

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2508406
<b>Decision Date:</b>	8/26/2025	<b>Hearing Date:</b>	07/02/2025
<b>Hearing Officer:</b>	Kimberly Scanlon		

**Appearance for Appellant:**  
Pro se

**Appearances for MassHealth:**  
Sherianne Paiva, Taunton MEC  
Odilia Ruiz-Rocha, PAU



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility; Under 65; Premium Assistance
<b>Decision Date:</b>	8/26/2025	<b>Hearing Date:</b>	07/02/2025
<b>MassHealth's Reps.:</b>	Sherrienne Paiva; Odilia Ruiz-Rocha	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Taunton MassHealth Enrollment Center Room 1 (Remote)	<b>Aid Pending:</b>	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 April 2, 2025, MassHealth notified the appellant that she has health insurance available through her job that meets MassHealth Premium Assistance rules. The notice informs the appellant that she must enroll her two minor children in this insurance by June 1, 2025 or her benefits may end. (Exhibit 1). The appellant filed a timely appeal of this notice on or about May 28, 2025. (Exhibit 2). The scope of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth notified the appellant if she did not enroll her children in her employer-sponsored health insurance by June 1, 2025, her benefits may end.

### Issue

The appeal issue is whether MassHealth was correct in determining that the appellant must enroll in her children in her employer-sponsored health insurance.

## **Summary of Evidence**

MassHealth was represented at the hearing by an eligibility representative and a representative from the Premium Assistance Unit (PAU); both parties participated by telephone. The record establishes the following: The appellant is an adult female who resides with her two minor children in a household of 3. The appellant is a tax-filer; her countable monthly income from employment totals \$3,250.50, which is equal to 141.36% of the federal poverty level for her family size. The appellant is eligible for and currently receives health insurance through the Massachusetts Health Connector. The appellant's two minor children receive MassHealth Standard benefits. On April 2, 2025, MassHealth sent the appellant a notice it refers to as a qualifying event letter. That notice informed the appellant that she has health insurance available through her job that meets MassHealth Premium Assistance rules. The notice states that the appellant must enroll her two minor children in this insurance (Health New England) by June 1, 2025, or her MassHealth benefits may end. (Exhibit 1).

The PAU representative explained that because the appellant has employer-sponsored health insurance (ESI) that meets MassHealth Premium Assistance rules, she is required to enroll her minor children in this health insurance plan. She confirmed that PAU would cover the entire cost of the premium. The ESI would be the children's primary insurer, and MassHealth would be the secondary insurer (and would cover all deductibles and co-pays).

The appellant appeared at the hearing by telephone and explained that her ESI includes high deductibles and co-payments, which are too expensive for her. Because she needs to enroll herself in order to enroll her children, she would then be subject to the high deductible and co-payment costs.

The PAU representative responded and stated that the PAU reimburses members the premiums costs in advance; she will therefore not have to front any money associated with the ESI premiums. She will, however, be responsible for any other Health New England costs associated with *her* coverage, as she does not have MassHealth as a secondary insurer. The appellant stated that if she were to enroll in the ESI, she would be subject to paying significant out-of-pocket costs to take care of her own health issues.

## **Findings of Fact**

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

1. The appellant is an adult female who resides with her two minor children.
2. The appellant's countable monthly income is equal to 141.36% of the federal poverty level for her family size.
3. The appellant receives health insurance through the Massachusetts Health Connector.
4. The appellant's two minor children receive MassHealth Standard benefits.
5. On April 2, 2025, MassHealth notified the appellant that she has health insurance available through her job that meets MassHealth Premium Assistance rules. The notice informs the appellant that she must enroll her two minor children in this insurance by June 1, 2025 or her benefits may end.
6. The appellant timely appealed this MassHealth action.

## **Analysis and Conclusions of Law**

The issue in this appeal is the MassHealth determination, through its PAU, that the appellant must enroll her children in her ESI because it meets MassHealth Premium Assistance rules. Although the appellant would not incur any additional health insurance costs related to the children's coverage, she does not want to enroll in ESI due to the extra costs that will be associated with her own coverage. Specifically, because she does not have MassHealth coverage, she will be required to meet a high deductible and pay co-payments that far exceed the costs associated with her current coverage through the Health Connector.

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. Pursuant to 130 CMR 503.007(A), every applicant and member must obtain and maintain available health insurance, and failure to do so may result in loss or denial of eligibility.<sup>1</sup> The MassHealth agency may enroll MassHealth members in available employer-sponsored health insurance if that insurance meets the criteria for payment of premium assistance under 130 CMR 506.012(B): *Criteria* (130 CMR 503.007(C)).

In this case, MassHealth has determined that the appellant's children have access to health insurance that meets the criteria at 130 CMR 506.012(B). Under 130 CMR 506.012(B), MassHealth may provide a premium assistance payment to an eligible member when all the following criteria are met:

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<sup>1</sup> This rule does not apply to members receiving MassHealth Standard or CommonHealth who are younger than 21 years of age or pregnant.

- (1) The health insurance coverage meets the Basic Benefit Level (BBL) as defined in 130 CMR 501.001: *Definition of Terms*. Instruments including, but not limited to, Health Reimbursement Arrangements, Flexible Spending Arrangements, as described in IRS Pub. 969, or Health Savings Accounts, as described at IRC § 223(c)(2), cannot be used to reduce the health insurance deductible in order to meet the basic-benefit level requirement.
- (2) The health insurance policy holder is either
  - (a) in the [family group]; or
  - (b) resides with the individual who is eligible for the premium assistance benefit and is related to the individual by blood, adoption, or marriage.
- (3) At least one person covered by the health insurance policy is eligible for MassHealth benefits as described in 130 CMR 506.012(A) and the health insurance policy is a policy that meets the criteria of the MassHealth coverage type for premium assistance benefits as described in 130 CMR 506.012(C).

Here, MassHealth's PAU has determined that all the above criteria have been met. This determination is supported by the record. The appellant's minor children are eligible for and currently receive MassHealth Standard benefits, a coverage type for which premium assistance payments are available (130 CMR 506.012(A)). Further, the appellant's available health insurance, (ESI), is the type of private health insurance for which MassHealth may provide premium assistance (130 CMR 506.012(C)). The appellant's dispute appears to be related to PAU's determination that the health insurance meets the basic benefit level. MassHealth defines basic benefit level at 130 CMR 501.001, as follows:

- (1) benefits provided under a health insurance plan that include a broad range of medical benefits as defined in the minimum creditable coverage core services requirements in 956 CMR 5.03(1)(a); provided that the annual deductible and the annual maximum out-of-pocket costs under that plan do not exceed the maximum amounts the Massachusetts Health Connector sets for deductibles and out-of-pocket costs in order for a plan to be considered minimum creditable coverage, as set forth at 956 CMR 5.03(2)(b)2 and 3, and 956 CMR 5.03(2)(c), respectively, and as may be illustrated in administrative bulletins published by the Massachusetts Health Connector, and as are in effect on the first day coverage under that plan begins.
- (2) Exceptions.
  - (a) For the avoidance of doubt, instruments including but not limited to Health Reimbursement Arrangements, Flexible Spending Arrangements, as

described in IRS Pub. 969, or Health Savings Accounts, as described at IRC § 223(c)(2), cannot be used to reduce the health insurance deductible in order to meet the basic-benefit level requirement.

(b) The MassHealth agency reserves the right to set its own annual deductible and maximum out-of-pocket limits. If the MassHealth agency deems it appropriate to set its own annual deductible and maximum out-of-pocket limits, a sub-regulatory bulletin will be issued.

The appellant has not demonstrated that her ESI (Health New England) fails to meet the basic benefit level definition described above. Specifically, there is no evidence that the annual deductible and the annual maximum out-of-pocket costs under that plan exceed the maximum amounts the Massachusetts Health Connector sets for deductibles and out-of-pocket costs.

The appellant has not demonstrated that she is excused from enrolling in her children in her ESI, and the appeal is denied.<sup>2</sup>

## **Order for MassHealth**

None.

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<sup>2</sup> As noted above, per 130 CMR 503.007(A), the appellant's failure to enroll in ESI will not result in a loss of coverage for the minor children. It may, however, result in a loss of the appellant's coverage through the Health Connector.

## 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.

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Kimberly Scanlon  
Hearing Officer  
Board of Hearings

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

MassHealth Premium Assistance Unit