

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2313454 and 2313470
Decision Date:	03/14/2024	Hearing Date:	01/25/2024
Hearing Officer:	Mariah Burns		

Appearance for Appellant:



Appearance for MassHealth:

Sahen Duran, Quincy MassHealth Enrollment
Center



*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	Issue:	Under 65; Eligibility; Income
Decision Date:	03/14/2024	Hearing Date:	01/25/2024
MassHealth's Rep.:	Sahen Duran	Appellant's Rep.:	
Hearing Location:	Quincy Harbor South	Aid Pending:	Yes

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 December 20, 2023, MassHealth terminated the appellants' MassHealth benefits because MassHealth determined that the appellants had access to other health insurance in which they did not enroll. *See* 130 CMR 505.002(M) and (N) and Exhibit 1. The appellant filed this appeal in a timely manner on December 21, 2023. *See* 130 CMR 610.015(B) and Exhibit 2. Termination of benefits is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth terminated the appellants' MassHealth benefits.

Issue

The appeal issue is whether MassHealth correctly determined that the appellants are no longer eligible for MassHealth benefits because they were not enrolled in employer-sponsored health insurance.

Summary of Evidence

The appellants are children under the age of 19 and were represented at hearing by their mother. The family resides in a household of 5. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. All parties appeared in person. The following is a summary of the evidence and testimony provided at hearing.

The MassHealth representative reported that the notice at issue generated after the appellants' mother submitted renewal applications for their MassHealth Family Assistance benefits. While the applications were being processed, MassHealth determined that the appellants had access to employer-sponsored health insurance in which they had not enrolled, leading to termination notices being issued on December 20, 2023. The appellants filed requests for fair hearing with respect to those notices, and hearings were scheduled for January 25, 2024. The MassHealth representative reported that, the day prior to the hearing, the appellants submitted the necessary information to show that they enrolled in employer-sponsored health insurance.

The appellants' representative confirmed that she has enrolled in her employer-sponsored health insurance and that her children are covered under that plan. A discussion was had regarding the appellant's household income and her ongoing financial eligibility for MassHealth benefits.

Findings of Fact

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

1. The appellants are three children under the age of 19 who reside in a household of 5 with their two parents. Testimony, Exhibit 4.
2. On December 20, 2023, MassHealth generated termination notices for the appellants' MassHealth Family Assistance benefits after determining that the appellants had access to employer-sponsored health insurance in which they had not enrolled. Testimony, Exhibit 1.
3. The appellants submitted timely requests for fair hearing on December 21, 2023, and Aid Pending was applied. Exhibit 2.
4. Prior to the hearing, the appellants provided evidence that they enrolled in their employer-sponsored health insurance. Testimony.

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 505.000 *et seq.* explain the categorical requirements and

financial standards that must be met to qualify for a particular MassHealth coverage type. The rules of financial responsibility and calculation of financial eligibility are detailed in 130 CMR 506.000: *Health Care Reform: MassHealth: Financial Requirements*. The MassHealth coverage types are:

- (1) *Standard* - for pregnant women, children, parents and caretaker relatives, young adults, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) *CommonHealth* - for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) *CarePlus* - for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) *Family Assistance* - for children, young adults, certain noncitizens, and persons who are HIV positive who are not eligible for MassHealth Standard, CommonHealth, or CarePlus;
- (5) *Small Business Employee Premium Assistance* - for adults or young adults who
 - (a) work for small employers;
 - (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus;
 - (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and
 - (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage;
- (6) *Limited* - for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs, and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (7) *Senior Buy-In and Buy-In* - for certain Medicare beneficiaries.

130 CMR 505.001(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... if available and no greater cost to the applicant or member than they would pay without access to health insurance.” 130 CMR 505.002(M).

In this case, the notice at issue terminated the appellants’ MassHealth benefits for failure to enroll in other available health insurance. As the appellants’ representative demonstrated at hearing, and MassHealth agreed, that the appellants are now enrolled in their mother’s employer-sponsored health insurance, they have met their burden of proof, and the appeal is APPROVED.

The MassHealth worker reported that the appellants were deemed to be over income to

prospectively qualify for benefits, but no notice had yet been provided to the appellants as of the time of hearing. As such, this hearing officer has no authority to take jurisdiction over the income issue. MassHealth must provide notice of its determination of the appellants' income, and the appellants are advised to submit a request for fair hearing related to that notice should they wish to challenge MassHealth's determination.

Order for MassHealth

Reinstate appellants' MassHealth Family Assistance benefits based on the appellants' enrollment in their employer-sponsored health insurance. Remove Aid Pending.

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.

Mariah Burns
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator