

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2415037
Decision Date:	11/15/2024	Hearing Date:	11/01/2024
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:



Appearances for MassHealth:

Via telephone:

Dominique Correa, Springfield MEC

Odilia Ruiz, 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:	Under 65; Premium Assistance; Income
Decision Date:	11/15/2024	Hearing Date:	11/01/2024
MassHealth's Rep.:	Dominique Correa; Odilia Ruiz	Appellant's Rep.:	██████
Hearing Location:	Springfield MassHealth Enrollment Center, 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 September 23, 2024, MassHealth informed the appellant that she has health insurance available through a job that meets the rules for MassHealth Premium Assistance and she needs to enroll herself and her children in the plan by November 22, 2024 or their MassHealth benefits may end (Exhibit 1). The appellant filed this appeal in a timely manner on September 30, 2024 (see 130 CMR 610.015(B) and Exhibit 2). Challenging the scope of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth informed the appellant that she has insurance available through her job that meets the rules for MassHealth Premium Assistance and she needs to enroll herself and her children in the plan by November 22, 2024 or their MassHealth benefits may end.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant has insurance available through her job that meets the rules for MassHealth Premium Assistance and must enroll in available employer sponsored insurance.

Summary of Evidence

All parties appeared at hearing via telephone. MassHealth was represented by an eligibility worker (hereinafter, the MassHealth representative or MassHealth) from the Springfield MassHealth Enrollment Center and a Premium Assistance worker (hereinafter, the Premium Assistance representative or Premium Assistance). The MassHealth representative testified as follows: on September 9, 2024, the appellant, who is under 65 with a household size of 5 (including herself and four children under the age of 19), completed a phone application and was approved for MassHealth Standard. The appellant's most recently verified gross monthly income is about \$3,534, or 110% of the Federal Poverty Level (FPL) for a household of five. MassHealth issued an approval notice on that date along with a request for the non-custodial parent form, which is due in December. On September 10, 2024, MassHealth received information regarding a change in available health insurance. As a result, on September 23, 2024, MassHealth issued a notice informing the appellant that she has health insurance available through a job that meets the rules for MassHealth Premium Assistance and she needs to enroll herself and her children in the plan by November 22, 2024 or their MassHealth benefits may end. This is the notice under appeal.

The Premium Assistance representative explained that if a member has access to employer-sponsored health insurance, she must enroll. Premium Assistance received the Premium Assistance application on September 5, 2024 from the appellant and her employer. On September 23, 2024, Premium Assistance issued a qualifying event letter informing the appellant that she had 60 days to enroll in her employer-sponsored plan. She explained that Premium Assistance would reimburse 100% of the appellant's monthly premium by sending a check every month, prior to the premium being taken out of her paycheck. Additionally, MassHealth, as her and her children's secondary insurance, would cover all co-pays, deductibles, and any other covered services that her employer-sponsored plan did not cover.

The appellant testified that she is a single mom with four kids. She did not dispute the availability of the employer-sponsored insurance, but testified that she does not get child support and cannot afford to enroll in the insurance offered through her job. She has to pay rent and utilities. Two of her kids see specialists and she cannot afford the co-pays, deductibles, and hospital visits out-of-pocket. She insisted she would have to cut her hours in order to receive MassHealth benefits again. She also stated that she sent the custodial parent form three times via fax.

Premium Assistance repeated what was covered by Premium Assistance and MassHealth Standard. Additionally, the Premium Assistance representative noted that any co-pays, deductibles, or bills not covered by her employer-sponsored insurance would be charged directly to MassHealth. The appellant would not have to pay those expenses out-of-pocket.

Findings of Fact

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

1. The appellant is an adult over the age of 21 and under the age of 65 with a household size of five, including herself and four children younger than 19 (Testimony and Exhibits 1 and 4).
2. Through a notice dated September 23, 2024, MassHealth informed the appellant that she has health insurance available through a job that meets the rules for MassHealth Premium Assistance and she needed to enroll herself and her children in the plan by November 22, 2024 or their MassHealth benefits may end (Testimony and Exhibit 1).
3. The household's most recently verified gross monthly income is about \$3,534, or 110% of the FPL for a household of five (Testimony).
4. The appellant and her children are eligible for MassHealth Standard benefits (Testimony).
5. The appellant has access to health insurance through her job that meets the requirements of Premium Assistance and she must enroll her and her children in the employer-sponsored plan by November 22, 2024 to maintain her MassHealth benefits (Testimony and Exhibit 1).

Analysis and Conclusions of Law

At issue is whether the appellant must enroll herself and her children in health insurance available to her and her family through her employer in order to maintain their MassHealth benefits. To determine that, it is necessary to first address whether MassHealth correctly determined the family's MassHealth benefits.

MassHealth offers a variety of benefits based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below a certain financial threshold.

The MassHealth coverage types are set forth at 130 CMR 505.001(A) as follows:

- (1) Standard for pregnant women, children, parents and caretaker relatives, young adults,¹ disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) CommonHealth for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) CarePlus for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) Family Assistance for children, young adults, certain noncitizens and persons who are HIV positive who are not eligible for MassHealth Standard, CommonHealth, or CarePlus;
- (5) Small Business Employee Premium Assistance for adults or young adults who
 - (a) work for small employers;
 - (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus;
 - (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and
 - (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage;
- (6) Limited for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (7) Senior Buy-in and Buy-in for certain Medicare beneficiaries.

Categorically, the appellant and her four children under the age of 19 are eligible for MassHealth Standard. Under 130 CMR 505.002(B)(2), the income limit for Standard is 150% of the FPL for a child aged one through eighteen. Under 130 CMR 505.002(C)(1), the income limit for Standard is 133% of the FPL for a parent of a child younger than 19 years old. For a household of five, 150% of the FPL is \$4,573 gross monthly and 133% of the FPL is \$4,055 gross monthly. As the appellant's income (\$3,534 gross monthly, or 110% of the FPL, after five percentage points of the current FPL is subtracted from the applicable household total countable income pursuant to 130 CMR 506.007(A)) is within that limit, MassHealth correctly determined that the appellant and her children are eligible for MassHealth Standard benefits.

Pursuant to 130 CMR 505.002(M), applicants and members must use potential health insurance benefits in accordance with 130 CMR 503.007, which states that MassHealth is the payer of last

¹ "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

resort and pays for health care and related services only when no other source of payment is available, except as otherwise required by federal law. Here, there is no dispute that the appellant and her family have access to other health insurance through her employer. For these reasons, MassHealth's determination that the appellant and her children must enroll in the employer-sponsored insurance to continue to receive MassHealth benefits is correct.

Through its Premium Assistance program, MassHealth provides financial assistance to eligible members that have access to private health insurance, to help cover the cost of their health insurance premiums. See 130 CMR 506.012(C). Eligibility for this benefit is based on "the individual's coverage type and the type of private health insurance the individual has or has access to." See 130 CMR 506.012(C). Premium Assistance is available to MassHealth members who are eligible for MassHealth Standard. See 130 CMR 506.012(A)(1). Once enrolled, MassHealth issues "premium assistance payments" to the policyholder of the plan. The premium assistance payment is the amount MassHealth contributes to the cost of health insurance coverage for the member. See 130 CMR 501.001. MassHealth's determination that the appellant and her children are eligible for Premium Assistance is correct based on their eligibility for MassHealth Standard and access to private health insurance.

For these reasons, MassHealth's determination is correct and the appeal is denied.

Order for MassHealth

None.

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.

Alexandra Shube
Hearing Officer
Board of Hearings

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

Premium Assistance