

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2503550
Decision Date:	04/10/2025	Hearing Date:	04/04/2025
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:



Appearances for MassHealth:

Via telephone:

Katelyn Costello, Quincy 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:	Premium Assistance
Decision Date:	04/10/2025	Hearing Date:	04/04/2025
MassHealth's Reps.:	Katelyn Costello; Roxana Noriega	Appellant's Rep.:	██████
Hearing Location:	Quincy Harbor South	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 January 8, 2025, MassHealth informed the appellant that he has health insurance available through a job that meets the rules for MassHealth Premium Assistance and he needs to enroll himself, his spouse, and his children in the plan by March 9, 2025 or their MassHealth benefits may end (Exhibit 1). The appellant filed this appeal in a timely manner on March 4, 2025 (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 he has insurance available through his job that meets the rules for MassHealth Premium Assistance and he needs to enroll himself and members of his household in the plan by March 9, 2025 or their MassHealth benefits may end.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant has insurance available through his 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 Quincy MassHealth Enrollment Center and a Premium Assistance worker (hereinafter, the Premium Assistance representative or Premium Assistance). The MassHealth representative testified that the January 8, 2025 notice under appeal informed the appellant that he needed to enroll in his available employer-sponsored insurance which was eligible for Premium Assistance. The appellant timely followed up by enrolling in his employer-sponsored insurance plan and applying for Premium Assistance. At the same time, MassHealth informed the appellant that it needed a job update form, which the appellant timely submitted; however, one of the pay stubs was initially processed incorrectly by MassHealth. His wife had a one-time pay stub that was incorrectly put in the system as weekly. Once the income information was corrected, the household's income was determined to be at 115.74% of the Federal Poverty Level (FPL). Based on the most recently verified income, the appellant, his spouse, and two children (both currently under the age of 19), were approved for MassHealth Standard as their secondary insurance, with no gap in coverage. The appellant's MassHealth case was up to date and he would not need to complete a renewal until March 2026.

The Premium Assistance representative explained that Premium Assistance initially processed the appellant's case before the income was fixed. This resulted in only the children being eligible for Premium Assistance and a monthly Premium Assistance payment of about \$778; however, that has been fixed and Premium Assistance is paying for the full amount of the appellant's premium (about \$1,234 monthly) since the whole family is eligible for MassHealth Standard. The first check was mail out on March 27, 2025 for \$778, but Premium Assistance will send an underpayment check to cover the balance. She explained that Premium Assistance will send a check every month, prior to the premium being deducted from his paycheck. Additionally, MassHealth, as their secondary insurance, would cover all co-pays, deductibles, and any other covered services that his employer-sponsored plan did not cover.

The appellant did not dispute his income but was concerned about his income changing in the future and putting him over the income limit. His wife only works sporadically and he was concerned about the same error happening again if and when they submit a pay stub for her. He also was hoping to maintain MassHealth benefits without having to enroll in his employer-sponsored insurance plan which is very expensive.

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 four, including himself, his spouse, and two children younger than 19 (Testimony and Exhibits 1 and 4).
2. Through a notice dated January 8, 2025, MassHealth informed the appellant that he has health insurance available through a job that meets the rules for MassHealth Premium Assistance and he needed to enroll himself, spouse, and children in the plan by March 9, 2025 or their MassHealth benefits may end (Testimony and Exhibit 1).
3. The household's most recently verified gross monthly income is at 115.74% of the FPL for a household of four (Testimony).
4. The appellant and all members of his household are eligible for MassHealth Standard benefits (Testimony).
5. The appellant has access to health insurance through his job that meets the requirements of Premium Assistance and he must enroll in the employer-sponsored plan by March 9, 2025 to maintain his MassHealth benefits (Testimony and Exhibit 1).

Analysis and Conclusions of Law

At issue is whether the appellant must enroll himself and his household in health insurance available to him and his family through his 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,

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

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, his spouse, and two children currently 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.² 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 four, 150% of the FPL is \$4,019 gross monthly and 133% of the FPL is \$3,564 gross monthly. As the appellant's income at 115.74% of the FPL is within that limit, MassHealth correctly determined that the appellant and all members of his household 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 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 his family have access to other health insurance through his employer. For these reasons, MassHealth's determination that the appellant, spouse, and children must enroll in the employer-sponsored insurance to continue to receive MassHealth benefits is correct.

² For reference, as one of the appellant's children will be [REDACTED] within the year, under 130 CMR 505.002(B)(3), the income limit for Standard is also 150% of the FPL for young adults ages [REDACTED] years old.

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, his spouse, and his 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

cc: MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171

Premium Assistance