Remote	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 November 15, 2023, MassHealth approved the appellant for MassHealth CommonHealth with a start date of November 5, 2023 (Exhibit 1). The appellant filed this appeal in a timely manner on December 1, 2023 (see 130 CMR 610.015(B) and Exhibit 2). A determination regarding scope of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved the appellant for MassHealth CommonHealth with a start date of November 5, 2023.

Issue

The appeal issue is whether MassHealth was correct in approving the appellant for MassHealth CommonHealth benefits with a start date of November 15, 2023.

Summary of Evidence

The appellant, her case worker (an employment specialist), and MassHealth appeared at hearing via videoconference. The MassHealth representative testified as follows: the appellant, who is under the age of 65 and deemed disabled, appealed a November 15, 2023 notice informing her that she was approved for MassHealth CommonHealth with a start date of November 5, 2023. As background, the MassHealth representative explained that previously, the appellant was approved for CommonHealth on April 6, 2023. Then MassHealth issued a termination notice on September 28, 2023 informing the appellant that her coverage would terminate on October 12, 2023 because of past due premiums. Her coverage terminated on October 12, 2023, and there is a gap in coverage until November 5, 2023, when her coverage was reinstated. The MassHealth representative did not have access to any Premium Billing information, but she presumed the billing issue was corrected, allowing MassHealth to reinstate her CommonHealth coverage.

The appellant explained that she did not have any issue with her current CommonHealth approval and \$46.80 monthly premium, but was more concerned with the past due premiums and had intended to appeal that issue. She was surprised when her coverage was terminated because of past due premiums. She did not receive any bills regarding those monthly premiums and did not know they were due. Her mother passed away recently, and she has been dealing with a lot, including having to pay for her mother's funeral expenses. She has since set up a three-month payment plan and has to pay \$108.80 per month which includes her \$46.80 current monthly premium, plus \$62 for the payment plan for the past due premiums she was unaware of. She made her first payment in December, but it is expensive for her. The appellant's case worker stated that the appellant is organized and saves everything, so if Premium Billing had sent bills, she would have seen them and would still have them in her possession, but she does not. She did not know she had a gap in coverage until hearing and was unsure if she had any bills other than prescriptions during that gap.

With the permission of both parties, this Hearing Officer reached out to the Premium Billing representative after hearing to get more information on the Premium Billing issue. Premium Billing stated that, like most members, the appellant was not billed during the Public Health Emergency. Normal billing practices resumed in June, 2023, and the appellant's monthly premium invoice was mailed to the P.O. Box on file on the following dates: June 20, 2023, July 19, 2023, August 17, 2023, September 19, 2023, October 19, 2023, November 17, 2023, and December 19, 2023. Premium Billing did not have any justification to adjust or waive the past due premiums. She stated that the appellant applied for a hardship waiver but did not provide any supporting

documentation as required to show extreme hardship. She added that Premium Billing could reverse the three-month payment plan and place the appellant on a longer term payment plan to lower the monthly payment plan, while the appellant reapplies for the hardship waiver with documentation of the extreme financial hardship as detailed on the application. Premium Billing's response was emailed to the appellant's representative as requested, but she did not respond.

Findings of Fact

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

1. The appellant is under the age of 65, and has been deemed disabled (Testimony and Exhibit 4).
2. On November 15, 2023, MassHealth approved the appellant for MassHealth CommonHealth with a start date of November 5, 2023 (Testimony and Exhibit 1).
3. On September 28, 2023, MassHealth issued a notice informing the appellant that her MassHealth CommonHealth benefits would terminate on October 12, 2023 due to past due premiums (Testimony and Exhibit 5).
4. MassHealth terminated the appellant's MassHealth CommonHealth benefits on October 12, 2023 (Testimony and Exhibit 5).
5. There is a gap in coverage from October 12, 2023 to November 5, 2023 (Testimony).
6. On December 1, 2023, the appellant appealed the November 15, 2023 approval notice, but it was apparent at hearing that she intended to appeal the September 28, 2023 termination notice (Testimony and Exhibit 5).
7. The appellant does not dispute her current MassHealth CommonHealth benefits and monthly premium of \$46.80 (Testimony).
8. The appellant has set up a three-month payment plan to pay her past due premiums, but it is expensive for her (\$46.80 for her current premium, plus \$62 for her payment plan for a total of \$108.80 per month) (Testimony and Exhibit 6).

Analysis and Conclusions of Law

While the appellant appealed the November 15, 2023 notice approving her from MassHealth CommonHealth with a start date of November 5, 2023, the issue here is the past due premiums and gap in coverage that ensued as a result. To address the premiums and gap in coverage, it is necessary to establish jurisdiction over MassHealth's September 28, 2023 termination notice. Under 130 CMR 610.015(B)(1), the Board of Hearings must receive a request for a fair hearing within 60 days after an applicant or member receives written notice from MassHealth of the intended action. It is presumed that the notice was received on the fifth day after mailing. See 130 CMR 610.015(B)(1). The appellant filed her appeal on December 1, 2023, which is 65 days from the September 28 notice. Accounting for five days for mailing, the request for appeal was received within 60 days after she received the September 28 notice. Under these circumstances, I find her appeal timely as to the September 28, 2023 termination notice.

According to Premium Billing, monthly invoices were issued on the following dates: June 20, 2023, July 19, 2023, August 17, 2023, September 19, 2023, October 19, 2023, November 17, 2023, and December 19, 2023; however, the appellant and her representative credibly testified that she never received those bills. As a result of the missed premium payments, the appellant was unknowingly left with a gap in coverage from October 12, 2023 to November 5, 2023. She has since worked out a payment plan with Premium Billing, prompting MassHealth to reinstate her CommonHealth benefits beginning November 5, 2023. According to the Fair Hearing rules at 130 CMR 610.071(A)(2), "[t]he effective date of any adjustments to the appellant's eligibility status will be the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted." As the appellant was eligible for MassHealth CommonHealth benefits at all relevant times, her benefits will be reinstated retroactive to the date of termination, October 12, 2023; however, she is still responsible for the monthly premium and associated past due premiums.¹

For these reasons, the appeal is approved in part and denied in part.

Order for MassHealth

Reinstate the appellant's MassHealth CommonHealth benefits effective October 12, 2023.²

¹ As suggested by Premium Billing, if the appellant is having difficulty with her payment plan, she can contact Premium Billing at 617-798-6827 to discuss on a longer term payment plan to lower the monthly payment amount. She can also follow through with the hardship waiver, making sure to include the necessary supporting documentation.

² If the appellant has any bills from the October 12, 2023 to November 5, 2023 gap in coverage, she can contact her provider(s) and request the provider(s) resubmit those bills to MassHealth for payment.

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 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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957