

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2406066
Decision Date:	6/27/2024	Hearing Date:	05/15/2024
Hearing Officer:	Christopher Jones		

Appearance for Appellant:
Pro se

Appearances for MassHealth:
Connie Dorvil – Tewksbury MEC
Roxana Noriega - Premium Assistance



*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:	Denied	Issue:	Community; Under-65; Premium Assistance
Decision Date:	6/27/2024	Hearing Date:	05/15/2024
MassHealth's Reps.:	Connie Dorvil; Roxana Noriega	Appellant's Rep.:	Pro se
Hearing Location:	Telephonic	Aid Pending:	Yes

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 February 27, 2024, MassHealth informed she must enroll her children in her employer-sponsored insurance, or their MassHealth coverage would be terminated on April 27, 2024. (Exhibit 1.) The appellant filed this appeal in a timely manner on April 18, 2024.¹ (Exhibit 2; 130 CMR 610.015(B).) Any MassHealth agency action to suspend, reduce, terminate, or restrict a member's assistance is valid grounds for appeal. (130 CMR 610.032.)

Action Taken by MassHealth

MassHealth informed the appellant that her children's coverage would be terminated if they were not enrolled in her employer-sponsored insurance.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 503.007, in

¹ MassHealth's Enrollment Center representative confirmed that the children's Family Assistance coverage is protected pending the outcome of this appeal. (See 130 CMR 610.036.)

determining that the appellant's children must enroll in available employer-sponsored insurance.

Summary of Evidence

The appellant has two children who are eligible for the Family Assistance benefit. The appellant is covered by a subsidized insurance plan through the Health Connector. MassHealth identified that her employer offers an insurance plan that qualifies for Premium Assistance coverage, [REDACTED] plan. MassHealth's Premium Assistance representative explained that the agency would mail the appellant a check in advance for the full month's premium for the insurance, and that her children would continue to be covered by Family Assistance to cover any copays or deductibles not covered by the primary insurance.

The appellant had heard from co-workers that MassHealth did not pay in advance, and that she would need to cover months of premiums before being reimbursed. She also testified that she was told she needed to enroll in the health insurance plan herself, in addition to enrolling her children. She testified that her Health Connector insurance is cheaper and better coverage than her employer-sponsored insurance.

MassHealth's Premium Assistance representative explained that the only scenario in which there would be a lump sum, multi-month payment is if the member enrolled retroactively in their employer-sponsored insurance. They would then need to pay all of the premiums at once, but MassHealth would reimburse them all. The appellant was told that she could enroll prospectively, so as to avoid that outcome. She was also told that any questions regarding her Connector coverage would need to be addressed to the Health Connector.

Findings of Fact

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

- 1) The appellant has two children under the age of [REDACTED] (Testimony by MassHealth's representatives.)
- 2) The appellant's children are covered by MassHealth Family Assistance. (Testimony by MassHealth's representatives.)
- 3) The appellant is employed, and her employer offers a [REDACTED] plan that is eligible for Premium Assistance benefits. (Exhibit 1; testimony by MassHealth's representatives.)

Analysis and Conclusions of Law

MassHealth “is the payer of last resort and pays for health care and related services only when no other source of payment is available” (130 CMR 503.007.) One requirement of MassHealth coverage is that “member must obtain and maintain available health insurance in accordance with 130 CMR 505.000 Failure to do so may result in loss or denial of eligibility unless the applicant or member is” covered by “MassHealth Standard or MassHealth CommonHealth; and ... younger than ■ years old or pregnant.” (130 CMR 503.007(A).)

One of the eligibility requirements for MassHealth Family Assistance benefits is that **“the child complies with 130 CMR 505.005(B)(2)”** and meets one of the following criteria: 1. the child is uninsured; or 2. the child has health insurance that meets the criteria at 130 CMR 506.012: *Premium Assistance Payments*.” (130 CMR 505.005(B)(1)(e) (emphasis added).)

(2) Access to Employer-sponsored Insurance and Premium Assistance Investigations for Individuals Who Are Eligible for MassHealth Family Assistance. MassHealth may perform an investigation to determine if individuals potentially eligible for MassHealth Family Assistance

(a) have health insurance that MassHealth can help pay for; or

(b) have access to employer-sponsored insurance in which MassHealth wants the individual to enroll and for which MassHealth will help pay.

...

2. Investigations for Individuals Who Have Potential Access to Employer-sponsored Health Insurance (ESI).

a. If MassHealth determines the individual has access to employer-sponsored health insurance, ... and the insurance meets all other criteria described at 130 CMR 506.012: *Premium Assistance Payments*, the individual is notified in writing that they must enroll in this employer-sponsored coverage that meets the criteria described in 130 CMR 506.012. MassHealth allows the individual up to 60 days to enroll in this coverage. Once enrolled in this health insurance plan, MassHealth provides MassHealth Family Assistance Premium Assistance Payments as described in 130 CMR 450.105(G)(1): *Premium Assistance* and 130 CMR 506.012. **Failure to enroll in the employer-sponsored health insurance plan at the request of MassHealth will result in the loss or denial of eligibility.**

...

(130 CMR 505.005(B)(2) (emphasis added).)

The appellant's children are under the age of [REDACTED] but they are not covered by MassHealth Standard or CarePlus. Therefore, they are not excluded from the requirement to "obtain and maintain available health insurance." Further, Premium Assistance has completed its investigation and found that the appellant's employer-sponsored insurance qualifies for Premium Assistance payments. MassHealth has made no error in requiring the appellant to enroll her children in her employer-sponsored insurance plan. This appeal must be DENIED. The appellant must enroll her children in her employer-sponsored insurance for August 1 coverage. If they are not enrolled by then, MassHealth may end their Family Assistance coverage.

Order for MassHealth

Remove Aid Pending. Allow the appellant until August 1 to confirm that her children are enrolled in her employer's [REDACTED] plan. Terminate coverage if they are not enrolled.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Christopher Jones
Hearing Officer
Board of Hearings

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

MassHealth Representative: Premium Assistance