

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



|                         |                   |                       |            |
|-------------------------|-------------------|-----------------------|------------|
| <b>Appeal Decision:</b> | Denied            | <b>Appeal Number:</b> | 2512533    |
| <b>Decision Date:</b>   | 12/17/2025        | <b>Hearing Date:</b>  | 11/06/2025 |
| <b>Hearing Officer:</b> | Christopher Jones |                       |            |

**Appearance for Appellant:**



**Appearances for MassHealth:**

Michael Richelson – Enrollment Center  
Gladys Pacheco – Premium Assistance  
Crystal Jackson – 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

|                            |  |                          |                    |
|----------------------------|--|--------------------------|--------------------|
| <b>Appeal Decision:</b>    | Denied   | <b>Issue:</b>            | Premium Assistance |
| <b>Decision Date:</b>      | 12/17/2025                                       | <b>Hearing Date:</b>     | 11/06/2025         |
| <b>MassHealth's Reps.:</b> | Michael Richelson;<br>Gladys Pacheco;<br>Crystal | <b>Appellant's Rep.:</b> | Father/Guardian    |
| <b>Hearing Location:</b>   | Virtual - Teams                                  | <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 July 2, 2025, MassHealth terminated the appellant's premium assistance payments because she became eligible for Medicare. (Exhibit 3; 130 CMR 506.012.) The appellant's father filed this appeal in a timely manner on August 27, 2025. (Exhibit 1; 130 CMR 610.015(B).) The Board of Hearings initially dismissed the appeal because the MassHealth notice and authority for filing the appeal were not provided. (Exhibit 2; 130 CMR 610.034 - .035.) Another hearing request was submitted with a copy of the notice and guardianship appointment.<sup>1</sup> (Exhibits 3 – 5.) Termination of assistance is valid grounds for appeal. (130 CMR 610.032.)

## Action Taken by MassHealth

MassHealth terminated the appellant's premium assistance payments after she renewed her eligibility through the traditional benefits department.

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<sup>1</sup> This matter was then initially scheduled for October 9, 2025, and it was rescheduled at the appellant's request. (Exhibits 6 – 7.)

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 506.012, in determining that the appellant is ineligible for MassHealth premium assistance payments because she is eligible for Medicare.

## Summary of Evidence

A MassHealth enrollment center (MEC) representative appeared at the hearing from the traditional, community-based benefits department.<sup>2</sup> He testified that the appellant completed an Application for Health Coverage for Seniors and People Needing Long-Term-Care Services (SACA) on or around June 3, 2025. Around the same time, an application for the Moving Forward Plan (MFP) Waiver program was submitted. The appellant is between the ages of 21 and 65, and she receives gross monthly Social Security benefits in the amount of \$1,758. On or around June 24, 2025, the appellant was approved for MassHealth Standard, which included a Medicare Buy-in benefit. The Buy-in benefit is also known as the Medicare Savings Program (MSP).

The appellant's father testified that he had recently started receiving Social Security, which made the appellant eligible for an increased, disabled adult child Social Security benefit. The appellant's father suspected that this increased Social Security benefit had affected her eligibility for premium assistance payments, and he wanted to confirm how. The MEC representative testified that the appellant had been eligible for MassHealth as a recipient of Supplemental Security Income (SSI) benefits, but that eligibility had been provided through the under-65 department, and no one was available from that department to testify with more detail.

MassHealth's premium assistance representative confirmed that the appellant had been previously covered by MassHealth Standard through the under-65 department. The premium assistance testified that premium assistance benefits are not available for individuals covered by a "traditional" or over-65 benefit.<sup>3</sup> It was further noted that the Medicare Buy-in benefit replaces the premium assistance benefit, as it is paying for a 3rd-party insurance benefit. MassHealth's premium assistance representatives noted that 130 CMR 506.012(A) lists the benefit coverage types that allow for premium assistance payments to cover employer-sponsored insurance benefits. MassHealth's premium assistance representative testified that they did not see the appellant as being covered by Medicare prior to the summer of 2025.

It was noted that the appellant's income would likely make her eligible for a benefit that included a MSP benefit through the under-65 department, which would preclude the appellant from the

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<sup>2</sup> This department is often referred to as the "over-65" department.

<sup>3</sup> The premium assistance representative testified that the appellant had been covered by the aid category of "07," and now she is covered by category "TR."

premium assistance benefit. The premium assistance representative also confirmed that the appellant's father was welcome to disenroll the appellant from his employer-sponsored insurance, which might result in his monthly insurance premium being reduced. The appellant's father asked for a decision to document the legal basis for MassHealth's decision so that he could compare alternatives moving forward to see if there was an avenue for regaining the premium assistance payments.

## **Findings of Fact**

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

- 1) The appellant is under the age of 65. Historically, she was covered by MassHealth as a recipient of SSI benefits. (Testimony by MEC representative.)
- 2) The appellant's father started receiving Social Security benefits, which triggered the appellant's eligibility for disabled adult child benefits through Social Security. The appellant currently receives gross Social Security benefits in the amount of \$1,758. (Testimony by MEC representative; testimony by the appellant's father.)
- 3) A SACA was submitted on the appellant's behalf on or around June 3, 2025. An application for the MFP Waiver was also submitted around this time. (Testimony by MEC representative.)
- 4) On June 24, 2025, the appellant was approved for MassHealth Standard with MSP coverage through the traditional eligibility department. (Testimony by MEC representative.)
- 5) Based upon this eligibility, MassHealth terminated the appellant's premium assistance benefits. (Testimony by premium assistance representative.)
- 6) The appellant is currently covered by Medicare. MassHealth was not aware of any Medicare eligibility prior June 2025. (Testimony by premium assistance representative.)

## **Analysis and Conclusions of Law**

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. One of the major dividing lines for eligibility is the age of 65. Individuals aged 65 and older are generally governed by the regulations at 130 CMR 515.000-520.000, and those under 65 are typically determined by the regulations at 130 CMR 501.000-508.000.

MassHealth members must also "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.*” (130 CMR 505.002(M); 505.004(J).) Premium assistance payments are only available for certain coverage types, (130 CMR 506.012(A)),<sup>4</sup> but “MassHealth members who have Medicare coverage” are “not eligible for premium assistance payments ... .” They may be eligible for Medicare Savings Program benefits. (130 CMR 506.012(C)(5).)

Ultimately, 130 CMR 506.012(C)(5) is the regulation that prohibits the appellant’s continuing eligibility for premium assistance payments. Even if the appellant were covered by MassHealth Standard or CommonHealth through 130 CMR 505.002 or 505.004, she would still be prohibited from premium assistance benefits as long as she was also covered by Medicare.<sup>5</sup>

As a disabled adult child who converted from being an SSI beneficiary, the appellant is eligible for MassHealth Standard through 130 CMR 519.004. The MEC representative also indicated that the appellant could be eligible through the MFP Waiver program, which allows MassHealth Standard coverage for people with income up to 300% of the federal benefits rate, but requires clinical eligibility to qualify.<sup>6</sup> (See 130 CMR 519.007(H).) These benefits provides Standard coverage and pays the member’s Medicare premiums through MSP coverage (see 130 CMR 519.010 - .011), but they are not eligible for premium assistance payments under 130 CMR 506.012(A). The Kaileigh Mulligan Program, the only traditional benefit that covers premium assistance, is only available for “severely disabled children younger than 18 years old.” (130 CMR 519.007(A).)

Because the appellant has MassHealth Standard through 130 CMR 519.000, et seq., and because the appellant is covered by Medicare, MassHealth did not err in terminating the appellant’s premium assistance payments. Therefore, this appeal is DENIED.

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<sup>4</sup> Premium assistance payments are available for individuals covered by “MassHealth Standard, as described in 130 CMR 505.002,” CommonHealth, CarePlus, or Family Assistance, which are all under-65 benefits. The only traditional benefit that includes premium assistance coverage is “MassHealth Standard for Kaileigh Mulligan, as described in 130 CMR 519.007.” (130 CMR 506.012(A).)

<sup>5</sup> “Persons who receive Supplemental Security Income (SSI) benefits from the Social Security Administration (SSA) are eligible for MassHealth Standard.” (130 CMR 505.002(A)(2).) Otherwise, a disabled adult 21 through 64 years old would be eligible for Standard benefits with countable income below 133% of the federal poverty level. (130 CMR 505.002(E).) Disabled adults are eligible for CommonHealth benefits with income over 133% of the federal poverty level. (130 CMR 505.004.) A monthly premium is assessed for CommonHealth based upon the income of the member. (See 130 CMR 506.011(B)(2)(b).)

<sup>6</sup> The federal benefits rate in 2025 is \$967; 300% is \$2,901. (<https://www.medicaid.gov/federal-policy-guidance/downloads/cib05282025.pdf> (last visited Dec. 16, 2025).)

## 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.

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Christopher Jones  
Hearing Officer  
Board of Hearings

cc:

[REDACTED]

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

MassHealth Representative: Premium Assistance Unit