

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Approved	<b>Appeal Number:</b>	2404833
<b>Decision Date:</b>	07/02/2024	<b>Hearing Dates:</b>	05/01/2024; 06/04/2024
<b>Hearing Officer:</b>	Emily Sabo		

**Appearances for Appellant:**



**Appearances for MassHealth:**

Karishma Raja, Premium Billing  
Nicole Veras, Tewksbury MEC (Day 2)



*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

<b>Appeal Decision:</b>	Approved	<b>Issue:</b>	Premium Billing
<b>Decision Date:</b>	07/02/2024	<b>Hearing Date:</b>	05/01/2024; 06/04/2024
<b>MassHealth's Rep.:</b>	Karishma Raja; Nicole Veras	<b>Appellant's Rep.:</b>	[REDACTED]
<b>Hearing Location:</b>	Tewksbury MassHealth Enrollment Center (Telephone)	<b>Aid Pending:</b>	No

### 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 dated March 1, 2024, stating that the Executive Office of Health and Human Services through the Department of Revenue intercepted a total of \$1,190 from Appellant's state tax refund (\$1,180 + \$10.00 processing fee) because of an unpaid debt. Exhibit 1. The Appellant timely appealed the notice on March 27, 2024. 130 CMR 610.015(B) and Exhibit 2. The interception of tax returns is valid grounds for appeal. 130 CMR 610.032.

### Action Taken by MassHealth

MassHealth through the Massachusetts Department of Revenue intercepted the Appellant's tax refund to be paid toward unpaid MassHealth premiums.

### Issue

The appeal issue is whether MassHealth was correct that the Appellant owes \$1,190 for past due premiums.

## Summary of Evidence

The hearing was conducted telephonically over two days. MassHealth was represented by a Premium Billing specialist on both days, and an eligibility specialist on the second day. The Premium Billing specialist testified that MassHealth CommonHealth coverage for the Appellant's minor child was auto-renewed on February 13, 2023, and that a \$362/monthly premium was assessed. Due to Covid/Public Health Emergency protections, MassHealth was not issuing invoices for premiums due until June 2023. The Premium Billing specialist testified that the Appellant was billed a premium for the months of June-September 2023. The Premium Billing specialist testified that the Appellant's child's CommonHealth coverage was terminated on September 28, 2023, for non-payment of premium. The Premium Billing Specialist testified that the Appellant had a remaining balance due of \$283.

The Appellant testified and was also represented by a social worker who is part of the Appellant's child's primary care physician's office. The Appellant testified that since 2019, she and her family have had private health insurance, specifically [REDACTED]. The Appellant testified that she never received any notices from MassHealth regarding her child being enrolled in CommonHealth. The Appellant testified that she did not receive any paperwork, insurance card, or re-enrollment forms from MassHealth. The Appellant testified that she did not receive any premium bills from MassHealth. The Appellant testified that the only notices she received were the tax intercept notice from the Department of Revenue and the scheduling notice from the Board of Hearings.

The Appellant and the social worker testified that the Appellant's child's doctor's office has no record of the child having MassHealth CommonHealth or billing MassHealth CommonHealth for any services. The social worker testified that the child has had multiple surgeries since [REDACTED] at [REDACTED], and that neither institution had MassHealth CommonHealth as the child's insurance. The social worker testified that the family has paid out of pocket for durable medical equipment and physical therapy multiple times a week for the child. The social worker testified that the Appellant is extremely upset by the situation.

At the second day of hearing, the social worker testified that she and the Appellant had called the post office and spoke with the mail carrier about the lack of notices from MassHealth and if they had been returned without being delivered and was told that there was no such mail from MassHealth. The MassHealth eligibility specialist testified that the child was approved for MassHealth CommonHealth on September 16, 2022, and that MassHealth considered the child to have been enrolled in CommonHealth coverage from August 5, 2022, to October 12, 2023.

MassHealth did not have any record of the child using CommonHealth benefits. Upon inquiry from the hearing officer, about whether any mail was returned to MassHealth, the eligibility specialist testified that for MassHealth's purposes the notices were mailed out on their generated dates.

## **Findings of Fact**

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

1. The Appellant has a minor child. Testimony.
2. The Appellant and her family, including her minor child, have private insurance. They have had private insurance since 2019. Testimony.
3. The Appellant never received any notice from MassHealth indicating that the child was enrolled in CommonHealth or was assessed a premium. Testimony.
4. The Appellant's child did not use CommonHealth insurance. Testimony.
5. On March 1, 2024, the Appellant's Massachusetts state tax refund was intercepted for \$1,190, which was applied toward the Appellant's June-August 2023 invoices, and part of the September 2023 invoice. Testimony, Exhibit 1.
6. The Appellant timely filed an appeal on March 27, 2024. Exhibit 2.

## **Analysis and Conclusions of Law**

MassHealth may charge a monthly premium to members with MassHealth Standard, CommonHealth, or Family Assistance who have income above 150 percent of the federal poverty level, as provided in 130 CMR 506.011. If the member contacts MassHealth by telephone, in writing, or online and requests a voluntary withdrawal within 60 calendar days from the date of the eligibility notice and premium notification, MassHealth premiums are waived. 130 CMR 506.011(C)(5). MassHealth may terminate a member's eligibility for benefits if a premium bill is not paid within 60 days. 130 CMR 506.011(D)(1).

At the beginning of the COVID-19 Public Health Emergency, the federal government issued continuous coverage requirements. Beginning in March 2020, MassHealth put protections in place so that individuals receiving Medicaid would generally not lose their coverage unless they voluntarily withdrew, moved out of state, or passed away. These continuous coverage requirements ended April 1, 2023. Eligibility Operations Memorandum (EOM) 23-18 directs MassHealth to review members' eligibility to ensure they still qualify for MassHealth benefits. The EOM states for those members who had benefits protected before April 1, 2023, MassHealth

cannot close or downgrade coverage (or take “adverse action”) until a complete annual renewal or review is performed.

I credit the Appellant’s and the social worker’s testimony that the Appellant never received any notice that the child was enrolled in MassHealth CommonHealth or assessed a monthly premium. This is further supported by the family not using any CommonHealth services to pay for the child’s medical expenses. Thus, I find that the Appellant’s first notice of the premium came in the form of the March 1, 2024, tax refund intercept notice. The Appellant appealed that within 60 days, on March 27, 2024. 130 CMR 506.011(C)(5). Therefore, I find that the Appellant is not responsible for the June-September 2023 premium bills, and the appeal is approved.

## **Order for MassHealth**

Rescind Appellant’s premiums assessed for June 2023 to September 2023 and refund to the Appellant \$1,190 (including fees) transferred from the Appellant’s state tax refund.

## **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.

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Emily Sabo  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290

MassHealth Representative: Maximus Premium Billing