

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2404488
Decision Date:	6/3/2024	Hearing Date:	April 22, 2024
Hearing Officer:	Brook Padgett		

Appellant Representative:

Pro se

MassHealth Representatives:

Laymaris Ortiz, Springfield MEC
Karishma Raja, Premium Billing



*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:	130 CMR 501.012 Premium Billing Tax Intercept
Decision Date:	6/3/2024	Hearing Date:	April 22, 2024
MassHealth Reps.:	L. Ortiz K. Raja	Appellant Rep.:	Pro se
Hearing Location:	Springfield, MEC		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

The appellant received a Notice of Refund Applied to Debt or Transferred dated February 22, 2024 stating MassHealth through the Department of Revenue (DOR) intercepted a total of \$378.60 from the appellant's state tax refund (\$368.60 + \$10.00 processing fee) because MassHealth determined the appellant owed past due premiums for MassHealth coverage. (Exhibit 1). The appellant appealed the notice timely on March 22, 2024. (130 CMR 610.015(B); Exhibit 2). The interception of tax returns is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth, through DOR, intercepted a total of \$378.60 from the appellant's state tax refund.

Issue

Is MassHealth correct in determining that the appellant owed past due MassHealth premiums?

Summary of Evidence

The representative from the MassHealth Enrollment Center testified that on March 08, 2023 the appellant was renewed automatically for MassHealth CommonHealth with a premium of \$88.40. On the approval letter it states the appellant is required to pay a MassHealth premium. It also states that if you do not want to pay the premium, you must contact MassHealth within 60 days from the date you were notified. If you do not cancel your benefits by that date, you will need to pay any premium bills you get. The appellant's MassHealth CommonHealth benefits were then terminated on October 06, 2023 for failure to pay the monthly premium.

A representative from MassHealth Premium Billing testified the appellant was billed a \$88.40 premium for the months of June, July, August and September 2023. MassHealth did not receive any premium payments during this time period and the appellant owes a total of \$353.60 in past due premiums. On February 26, 2024, the Commonwealth intercepted the appellant's state tax refund and seized \$378.60 for payment of the unpaid premiums. (Exhibit 4).

The appellant responded that in June 2023 she received a premium bill for MassHealth and was surprised because she has [REDACTED] coverage and had neither applied nor needed the coverage. The appellant stated she had applied for MassHealth for her husband as he has Medicare. The appellant argued she contacted MassHealth on June 16, 2023 to cancel the insurance. The appellant listed a number of individuals she spoke with to cancel her benefits. The appellant stated she was informed it would take a couple of months to cancel her coverage so when she continued to receive monthly premium bills, she did not think about it. The appellant stated she contacted MassHealth again in October after she received a notice that \$353.60 would be intercepted from her taxes to satisfy her past due premiums. The appellant maintains she called MassHealth to cancel her coverage but she was passed around from department to department and no one could help her resolve the issue.

Neither MassHealth nor Premium Billing could find any record in the system that the appellant had contacted MassHealth to cancel coverage. (Exhibit 5).

There was no evidence presented that MassHealth paid claims during the period under appeal.

Findings of Fact

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

1. On March 08, 2023, MassHealth sent a notice to the appellant that she had been approved for MassHealth CommonHealth with a premium of \$88.60. (Exhibit 4 and testimony).
2. MassHealth sent a premium bill for \$88.60 to the appellant's known address for the months of

June, July August and September 2023. (Testimony).

3. The appellant failed to make a premium payment and MassHealth terminated coverage on October 06, 2023. (Exhibit 4).
4. MassHealth calculated a past due premium arrearage of \$353.60 (4 months @ \$88.40) (Exhibit 4 and testimony).
5. On February 22, 2024, DOR sent the appellant a notice stating they had intercepted \$378.60 from the appellant's state tax refund, with \$368.00 going to MassHealth and \$10.00 as a processing fee. (Exhibit 1).

Analysis and Conclusions of Law

On March 08, 2023 the appellant was renewed automatically for MassHealth CommonHealth with a premium of \$88.40. The appellant who had [REDACTED] coverage had applied for her husband who was on Medicare.

This matter rests on a determination of credibility as to whether appellant did or did not contact MassHealth to cancel her CommonHealth. I find the appellant to be credible that she was unaware of her MassHealth eligibility until June 2023 and that on June 16, 2023 she contacted MassHealth to cancel her coverage.

130 CMR 501.012: Recovery of Overpayment of Medical Benefits

The MassHealth agency has the right to recover payment for medical benefits to which the member was not entitled at the time the benefit was received, regardless of who was responsible and whether or not there was fraudulent intent. No provision under 130 CMR 501.012: *Recovery of Overpayment of Medical Benefits* will limit the MassHealth agency's right to recover overpayments.

In addition, the Notice of Refund Applied to Debt or Transferred dated February 22, 2024 states DOR intercepted a total of \$378.60 from the appellant's state tax refund (\$368.60 for past due premiums + \$10.00 service fee); however the overpayment amount had been calculated to be \$353.60 (\$88.40 x 4). It appears DOR added a \$25.00 service fee to the correct overpayment amount of \$353.60 and then transferred \$378.60 from the appellant's tax refund and did not add a \$10.00 service charge to an incorrect overpayment amount of \$368.60 as detailed on the notice.

Further if MassHealth bills a member for a premium payment, and the member does not pay the entire amount billed within 60 days of the date on the bill, then the member's eligibility for benefits is terminated. The appellant was billed for June, July, August and September which is

two months after she should have been terminated by regulation.¹

For the above reasons, the appeal is APPROVED.

Order for MassHealth

Rescind any and all premiums assessed against appellant for June, July, August and September 2023.
Refund the total amount intercepted (\$378.60) including any processing fees.

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.

Brook Padgett
Hearing Officer
Board of Hearings

cc: MassHealth representative: Springfield MEC and Karishma Raja, Premium Billing

¹ 130 CMR 506.011: MassHealth Standard, CommonHealth, Family Assistance, and the Children's Medical Security Plan (CMSP) Premiums (A) MassHealth Standard, CommonHealth, Family Assistance, and the Children's Medical Security Plan (CMSP) Premiums. MassHealth may charge a premium to certain MassHealth CommonHealth and Family Assistance members, and to certain women with breast or cervical cancer who receive MassHealth Standard in accordance with 130 CMR 505.002(H) who have incomes above 150% of the federal-poverty level. MassHealth may charge a premium to members of the Children's Medical Security Plan (CMSP) who have incomes at or above 200% of the federal-poverty level. Only one premium per family group will be assessed. Certain members are exempt from paying premiums, in accordance with 130 CMR 506.011(K). (C) Delinquent Premium Payments. (1) **Termination for Delinquent Premium Payments**. **If MassHealth has billed a member for a premium payment, and the member does not pay the entire amount billed within 60 days of the date on the bill, then the member's eligibility for benefits is terminated.** The member will be sent a notice of termination before the date of termination... (*Emphasis added*).