

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2313682
Decision Date:	03/29/2024	Hearing Date:	01/22/2024
Hearing Officer:	Mariah Burns	Record Open to:	02/26/2024

Appearance for Appellant:



Appearance for MassHealth:

Karishma Raja, Maximus Premium Billing; Lisa
Duffney, Springfield 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:	Premium Billing; Hardship Waiver
Decision Date:	03/29/2024	Hearing Date:	01/22/2024
MassHealth's Rep.:	Karishma Raja; Lisa Duffney	Appellant's Rep.:	
Hearing Location:	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 3, 2023, MassHealth denied the appellant's application for a hardship waiver of his MassHealth premium. *See* 130 CMR 506.011(G) and Exhibit 1. The appellant filed this appeal in a timely manner on December 26, 2023. *See* 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied the appellant's application for a hardship waiver of his MassHealth premium.

Issue

The appeal issue is whether MassHealth correctly determined that the appellant did not meet the rules of extreme financial hardship to qualify for a hardship waiver of his premium.

Summary of Evidence

The appellant is an adult under the age of 65 who is eligible for MassHealth CommonHealth

benefits. MassHealth was represented at hearing by a worker from the Premium Billing department and a worker from the Springfield MassHealth Enrollment Center. The following is a summary of the testimony and evidence provided at hearing.

On November 3, 2023, MassHealth received an application for a hardship waiver of premium submitted on the appellant's behalf. It was denied that day on the grounds that the documentation submitted by the appellant in support of his application did not show a change in his mortgage payment. Because his application only indicated extreme financial hardship due to being more than 30 days late on rent or mortgage payments, MassHealth denied the application. MassHealth further reported that the appellant was in arrears on his premium payments, and as a result, his MassHealth CommonHealth benefits were terminated.

The appellant reported that every year, his application for a hardship waiver is denied, he files an appeal, and his application is then approved. He reported extreme financial distress, explaining that he currently has \$1.00 in his pocket, which, for him, is a good month. He explained that his expenses, by and large, have increased this year. The taxes on his mortgage increased, as did the cost of insurance, running water in his house, food, and drinking water. He stated that he does not have any excess money to spend on a MassHealth premium.

Findings of Fact

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

1. The appellant is an adult under the age of 65 who is eligible for MassHealth CommonHealth benefits. Testimony, Exhibit 4.
2. On November 3, 2023, the appellant applied for a Hardship Waiver of his MassHealth premium. Testimony, Exhibit 1.
3. That same day, MassHealth denied the application, finding that he does not meet the rules of extreme financial hardship. Testimony, Exhibit 1.
4. During the fall of 2023, MassHealth determined that the appellant was in arrears on his premium payments for several months and, as a result, terminated his MassHealth CommonHealth benefits. Testimony.
5. The appellant's monthly expenses have increased this year, specifically his mortgage, running water, groceries, and drinking water, and he has no excess money at the end of each month. Testimony.

Analysis and Conclusions of Law

Certain MassHealth members are charged a monthly premium, depending on their household income level. See 130 CMR 506.011. Specifically, MassHealth Standard, CommonHealth, or Family Assistance members who have income above 150% of the federal poverty level (FPL) are required to pay a monthly premium calculated in accordance with the relevant formula found at 130 CMR 506.011(B). Failure to pay this premium can result in a termination of benefits and a referral to the State Intercept Program for collection of any delinquent payments. 130 CMR 506.011(D).

If a member is financially unable to pay their monthly premium, they may apply for a hardship waiver in accordance with 130 CMR 506.011(G). Such an individual can establish undue financial hardship by demonstrating that the member:

- (a) is homeless, or is more than 30 days in arrears in rent or mortgage payments, or has received a current eviction or foreclosure notice;
- (b) has a current shut-off notice, or has been shut off, or has a current refusal to deliver essential utilities (gas, electric, oil, water, or telephone);
- (c) has medical and/or dental expenses, totaling more than 7.5% of the family group's gross annual income, that are not subject to payment by the Health Safety Net, and have not been paid by a third-party insurance, including MassHealth (in this case "medical and dental expenses" means any outstanding medical or dental services debt that is currently owed by the family group or any medical or dental expenses paid by the family group within the 12 months prior to the date of application for a waiver, regardless of the date of service);
- (d) has experienced a significant, unavoidable increase in essential expenses within the last six months;
- (e) 1. is a MassHealth CommonHealth member who has accessed available third-party insurance or has no third-party insurance; and
2. the total monthly premium charged for MassHealth CommonHealth will cause extreme financial hardship the family, such that the paying of premiums could cause the family difficulty in paying for housing, food, utilities, transportation, other essential expenses, or would otherwise materially interfere with MassHealth's goal of providing affordable health insurance to low-income persons; or
- (f) has suffered within the six months prior to the date of application for a waiver, or is likely to suffer in the six months following such date, economic hardship because of a state or federally declared disaster or public health emergency.

130 CMR 506.011(G)(1).

If MassHealth grants a member a hardship waiver, MassHealth may:

- (a) waive payment of the premium or reduce the amount of the premiums assessed to a particular family; or
- (b) grant a full or partial waiver of a past due balance. Past due balances include all or a portion of a premium accrued before the first day of the month of hardship; or
- (c) both...

Id. at 506(G)(2).

In this case, the appellant is a MassHealth CommonHealth member and has demonstrated that he meets the requirements of 130 CMR 506.011(G)(1)(e)(1). Further, I credit his testimony regarding his current financial situation, specifically regarding his ongoing bills and his statement that, at the time of hearing, he had \$1.00 in his bank account. I take notice of the fact that there has been significant inflation of the cost of goods as we continue to recover from the COVID-19 pandemic, and that even the cost of groceries alone has risen significantly in the past year, and I find that the appellant has demonstrated this fact through his testimony. As such, I find that requiring the appellant to pay his monthly CommonHealth premium would cause him extreme financial hardship that would materially interfere with MassHealth's goal of providing affordable healthcare to low-income persons. Based on his testimony at hearing, the appellant's application for a hardship waiver should be approved.

At hearing, it was reported that the appellant's MassHealth benefits had been terminated due to his past-due premium balance. That balance should be waived, and the appellant's benefits should be reinstated retroactive to the termination date to ensure no gap in his coverage.

For the foregoing reasons, the appeal is APPROVED.

Order for MassHealth

Approve the appellant's application for a hardship waiver of his premium. Reduce his past-due premium balance to \$0.00 and reinstate his benefits retroactive to the termination date.

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: Dori Mathieu, Springfield MassHealth Enrollment Center

MassHealth Representative: Karishma Raja, Maximus Premium Billing