

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2206580
Decision Date:	10/6/2022	Hearing Date:	09/29/2022
Hearing Officer:	Christopher Jones		

Appearance for Appellant:
[Redacted] – Appeal Rep.

Appearance for MassHealth:
Fabienne Jeanniton – Tewksbury HCR



*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:	Approved	Issue:	Eligibility – Residency
Decision Date:	10/6/2022	Hearing Date:	09/29/2022
MassHealth’s Rep.:	Fabienne Jeanniton	Appellant’s Rep.:	
Hearing Location:	Remote	Aid Pending:	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 June 16, 2022, MassHealth terminated the appellant’s MassHealth Standard coverage because he was not a Massachusetts resident. (Exhibit 2; 130 CMR 503.002.) The appellant filed this appeal in a timely manner on September 1, 2022. (Exhibit 4; 130 CMR 610.015(B); EOM 22-10 (Aug. 2022).). Termination of assistance is valid grounds for appeal. (130 CMR 610.032.)

Action Taken by MassHealth

MassHealth terminated the appellant’s coverage because it believed he resided out of state. MassHealth only reinstated benefits back 10 days from the date it processed his renewal application on August 31, 2022.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 503.002, in terminating the appellant’s coverage for being a non-resident, and whether his benefits may be reinstated without a gap in coverage.

Summary of Evidence

The facts in this case are undisputed. The appellant is a disabled resident of Massachusetts, living in a group home. His sister, who often helps him with paperwork and finances, lives in another state. Sometime in 2022, the appellant's address was updated to his sister's address so that she would receive his MassHealth paperwork. Going forward appellant's representative understood that they would need to add his sister as an Authorized Representative to receive a copy of the notices while not changing the appellant's physical address with MassHealth.

MassHealth's representative testified that the appellant called to correct his address, but once he was terminated, he needed to complete a renewal application in order to reinstate his eligibility. This renewal was not received until August, and it was processed on August 31. She testified that MassHealth regulations only allow benefits for an individual under the age of 65 to be approved retroactively to 10 days before the application. MassHealth's representative said that if coverage were to go back further than 10 days, a fair hearing approval would be needed.

Findings of Fact

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

1. At all relevant times the appellant has been a Massachusetts resident. (Testimony by appellant's representative.)
2. The appellant's sister attempted to add herself to the appellant's MassHealth casefile in order to get copies of his MassHealth notices. The result, however, was that the appellant's address was updated to his sister's out of state address. (Testimony by MassHealth's the appellant's representatives.)
3. When the appellant attempted to update his address back to Massachusetts, he was told he needed to complete a renewal application. This renewal was not processed until August 31, 2022. (Testimony by MassHealth's representative.)

Analysis and Conclusions of Law

MassHealth benefits are only available for Massachusetts residents. (130 CMR 503.002.) Any changes for existing members can only go back to "ten days prior to ... the receipt of the requested verifications [or] ... the date of [MassHealth's] eligibility determination [based on] reported changes" 130 CMR 502.006(B)(1)(a), (c). Coverage changes for new applicants are effective "ten days prior to the date of application." 130 CMR 502.006(A)(2)(a). Coverage for "existing members whose MassHealth coverage type changes due to a change in circumstances" occurs 10 days prior to the receipt of the documentation necessary to effect the change in their coverage, except that downgrades are effective 14 days after the date of the MassHealth notice. (130 CMR 502.006(B).)

There is no substantive dispute in this appeal. MassHealth agrees that the appellant would have always been eligible for MassHealth benefits if his address had never been changed in the computer system. The only question is whether the appellant's benefits may be reinstated retroactively to the date of termination. A timely appeal must typically be filed within "30 days after an applicant or member receives written notice from the MassHealth agency of the intended action." 130 CMR 610.015(B)(1). However, during the pendency of the COVID-19 Federal Public Health Emergency ("FPHE"), individuals have up to 120 days to request a hearing. (EOM 22-10 (August 2022).) Once a member gets to a fair hearing, the "effective date of any adjustments to the appellant's eligibility status is the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted." (130 CMR 610.071(A)(2).)

The appellant has always been a resident of Massachusetts. Therefore, the residency requirement for which they were terminated was always met.¹ The June 16 termination notice is therefore incorrect and should be rescinded. This appeal is APPROVED. It is further unclear why the appellant was not entitled to retroactive eligibility under EOM 22-10:

Upon request, any individuals younger than age 65 who applied for MassHealth on or after March 1, 2020, will receive retroactive coverage if they would have been eligible. Coverage will begin as early as the first day of the third calendar month before the month of application, but no earlier than March 1, 2020.

(EOM 22-10, p. 3 (August 2022).) MassHealth required that the appellant submit an application in order to have his benefits reinstates, therefore he appears to be an individual "who applied for MassHealth on or after March 1, 2020"

Order for MassHealth

Reinstate the appellant's MassHealth Standard back to June 30, 2020 to ensure no gap in coverage.

¹ It is possible that *reporting* a change is itself an eligibility condition. Even if this were the case, the appellant did not report a "change." Rather, this was a correction of misreported information. The appellant even tried to call and correct the information, but they were informed an application was needed to reinstate their eligibility once it had terminated.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Christopher Jones
Hearing Officer
Board of Hearings

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

Appellant's Representative: [REDACTED]