

STATE OF VERMONT
HUMAN SERVICES BOARD

In re) Fair Hearing No. 15,597
)
Appeal of)
)

INTRODUCTION

The petitioner appeals the decision by the Department of Social Welfare terminating her health benefits under the Vermont Health Access Plan (VHAP) because of her failure to pay the patient program fee of \$15 for the period July through December, 1998. The issue is whether the regulations require payment of this fee. The following facts are not in dispute.

FINDINGS OF FACT

1. The petitioner lives with her minor daughter. In May, 1998, the petitioner was receiving unemployment compensation of \$176 a week.

2. Based on this income the petitioner was found eligible for VHAP coverage effective May 14, 1998.¹ Also based on her income she was found liable for a \$15 "program fee" for this coverage. In late May or June, 1998, the Department sent her a bill for a VHAP "premium" of \$15.

3. When the petitioner didn't pay this bill the Department sent her a "reminder notice" on July 22, 1998, stating that if she did not pay her premium by August 15,

¹The petitioner's daughter was found eligible for Medicaid coverage under the Dr. Dynasaur program.

1998, her coverage would end on August 31, 1998. The petitioner filed an appeal of this notice on August 13, 1998.

4. The petitioner does not dispute that the Department correctly calculated her income and the amount of her program fee based on her income at that time (see infra). However, as of the date of the hearing, September 11, 1998, she reported that her unemployment benefits had recently run out. She maintains that even when she was receiving the unemployment benefits she simply could not afford to pay the fee and should not have been required to do so. At the hearing the Department and the hearing officer advised the petitioner to immediately reapply for medical coverage based on her recent change in circumstances.

ORDER

The Department's decision is affirmed.

REASONS

Except as specifically provided for (self-employed) business expenses, a standard (\$90 per month) employment expense deduction, and certain child care expenses--none of which applies to the petitioner's situation--the full amount of unemployment compensation is considered as "countable income" for purposes of determining VHAP eligibility.

W.A.M. 9 4001.81.

Section 4001.91 of the VHAP regulations includes the following:

An individual meets this requirement when he/she has paid a program fee, if required. The required fee (nonrefundable) for each individual who is age 18 or older and not pregnant is as follows:

<u>Income</u>	<u>Fee for Six-month Period</u>
Less than 50% FPL	None
50% but less than 75% FPL	\$10.00
75% but less than 100% FPL	\$15.00
100% but less than 150% FPL	\$20.00

An individual who fails to pay a required fee within 30 days of the initial determination of eligibility under all other eligibility criteria (4001.1 - 4001.8) will have his/her application denied. An individual who is dropped from the program before the end of the six-month period and reapplies shall have a new program fee requirement. . . .

There is no provision in this regulation, or elsewhere, that allows an applicant to have her living expenses taken into consideration in determining either her eligibility for VHAP or her liability for the VHAP program fee.

As noted above, the petitioner does not dispute that the Department correctly calculated her program fee at \$15 based on her income at that time. Given that her income has changed, the petitioner was urged to reapply for medical benefits. As of May, 1998, however, when the petitioner was receiving unemployment compensation, the Department's decision to charge the petitioner a \$15 program fee, and to terminate her coverage when she did not pay it, appears to have been consistent with the above regulation. Therefore,

the Board is required by law to affirm that decision. 3

V.S.A. § 3091(d) and Fair Hearing Rule No. 17.

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