

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2002323
Decision Date:	5/26/2023	Hearing Date:	03/18/2020
Hearing Officer:	Paul C. Moore		

Appearance for Appellant:

[Redacted], pro se (by telephone)

Appearance for MassHealth:

Elizabeth Nickoson, Taunton MassHealth
Enrollment Center (by telephone)

Spanish Interpreter:

Luis, number 226627 (ITI)



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Eligibility Review
Decision Date:	5/26/2023	Hearing Date:	03/18/2020
MassHealth Rep.:	Elizabeth Nickoson	Appellant Rep.:	Pro se
Hearing Location:	Board of Hearings (remote)	Aid Pending:	Yes

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapters 118E and 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

By a notice dated January 28, 2020, MassHealth notified the appellant that her MassHealth Standard coverage would end because she failed to timely complete an annual eligibility review form (Exh. 1). The appellant filed a timely appeal with the Board of Hearings (BOH) on February 11, 2020 (130 CMR 610.015; Ex. 2).¹ Termination of MassHealth assistance is valid grounds for appeal to the BOH (130 CMR 610.032).

Action Taken by MassHealth

MassHealth proposed to terminate the appellant's MassHealth eligibility because she did not timely complete and return an annual eligibility review form.

Issue

The issue on appeal is whether MassHealth correctly terminated the appellant's MassHealth coverage.

¹ The BOH granted "aid pending" in this matter pursuant to 130 CMR 610.036.

Summary of Evidence

A MassHealth representative from the Taunton MassHealth Enrollment Center testified by telephone that the appellant, who is under age 65 and has a minor child, was enrolled in MassHealth Standard. In November, 2019, MassHealth mailed an annual eligibility review form (“review form”) to the appellant. The appellant did not timely complete and submit the review form, so MassHealth sent her a notice on January 28, 2020 proposing to terminate her coverage effective February 11, 2020 (Exh. 1).²

The appellant filed a timely appeal with the BOH on February 11, 2020, and the BOH granted her “aid pending.”

The appellant testified through a Spanish interpreter that she did, in fact, complete and submit an eligibility review form about a month prior to the hearing, and faxed it to MassHealth. The MassHealth representative stated that MassHealth did not receive the review form. She offered to send the appellant a new review form, and gave the appellant a fax number to which to send the form.

The hearing officer agreed to keep the record open until April 2, 2020 for the appellant to complete and send in the review form to MassHealth and to the hearing officer.

Nothing was received.

As the appellant had MassHealth coverage effective March 18, 2020, the date of the national public emergency due to Covid-19, her coverage was maintained by MassHealth.³

Findings of Fact

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

1. The appellant is under age 65, was enrolled in MassHealth Standard, and lives in a household of two (Testimony).
2. In November, 2019, MassHealth mailed an annual eligibility review form (“review form”) to the appellant (*Id.*).

² The notice does not pertain to the MassHealth eligibility of the appellant’s minor child.

³ Pursuant to MassHealth Eligibility Operations Memo number 20-09, “MassHealth Response to Coronavirus Disease 2019 (COVID-19),” effective April 7, 2020, “**MassHealth will protect coverage for all individuals who have Medicaid coverage as of March 18, 2020**, and for all individuals newly approved for coverage during the COVID-19 outbreak national emergency, and through the end of the month in which such national emergency period ends. These members will not lose coverage or have a decrease in benefits during this time period” (emphasis added).

3. The appellant did not timely complete and submit the review form (*Id.*).
4. MassHealth sent her a notice on January 28, 2020 proposing to terminate her coverage effective February 11, 2020 (Exh. 1).
5. The appellant filed a timely appeal with the BOH on February 11, 2020 (Exh. 2).
6. The hearing officer held the record of this appeal open until April 2, 2020 for the appellant to complete and submit an eligibility review form to MassHealth (Exh. 4).
7. Nothing was received.
8. The appellant's coverage was maintained during the Covid-19 pandemic because she was enrolled in MassHealth Standard effective March 18, 2020 (MassHealth Eligibility Operations Memo number 20-09).
9. There is no evidence that MassHealth has reviewed the appellant's eligibility for coverage since January, 2020.

Analysis and Conclusions of Law

Pursuant to 130 CMR 501.010, "Responsibilities of Applicants and Members:"

(A) Responsibility to Cooperate. The applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility, and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining available health insurance. The MassHealth agency may request corroborative information necessary to maintain eligibility, including obtaining or maintaining available health insurance. **The applicant or member must supply such information within 30 days of the receipt of the agency's request. If the member does not cooperate, MassHealth benefits may be terminated.**

(Emphasis added)

Here, the appellant did not comply with MassHealth's 2019 information request required to renew her coverage. MassHealth planned to terminate her coverage. However, due to the Covid-19 public health emergency, the appellant's coverage has been maintained to date.

There is no evidence that MassHealth has reviewed the appellant's eligibility since January, 2020.

Pursuant to MassHealth Eligibility Operations Memo 23-11, "Ending Temporary Eligibility Policies Established during the Federal Public Health Emergency (COVID-19 Pandemic)" (effective April, 2023):

Beginning April 1, 2023, MassHealth will no longer maintain continuous coverage for members if they have been successfully renewed in the last 12-months.

As provided in the above eligibility operations memo, the appellant's continuous coverage must end on April 1, 2023.

This appeal is therefore DENIED.

Order for MassHealth

Send notice to the appellant terminating her MassHealth coverage effective April 1, 2023. Do not include appeal rights.

Send the appellant a new MassHealth application form.

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.

Paul C. Moore
Hearing Officer
Board of Hearings

cc: Justine Ferreira, Appeals Coordinator, Taunton MEC, 21 Spring Street, Suite 4, Taunton, MA 02780