Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: APPROVED Appeal Number: 2508213

Decision Date: 7/7/2025 **Hearing Date:** 06/25/2025

Hearing Officer: Sharon Dehmand

Appearance for Appellant:

Appearance for MassHealth:

Lorena Garcia, Tewksbury EMC Roxana Noriega, Premium Assistance Unit



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: APPROVED Issue: Premium Assistance

Decision Date: 7/7/2025 **Hearing Date:** 06/25/2025

MassHealth's Rep.: Lorena Garcia Appellant's Rep.:

Hearing Location: Remote 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 notices dated May 15, 2025, MassHealth notified the appellant and her children that they do not qualify for MassHealth benefits because she did not enroll in the required employer-sponsored health insurance and that their coverage would end on May 29, 2025. See 130 CMR 503.007; 130 CMR 505.000; and Exhibit 1. The appellant filed this appeal in a timely manner on May 29, 2025. See 130 CMR 610.015(B) and Exhibit 2. Aid pending protection was put in place to protect the appellant's and her children's benefits. Any action to suspend, reduce, terminate, or restrict a member's assistance is valid grounds for appeal to the Board of Hearings. See 130 CMR 610.032(A)(3).

Action Taken by MassHealth

MassHealth notified the appellant and her children that they do not qualify for MassHealth benefits because she did not enroll in the required employer-sponsored health insurance and that their coverage would end on May 29, 2025.

Issue

Whether MassHealth erred in its determination that the appellant had not enrolled in the required

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employer-sponsored health insurance. See 130 CMR 503.007.

Summary of Evidence

All parties participated telephonically. MassHealth was represented by a worker from the Tewksbury MassHealth Enrollment Center and a representative from the MassHealth Premium Assistance Unit (PAU). The appellant appeared with her spouse and verified her identity. The following is a summary of the testimony and evidence provided at the hearing:

The MassHealth representative testified that the appellant is a disabled adult under the age of 65. She lives in a household of five including her spouse and three children. The annual household income is \$92,170.00. The appellant had MassHealth CommonHealth, and her three children were enrolled in Family Assistance since May 15, 2024. In February 2024, MassHealth issued a qualifying event letter requiring that the appellant and her children enroll in her spouse's available employer-sponsored health insurance and submit proof of the same to MassHealth. MassHealth did not receive proof of the enrollment. On May 15, 2025, termination notices for failure to enroll in the required employer-sponsored health insurance were issued by MassHealth for the appellant and her three children.

The appellant and her spouse confirmed their household size and income. The appellant's spouse testified that employer-sponsored health insurance is in fact available through his employer. He stated that he had enrolled his entire family in that plan on May 17, 2024, and has been paying the monthly premium consistently. He said that as part of this appeal, he had provided a copy of the insurance card reflecting the enrollment of all members of his family. See Exhibit 5.

The PAU representative verified that the appellant and her children were enrolled in employer-sponsored health insurance but stated that MassHealth had not received proof of the same from the appellant. The PAU representative requested that the appellant submit a copy of their ID cards and a completed premium assistance review form to MassHealth for a redetermination of their eligibility, the premium assistance payment amount, and the effective date of the premium assistance payments. The appellant's spouse agreed to do so.

Findings of Fact

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

1. The appellant is a disabled adult under the age of 65. (Testimony and Exhibit 4).

¹ The PAU discussed the possibly of retroactive premium assistance payments but was unsure whether or not it was possible.

- 2. The appellant lives in a household of five including her spouse and three children who are all under the age of 19. (Testimony and Exhibit 4).
- 3. The appellant's annual household income is \$92,170.00. (Testimony).
- 4. The appellant had MassHealth CommonHealth since May 15, 2025. (Testimony and Exhibit 4).
- 5. The appellant's three children were enrolled in Family Assistance since May 15, 2024. (Testimony and Exhibit 4).
- 6. In February 2024, MassHealth issued a qualifying event letter requiring that the appellant and her children enroll in her spouse's available employer-sponsored health insurance and submit proof of the same to MassHealth. (Testimony).
- 7. MassHealth did not receive proof of enrollment. (Testimony).
- 8. Through notices dated May 15, 2025, MassHealth notified the appellant and her children that they do not qualify for MassHealth benefits because she did not enroll in the required employer-sponsored health insurance and that their coverage would end on May 29, 2025. (Testimony and Exhibit 1).
- 9. Aid protection was put in place to protect the appellant's and her children's benefits. (Exhibit 4).
- 10. The appellant and her children were enrolled in her spouse's employer-sponsored health insurance since May 17, 2024. (Testimony and Exhibit 5).

Analysis and Conclusions of Law

The MassHealth agency 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. See 130 CMR 503.007. Every applicant and member must obtain and maintain available health insurance in accordance with 130 CMR 505.000. See 130 CMR 503.007(A).

Failure to do so may result in loss or denial of eligibility unless the applicant or member is (1) receiving MassHealth Standard or MassHealth CommonHealth; and (2) younger than 21 years of age or pregnant. <u>Id.</u> The MassHealth agency does not pay for any health care and related services that are available (1) through the member's health insurance, if any; or (2) at no cost to the member including, but not limited to, any such services that are available through any agency of the local, state, or federal government, or any entity legally obligated to provide those services.

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See 130 CMR 503.007(B).

Pursuant to 130 CMR 505.004(A), persons eligible for MassHealth CommonHealth which provides coverage to disabled adults between 21 through 64 years of age must use potential health insurance benefits in accordance with 130 CMR 503.007. See 130 CMR 505.004(J).

Accordingly, MassHealth may conduct an investigation for individuals who are eligible for MassHealth CommonHealth in the following manner:

- (1) MassHealth may perform an investigation to determine if individuals receiving MassHealth CommonHealth
 - (a) have health insurance that MassHealth may help pay for; or
 - (b) have access to employer-sponsored health insurance in which MassHealth wants the individual to enroll and for which MassHealth will help pay.
- (2) The individual receives MassHealth CommonHealth while MassHealth investigates the insurance.
 - (a) <u>Investigations for Individuals Who Are Enrolled in Health Insurance.</u>
 - 1. If MassHealth determines that the health insurance that the individual is enrolled in meets the criteria at 130 CMR 506.012: Premium Assistance Payments, the individual is notified in writing that MassHealth will provide MassHealth CommonHealth Premium Assistance as described at 130 CMR 506.012: Premium Assistance Payments.
 - 2. If MassHealth determines that the health insurance that the individual is enrolled in does not meet the criteria at 130 CMR 506.012: Premium Assistance Payments, the individual continues to be eligible for MassHealth CommonHealth.
 - (b) <u>Investigations for Individuals Who Have Potential Access to Employer-sponsored</u> Health Insurance.
 - 1. If MassHealth determines that the individual has access to employer-sponsored health insurance, the employer is contributing at least 50% of the premium cost, and the insurance meets all other criteria described in 130 CMR 506.012: Premium Assistance Payments, the individual is notified in writing that they must enroll in this employer-sponsored coverage. MassHealth allows the individual up to 60 days to enroll in this coverage. Once enrolled in this health insurance plan, MassHealth provides premium assistance payments as described in 130 CMR 506.012: Premium Assistance Payments. Failure to enroll in the employer-sponsored health insurance plan at the request of MassHealth will result in the loss or denial of eligibility for all individuals unless the individual is younger than 19 years old, the individual is 19 or 20 years old, and has household income less than or equal to 150% of the federal poverty level, or is pregnant.
 - 2. If MassHealth determines the individual does not have access to employersponsored health insurance, the individual continues to be eligible for MassHealth CommonHealth.

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See 130 CMR 505.004(K).

Pursuant to 130 CMR 505.005(A), children younger than 19 years old who are eligible for MassHealth Family Assistance must use potential health insurance benefits in accordance with 130 CMR 503.007. See 130 CMR 505.005(B)(2).

Accordingly, MassHealth may perform an investigation for individuals potentially eligible for MassHealth Family Assistance in the following manner:

- ...(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.
 - 1. Investigations for Individuals Who Are Enrolled in Health Insurance.
 - a. If MassHealth determines that the health insurance the individual is enrolled in meets the criteria at 130 CMR 506.012: Premium Assistance Payments, the individual is notified in writing that MassHealth will provide MassHealth Family Assistance Premium Assistance Payments as described at 130 CMR 450.105(G)(1): Premium Assistance and 130 CMR 506.012: Premium Assistance Payments.
 - b. If MassHealth determines that the health insurance the individual is enrolled in does not meet the criteria at 130 CMR 506.012: Premium Assistance Payments, the individual continues to be eligible for MassHealth Family Assistance.
 - 2. <u>Investigations for Individuals Who Have Potential Access to Employer-sponsored Health Insurance (ESI).</u>
 - a. If MassHealth determines the individual has access to employer-sponsored health insurance, the employer is contributing at least 50% of the premium cost, 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: Premium Assistance Payments. 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: Premium Assistance Payments. Failure to enroll in the employer-sponsored health insurance plan at the request of MassHealth will result in the loss or denial of eligibility.
 - b. If MassHealth determines the individual does not have access to employer sponsored health insurance, the individual continues to be eligible for MassHealth Family Assistance.

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See 130 CMR 505.005(B)(2).

In this case, there is no dispute that the appellant is a disabled adult between the ages of 21 and 65 who has available employer-sponsored health insurance through her spouse for both her and her children who are younger than 19 years of age. See 130 CMR 505.004(K)(1); 130 CMR 505.005(B)(2).

The appellant's spouse testified, and the PAU representative confirmed that the appellant and her family are all enrolled in employer-sponsored health insurance. See 130 CMR 503.007(A)(every applicant and member must obtain and maintain available health insurance in accordance with 130 CMR 505.000). Additionally, the appellant provided proof of her family's enrollment in the employer-sponsored health insurance by submitting a copy of an ID card listing the names of all five members of her household. See Exhibit 5. As such, a hearing officer may not exclude evidence at the hearing for the reason that it had not been previously submitted to the acting entity, provided that the hearing officer may permit the acting entity representative reasonable time to respond to newly submitted evidence. The effective date of any adjustments to the appellant's eligibility status is the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted. See 130 CMR 610.071(A)(2).

At the time of the hearing, all parties agreed that the appellant and her family were enrolled in employer-sponsored health insurance. See <u>Craven v. State Ethics Comm'n</u>, 390 Mass. 191, 200 (1983)("[p]roof by a preponderance of the evidence is the standard generally applicable to administrative proceedings"). Accordingly, I find that MassHealth has erred in its determination that the appellant and her three children do not qualify for MassHealth benefits.

For the foregoing reasons, this appeal is APPROVED.

Order for MassHealth

Redetermine eligibility for the appellant and her three children consistent with this decision and issue a new determination notice regarding the effective date of the premium assistance payments.²

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

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² Any subsequent notices will carry their own appeal rights.

address on the first page of this decision.

Sharon Dehmand, Esq. Hearing Officer Board of Hearings

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

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