

Office of Medicaid
BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2405968
Decision Date:	05/31/2024	Hearing Date:	May 14, 2024
Hearing Officer:	Brook Padgett		

Appellant Representative:



MassHealth Representatives:

Karishma Raja, Premium Billing
Melanie Hebert, Springfield MEC



*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 Intercept 130 CMR 610.015
Decision Date:	05/31/2024	Hearing Date:	May 14, 2024
MassHealth Reps.:	M. Hebert, K. Raja	Appellant Rep.:	Pro se
Hearing Location:	Springfield MEC	Aid Pending:	No

Authority

The appellant received a Notice of Refund Applied to Debt or Transferred dated April 02, 2024 stating MassHealth through the Department of Revenue (DOR) intercepted a total of \$282.00 from the appellant's state tax refund (\$278.00 + \$10.00 processing fee) because MassHealth determined the appellant owed past due premiums for MassHealth coverage. (Exhibit 1).

The appellant appealed this notice timely on April 16, 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 \$282.00 from the appellant's state tax refund.

Issue

Does the appellant owe past due premiums.

Summary of Evidence

The MassHealth representative, from the MassHealth Enrollment Center in Springfield, testified that the appellant's child was approved for MassHealth CommonHealth on May 16, 2012. The appellant

received CommonHealth with premium assistance until May 26, 2023 when his coverage was change to CommonHealth without premium assistance and he became responsible for a premium payment of \$528.00 beginning June 2023.

The representative from the MassHealth Premium Billing unit testified the appellant was billed for the months of June, July, August and September 2023. The appellant made no payments and was terminated from coverage on September 29, 2023 with an arrearage totaling \$2,112.00. The appellant's Massachusetts state tax refund was intercepted on April 04, 2024 and a payment of \$275.00 was applied to the outstanding debt. The appellant continues to owe \$1,855.00. On April 11, 2024 the appellant called and voluntarily withdrew from coverage. The Premium Billing representative stated that since the cancellation was outside the 60 day regulation timeframe for voluntary withdrawal (130 CMR 506.011(C)(5)) the appellant is responsible for the unpaid premiums.

The appellant's representative testified his son (who is on the autism spectrum) was receiving MassHealth as supplemental insurance until May 2023 when the representative's wife called MassHealth and cancelled coverage. The representative stated he never received a premium bill from MassHealth. The representative maintained that once he received the notice of the tax intercept he called MassHealth and it was determined the premium bills were going to his old address in [REDACTED] rather than his current address in [REDACTED]. The representative stated the household moved from the [REDACTED] address in 2018 and his wife updated the change of address online.

After review of the notices MassHealth determined that a system error was sending premium billing notices to the appellant's old address and the MassHealth notices were being sent to the appellant's current address. MassHealth and Premium Assistance acknowledged the appellant did not receive the premium bills and indicated they were willing to reverse the charges. The appellant requested a decision verifying the MassHealth reversal.

Findings of Fact

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

1. In June 2023 the appellant's son was billed a CommonHealth premium of \$528.00. (Testimony).
2. The appellant was billed \$528.00 for the months of June, July, August and September 2023. (Exhibit 4). (Exhibit 4 and testimony).
3. The appellant made no payments and was terminated from coverage on September 29, 2023 with an arrearage totaling \$2,112.00. (Exhibit 4 and testimony).

4. The appellant did not receive the premium bills for the months of June, July, August and September 2023.
5. The appellant's Massachusetts state tax refund was intercepted on April 04, 2024 and a payment of \$275.00 was applied to the outstanding debt. (Exhibit 4 and testimony).
6. The appellant continues to owe \$1,855.00. (Exhibit 4 and testimony).
7. On April 11, 2024 the appellant called and voluntarily withdrew from coverage. (Exhibit 4 and testimony).
8. A systems error caused the MassHealth premium billing notices to be sent to the appellant's old address. (Testimony).
9. MassHealth agreed to reverse the charges. (Testimony).

Analysis and Conclusions of Law

MassHealth confirm the appellant's representative's testimony that the appellant's Premium Billing notices were being sent to the wrong address and therefore the appellant did not receive a premium bill for the months of June, July, August and September 2023. The representative provided credible testimony that they were not expecting any notices from MassHealth as they had previously cancelled their MassHealth. The appellant credibly testified that if he received the approval notice or any premium bills he would have called to cancel the coverage.

MassHealth must send a written timely notice to the member at least ten days before the action.¹ MassHealth and Premium Billing have acknowledge the premium bills were mailed to an old address therefore the appellant did not receive proper notice of his MassHealth CommonHealth approval and calculated premium.

I find the appellant was not given timely notice of his MassHealth approval with a premium or the need to cancel within 60 days if he did not want coverage and as a result his appeal is APPROVED.

Order for MassHealth

Rescind the appellant's premium bills assessed for June, July, August and September 2023 and refund

¹ 130 CMR 610.015: Time Limits (A) Timely Notice. Before an intended appealable action, the MassHealth agency must send a written timely notice to the member except as provided in 130 CMR 610.027. A timely notice is a notice mailed at least ten days before the action. Such notice must include a statement of the right of appeal and the time limit for appealing.

any funds transferred from the appellant's state tax refund including any service charges.

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, Division of Medical Assistance, at the address on the first page of this decision.

Brook Padgett
Hearing Officer
Board of Hearings

Cc: Premium Billing, Quincy MEC