

## **Introduction**

Good Afternoon. My name is Lynn Finstein and I am the Senior Manager of MassHealth Eligibility Policy Implementation at the Executive Office of Health and Human Services (EOHHS). I am here to present staff testimony on proposed amendments to regulation 130 CMR 506.000: MassHealth Financial Requirements. These amendments were proposed on July 3, 2025, to become effective no sooner than October 2025.

## **Background**

MassHealth regulation 130 CMR 506.000 describes the rules governing financial eligibility for MassHealth's Modified Adjusted Gross Income—or "MAGI"—population. Financial eligibility for MassHealth is determined based on an individual's household composition and countable income, deductibles, and calculation of premiums and copayments for all coverage types. It also includes regulations for the Premium Assistance program.

## **Proposed Amendments**

MassHealth is proposing the following amendments to 130 CMR 506:

- **Premium Assistance Reimbursement:** In compliance with federal requirements, MassHealth does not recover for Premium Assistance overpayments.
- **State Intercept:** In compliance with federal requirements, MassHealth does not utilize state intercept to recoup unpaid premiums.
- **Premium Billing:** To comply with federal requirements, MassHealth will no longer impose a lock-out period for former members with an unpaid premium balance. MassHealth will also remove premium billing tables and required member contribution tables from the regulations. MassHealth will update and publish these tables online annually, based on changes to the Federal Poverty Level.
- **Premium Billing Hardship:** MassHealth is eliminating the provision found at 130 CMR 506.011(G)(1)(e) related to CommonHealth members.

**Testimony on Amendments to 130 CMR 506.00, effective no sooner than October 2025**  
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- **CMSP Premiums:** Amendments eliminate reference to premiums for the Children's Medical Security Plan (CMSP) under 300% FPL, in alignment with the FY25 Budget.
- **CommonHealth:** Per our 1115 Waiver authority, CommonHealth members younger than 65 are no longer required to work or meet a one-time deductible.
- **Severability:** To align with other MassHealth regulations (rate regulations under 101 CMR), we are adding a severability clause to the end of the regulation.
- **Regulatory Authority:** We are broadening the regulatory authority citation to M.G.L. c. 118E instead of citing specific sections within c. 118E to ensure that relevant sections not currently cited, such as Sec. 9 (Eligibility), are included.

**Fiscal Impact**

MassHealth expects minimal fiscal impact. This concludes my testimony. Thank you.