

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied in Part; Remanded in Part	Appeal Number:	2511444
Decision Date:	10/28/2025	Hearing Date:	09/09/2025
Hearing Officer:	Mariah Burns		

Appearance for Appellant:

Pro se


Appearances for MassHealth:

[Redacted], Charlestown MassHealth
Enrollment Center; [Redacted], 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:	Denied in Part; Remanded in Part	Issue:	Community Eligibility; Under 65; Employer- Sponsored Insurance
Decision Date:	10/28/2025	Hearing Date:	09/09/2025
MassHealth's Reps.:		Appellant's Rep.:	Pro se
Hearing Location:	Charlestown	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 June 6, 2025, MassHealth terminated the appellant's MassHealth Standard benefits for failure to enroll in her employer-sponsored insurance. *See* 130 CMR 503.007(A) and Exhibit 1. The appellant filed this appeal in a timely manner on August 5, 2025. *See* 130 CMR 610.015(B) and Exhibit 2. Termination of assistance is valid grounds for appeal. *See* 130 CMR 610.032).

Action Taken by MassHealth

MassHealth terminated the appellant's MassHealth Standard benefits.

Issue

The appeal issue is whether MassHealth properly terminated the appellant's MassHealth Standard benefits for failure to enroll in her employer-sponsored insurance.

Summary of Evidence

The appellant is an adult under the age of 65 who resides in a household with her minor children. MassHealth was represented at the hearing by a worker from the Charlestown MassHealth Enrollment Center and a worker from the Premium Assistance Department. The following is a summary of the evidence and testimony submitted at hearing.

On April 2, 2025, MassHealth sent a letter to the appellant informing her of her obligation to enroll in her employer-sponsored insurance by June 1, 2025, or risk termination of her MassHealth benefits. On June 6, 2025, after receiving no information that the appellant enrolled in that insurance as required, MassHealth terminated the appellant's MassHealth Standard benefits with an effective date of June 20, 2025. At the hearing, the MassHealth Premium Assistance representative reported that the appellant's employer offers five different insurance plans that qualify for the Premium Assistance program that will allow MassHealth to cover 100% of the appellant's premium for her employer-sponsored insurance. However, the Premium Assistance representative stated that the appellant cannot be enrolled in the Premium Assistance program until she enrolls in the employer-sponsored insurance and her MassHealth Standard benefits are reinstated.¹

The appellant agreed that she received a letter from MassHealth sometime in April 2025, but she was unsure what it was for. She reported that premiums for the employer-sponsored insurance are too high for her to afford. When the MassHealth representatives explained that the Premium Assistance program will reimburse her for the cost of that premium, the appeal record was kept open until October 10, 2025, for the appellant to enroll in one of the employer-sponsored insurance plans that qualify for Premium Assistance. On October 15, 2025, the MassHealth representatives reported that the appellant did not enroll in the employer-sponsored insurance because she stated that it was too expensive, and therefore the appellant's MassHealth Standard benefits were unable to be reinstated.

Findings of Fact

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

1. The appellant is an adult under the age of 65 who, prior to the notice on appeal, received MassHealth Standard benefits. Exhibit 4, Testimony.
2. On April 2, 2025, MassHealth sent the appellant a letter instructing her to enroll in her employer-sponsored insurance by June 1, 2025, or risk termination of her benefits. Testimony.

¹ The MassHealth representative did not offer any testimony about the MassHealth coverage of the appellant's minor children.

3. On June 6, 2025, when MassHealth did not receive information that the appellant enrolled in her employer-sponsored insurance, the appellant's MassHealth Standard benefits were terminated with an effective date of June 20, 2025. Exhibit 1.
4. The appellant filed a timely request for fair hearing on August 5, 2025. Exhibit 2.
5. As of the date of this decision, the appellant has access to employer-sponsored insurance in which she has not enrolled. Testimony, Exhibit 5 at 1.

Analysis and Conclusions of Law

For any eligible members, 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. Members must “obtain and maintain available health insurance in accordance with 130 CMR 505.000.” *Id.* at 503.007(A). Failure to enroll and maintain that available health insurance “may result in loss or denial of eligibility unless the applicant or member is...receiving MassHealth Standard or MassHealth CommonHealth; and...younger than 21 years of age or pregnant.” *Id.* MassHealth Standard members must comply with the following rules regarding use of potential health insurance benefits:

Applicants and members must use potential health insurance benefits in accordance with 130 CMR 503.007: Potential Sources of Health Care, and must enroll in health insurance, including Medicare, if available at no greater cost to the applicant or member than they would pay without access to health insurance, or if purchased by MassHealth in accordance with 130 CMR 505.002(O) or 130 CMR 506.012: Premium Assistance Payments. Members must access other health insurance benefits and must show their private health insurance card and their MassHealth card to providers at the time services are provided.

130 CMR 505.002(M).

In this case, MassHealth determined, and the appellant agreed, that the appellant has access to employer-sponsored insurance in which she is not currently enrolled. Because the appellant is older than 21 and there is no evidence that she is currently pregnant, and because MassHealth reported that the appellant has plans available to her that qualify for 100% payment of the premium by the MassHealth Premium Assistance program, the appellant was required to enroll in that employer-sponsored insurance, and her benefits were properly terminated by the June 6, 2025 notice. However, the record is unclear as it relates to her children; specifically, whether they are under the age of 21, and whether their MassHealth Standard was also terminated. As such, MassHealth should review the cases of the appellant's children to ensure that their benefits were

not improperly terminated, consistent with the requirements of 130 CMR 503.007(A).

For the foregoing reasons, the appeal is hereby denied in part and remanded in part.

Order for MassHealth

Review the appellant's case to confirm that her children's MassHealth Standard benefits are not terminated unless they are over the age of 21, as allowed by 130 CMR 503.007(A)(2). If the children are under 21 and their MassHealth Standard was terminated by the appellant's failure to enroll in employer-sponsored insurance, reinstate the children's MassHealth Standard benefits retroactive to the date of termination.

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.

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 address on the first page of this decision.

Mariah Burns
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Thelma Lizano, Appeals Coordinator, Charlestown MassHealth Enrollment Center

cc: [REDACTED] MassHealth Premium Assistance Unit