

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2512031
Decision Date:	1/9/2026	Hearing Date:	11/05/2025
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Katelyn Costelle (MEC) with 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:	Employer-Sponsored Health Insurance Enrollment
Decision Date:	1/9/2026	Hearing Date:	11/05/2025
MassHealth's Rep.:	Katelyn Costello; Roxana Noriega	Appellant's Rep.:	Pro se
Hearing Location:	Quincy		

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 July 10, 2025, MassHealth informed Appellant that members of her household had to enroll in employer-sponsored health insurance or risk losing their MassHealth benefits (Exhibit A). Appellant filed this appeal in a timely manner on August 14, 2025 (see 130 CMR 610.015(B) and Exhibit A). Eligibility determinations involving a change of benefits constitute an appealable action. (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth Informed Appellant that members of her household had to enroll in employer-sponsored health insurance or risk losing their MassHealth benefits.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts in determining that members of Appellant's household had to enroll in employer-sponsored health insurance or risk losing their MassHealth benefits.

Summary of Evidence

Both parties appeared by telephone.

Masshealth was represented by a worker from the Springfield MEC and a member of the Premium Assistance Unit. The MassHealth representatives testified that the agency issued a notice to Appellant on July 10, 2025 informing her that her household members must enroll with the employer-sponsored health insurance that is available to them by September 8, 2025 or their MassHealth benefits may end. It was further explained that Appellant's household is eligible for Premium Assistance which would cover 100% of the premiums for her employer-sponsored health insurance. As of the date of hearing, none of the identified household members were enrolled in the employer-sponsored insurance.

The MassHealth representative also testified that the household size is 4 with a gross countable household income equaling 144.58% of the Federal Poverty Level.

Appellant appeared on her own behalf. She did not dispute the MassHealth representatives' testimony. Appellant testified about her desire to remain on MassHealth Standard because it was working well for the family. Appellant expressed concerns about having to enroll with one of her employer's health plans because of potential coverage and cost issues.

Findings of Fact

By a preponderance of the evidence, this record supports the following findings:

1. Appellant has a household size of 4 with a gross countable household income equaling 144.58% of the Federal Poverty Level.
2. Appellant is employed and has employer-sponsored health insurance available to her through her job.
3. MassHealth determined that plans offered by Appellant's employer meet MassHealth coverage and cost criteria.
4. MassHealth issued a notice to Appellant on July 10, 2025 informing her that members of her household must enroll with the employer-sponsored health insurance that is available to them by September 8, 2025 or their MassHealth benefits may end.
5. Appellant's household is also eligible for Premium Assistance which would cover 100% of the premiums for her employer-sponsored health insurance.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)).

On this record, Appellant has not met her burden of demonstrating that the agency's action of requiring her household members to enroll in qualified employer-sponsored health insurance is in any way invalid.

MassHealth regulation 130 CMR 505.002 (M) (emphasis supplied) states:

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.

There has been no showing by Appellant that the employer plans available to her do not meet the minimum benefit level or that enrolling in them will be more costly to her. This record shows that MassHealth Premium Assistance will cover 100% of the premiums.

On this record, there is no basis in fact or law to overturn MassHealth's action. Accordingly, 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

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

Premium Assistance