# Office of Medicaid BOARD OF HEARINGS

#### **Appellant Name and Address:**



Appeal Decision: Approved Appeal Number: 2403757

**Decision Date:** 6/26/2024 **Hearing Date:** 05/09/2024

Hearing Officer: Mariah Burns

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Michelle Carvalho, Taunton MassHealth Enrollment Center; Karishma Raja, Maximus Premium Billing.



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; Tax

**Refund Interception** 

**Decision Date:** 6/26/2024 **Hearing Date:** 05/09/2024

MassHealth's Rep.: Michelle Carvalho, Appellant's Rep.: Pro se

Karishma Raja

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 March 18, 2024, the Massachusetts Department of Revenue intercepted a portion of the appellant's tax refund due to a delinquency on her MassHealth account. See 130 CMR 506.011(D)(3) and Exhibit 1. The appellant filed this appeal in a timely manner on March 12, 2024<sup>1</sup>. See 130 CMR 610.015(B) and Exhibit 2. The interception of a state tax refund to satisfy a debt is valid grounds for appeal. See 130 CMR 610.032 and G.L. c. 62D, § 6.

## **Action Taken by MassHealth**

A portion of the appellant's tax refund was intercepted by the Massachusetts Department of Revenue due to a delinquency on the appellant's MassHealth account.

#### Issue

The appeal issue is whether MassHealth correctly reported a delinquency on the appellant's account resulting in an interception of a portion of her tax refund.

<sup>&</sup>lt;sup>1</sup> It is unclear how the fair hearing request predates the notice on file, but I take jurisdiction of the issue regardless of that inconsistency.

## **Summary of Evidence**

The appellant is an adult under the age of 65, and this appeal relates to benefits approved for her minor child. MassHealth was represented at hearing by a worker from the Taunton MassHealth Enrollment Center and a worker from the Premium Billing Department.

On November 15, 2022, the appellant's child underwent an automatic renewal for the Children's Medical Security Plan. A notice was sent by MassHealth on that day and informed the appellant of a \$64.00 monthly premium imposed on the benefits. MassHealth reported that, due to the ongoing public health emergency due to the COVID-19 pandemic, MassHealth did not bill the appellant for her premium until June of 2023. The appellant was billed a premium for the months of June, July, August, and September of 2023, none of which were paid. This resulted in a balance of \$192.00 in unpaid premiums on the appellant's account.<sup>2</sup> Her account was then referred to the State Intercept Program, which led to a portion of the appellant's state tax return being intercepted: the \$192.00 balance, plus fees which equaled a total intercept of \$217.00. The appellant filed a timely request for fair hearing.

At hearing, the appellant reported that she never received the auto-renewal notice in November of 2022. Furthermore, she stated that when she received the first premium bill in June of 2023, she called MassHealth multiple times, informing them of her intention to cancel the benefits. The appellant reported that she never wanted the MassHealth benefits for her child and that she did not want them going forward. The MassHealth representative confirmed that the appellant called to cancel her benefits on June 30, 2023, but had no explanation for why the benefits were not cancelled, even prospectively.

## **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; the benefits related to this appeal were approved for her minor child. Testimony, Exhibit 4.
- 2. On November 15, 2024, MassHealth automatically renewed the appellant's child's MassHealth CommonHealth benefits and imposed a monthly premium of \$64.00. Exhibit 5 at 8-9.
- 3. Due to the ongoing COVID-19 pandemic, MassHealth did not bill the appellant for a monthly premium until June of 2023. Testimony, Exhibit 5 at 5.

<sup>2</sup> The appellant's benefits were also terminated on October 24, 2023, due to the nonpayment of premium.

- 4. When the appellant received the bill in 2023, she called to cancel her benefits. Testimony.
- 5. MassHealth did not cancel the appellant's benefits as she requested in June 2023. Testimony.
- 6. MassHealth continued to bill the appellant for July, August and September of 2023, accruing a balance of \$192.00 on her account. Exhibit 5 at 5.
- 7. On October 24, 2023, MassHealth terminated the appellant's benefits for failure to pay her premium. Exhibit 5 at 7.
- 8. On or about March 18, 2024, the Massachusetts Department of Revenue interception \$217.00 of the appellant's tax refund to cure the delinquency on her MassHealth account. Exhibit 1.
- 9. The appellant filed a timely request for fair hearing on March 12, 2024. Exhibit 2.
- 10. The appellant does not wish to remain a MassHealth member. Testimony.

## **Analysis and Conclusions of Law**

MassHealth may impose a premium for members receiving MassHealth Standard, CommonHealth, or Family Assistance benefits whose household income is greater than 150% of the federal poverty level. See 130 CMR 506.011. MassHealth must send a timely notice of the imposition of any premium for it to be enforceable. See 130 CMR 610.015(A). These members "are responsible for monthly premium payments beginning with the calendar month following the date of the MassHealth agency's eligibility determination. 130 CMR 506.011(C)(1). Members who contact MassHealth "within 60 calendar days from the date of the eligibility notice and premium notification" to request a voluntary withdrawal of benefits may have their premiums waived. Id. at 506.011(C)(4).

MassHealth may terminate a member's benefits, pursuant to adequate notice, if "the member does not pay the entire amount billed within 60 days of the date on the bill." 130 CMR 506.011(D)(1). A member "who is 150 days or more in arrears" may be referred to the State Intercept Program "in compliance with 815 CMR 9.00: *Collection of Debts." Id.* at 506.011(D)3).

In this case, although MassHealth may have sent an automatic renewal of the appellant's benefits in November 2022 informing the appellant of her premium payments, it did not act on that notice until June of 2023. When, ultimately, that notice was acted upon, the appellant immediately called MassHealth and informed them of her intention to cancel her benefits, as evidenced by both the appellant's credible testimony and notes from the MassHealth representative. Had

Page 3 of Appeal No.: 2403757

MassHealth properly acted on that voluntary termination of benefits, the appellant's premium, at very least, would have been cancelled for July, August, and September.

Furthermore, because the appellant called to terminate her benefits within 60 days of receiving her first premium bill, I find that she properly complied with the requirements of 130 CMR 506.011(C)(4). For that reason, I find that her benefits should have been terminated, her premium cancelled, and the balance on her account waived. Thus, her tax refund was wrongly intercepted by the Department of Revenue pursuant to 130 CMR 506.011(D)3), as she should never have been more than 150 days in arrears with MassHealth.

For the foregoing reasons, the appeal is APPROVED.

#### Order for MassHealth

Refund the appellant for all expenses incurred because of the interception of her tax refund (\$217.00). Reduce the balance on the appellant's account to \$0.00. Cancel the appellant's benefits prospectively; do not reinstate them.

## 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

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

Page 4 of Appeal No.: 2403757