

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2205574
Decision Date:	12/27/2022	Hearing Date:	11/30/2022
Hearing Officer:	Susan Burgess-Cox	Record Open to:	12/20/22

Appearance for Appellant:



Appearance for MassHealth:

Karen Ryan



*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:	Dismissed	Issue:	Eligibility
Decision Date:	12/27/2022	Hearing Date:	11/30/2022
MassHealth's Rep.:	Karen Ryan	Appellant's Rep.:	[REDACTED]
Hearing Location:	All Parties Appeared by Telephone	Aid Pending:	No

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. The issue on appeal involved denial of assistance due to a determination that the appellant did not provide MassHealth with information necessary to determine eligibility. (130 CMR 515.008; Exhibit 1). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

The record was held open to give the appellant the opportunity to provide additional evidence. (Exhibit 6; Exhibit 7). During the record open period, the appellant's representative withdrew the request for hearing. (Exhibit 8).

As the appellant's representative withdrew the request for hearing, this appeal is dismissed. (130 CMR 610.035(A)(2)).

Susan Burgess-Cox
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290

[REDACTED]