Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied Appeal Number: 2206845

Decision Date: 10/19/2022 **Hearing Date**: 09/29/2022

Hearing Officer: Alexis Demirjian

Appearance for Appellant:

Appearance for MassHealth:

Patricia Rogers



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: Denied Issue: Eligibility Date

Decision Date: 10/19/2022 **Hearing Date:** 09/29/2022

MassHealth's Rep.: Ramone Royes Appellant's Rep.:

Hearing Location: Taunton Aid Pending: No

MassHealth

Enrollment Center

Room 1 Remote

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 August 12, 2022, MassHealth approved the appellant's application for MassHealth benefits retroactive to May 1, 2022. (see 130 CMR 515.008 and Exhibit 3). The appellant filed this appeal in a timely manner on September 9, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Determinations regarding scope and amount of assistance are valid grounds for appeal before the Board of Hearings. (see 130 CMR 610.032 (A)(5)).

Action Taken by MassHealth

¹ In MassHealth Eligibility Operations Memo (EOM) 20-09 dated April 7, 2020, and restated in MassHealth Operations Memo (EOM) 20-10 dated August 1, 2022, MassHealth states the following:

Regarding Fair Hearings during the COVID-19 outbreak national emergency, and through the end of month in which such national emergency period ends;

All appeal hearings will be telephonic; and

Individuals will have up to 120 days, instead of the standard 30 days, to request a fair hearing for member eligibility-related concerns.

On August 3, 2022, MassHealth denied the Appellant's initial application for benefits for failure to submit verifications. The Appellant did not appeal the August 3rd denial and instead submitted the missing verifications within 30 days of the notice. Accordingly, MassHealth did not honor the original application date of June 16, 2022 and applied a reapplication date of August 9, 2022, which is the date the Appellant submitted the outstanding verifications. On August 12, 2022, MassHealth notified the Appellant that he is eligible for MassHealth benefits retroactive to May 1, 2022.

Issue

Whether MassHealth was correct in using the reapplication date of August 9, 2022 for determining the Appellant's eligibility?

Summary of Evidence

A MassHealth representative appeared at the hearing and testified as follows: On June 16, 2022, MassHealth received a long-term care application on behalf of Appellant. On June 24, 2022, MassHealth sent a request for information. On August 3, 2022, MassHealth denied the application for failure to provide all the requested verifications. The denial notice stated the reason for denial was failure to provide information necessary to determine eligibility pursuant to 130 CMR 515.008.

The August 3rd notice stated:

If your application for MassHealth was denied because you did not give us the information or proof we needed to decide if you are eligible for MassHealth, you can either:

- Send us some of the needed information or proof within 30 days of the date of this notice (if you are eligible for MassHealth, the date we get the information or proof will be your reapplication date.); or
- Ask for a fair hearing if you want us to go back to your original application date.

The Appellant did not file a request for fair hearing to preserve the original application date. On August 9, 2022, the Appellant's representative submitted the missing verifications, accordingly that date was considered the Appellant's new reapplication date.

The Appellant's representative appeared at the hearing by telephone and stated that the Appellant should have a retroactive start date going back to April 2022, not May 1, 2022. The Appellant's representative concedes that the Appellant did not appeal the denial noticed dated August 3, 2022. The Appellant's representative testified that he was unaware that failure to file an appeal would result in losing the original application date. The Appellant expressed that he felt this was unfair to the Appellant.

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Findings of Fact

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

- 1. On June 16, 2022, Appellant filed an application for MassHealth long-term-care benefits. (Testimony; Exhibit 4)
- 2. On June 24, 2022, MassHealth sent the Appellant a request for information. (Testimony; Exhibit 4)
- 3. Mass Health requested the verifications be submitted by July 24, 2022. (Testimony; Exhibit 4)
- 4. The Appellant failed to submit the verifications on or before July 24, 2022. (Testimony, Exhibit 4)
- 5. On August 3, 2022, MassHealth denied Appellant's long-term care application for failure to provide all the requested verifications. (Testimony; Exhibit 4)
- 6. The Appellant did not appeal the August 3, 2022nd denial. (Testimony)
- 7. On August 9, 2022, the Appellant submitted the missing verification. (Testimony; Exhibit4)

Analysis and Conclusions of Law

Applicants for MassHealth have an obligation to 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 other health insurance. See 130 CMR 515.008

Once an application for MassHealth long-term-care benefits has been submitted, the MassHealth agency requests all corroborative information necessary to determine eligibility. <u>See</u> 130 CMR 516.001. 130 CMR 516.001(B) provides the following with respect to corroborative information:

- (1) The MassHealth agency sends the applicant written notification requesting the corroborative information generally within five days of receipt of the application.
- (2) The notice advises the applicant that the requested information must be received within 30 days of the date of the request, and of the consequences of failure to provide the information.

130 CMR 516.001(C) sets forth the process regarding the receipt of corroborative information, and provides as follows:

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If the requested information, with the exception of verification of citizenship, identity, and immigration status, is received within 30 days of the date of the request, the application is considered complete. The MassHealth agency will determine the coverage type providing the most comprehensive medical benefits for which the applicant is eligible. If such information is not received within 30 days of the date of the request, MassHealth benefits may be denied.

130 CMR 516.002 sets forth the process for reactivating an application after denial and provides as follows:

The MassHealth agency will reactivate the application after a denial of eligibility for provide requested verifications.

- (A) If the requested information is received within 30 days of the date of denial, the date of receipt of one or more of the verifications is consider the date of reapplication.
- (B) The date of reapplication replaces the date of the denied application. The applicant's earliest date of eligibility for MassHealth is based on the date of reapplication.

(Bold emphasis added)

In the present case, on August 3, 2022, the Appellant received a denial notice which clearly articulated the Appellant's options. The Appellant was notified of two options; the first was to submit the missing verification within 30 days noting the fact that if he exercised this option that the date that MassHealth received the missing documentation would be the Appellant's reapplication date. The second option was to file a request for a fair hearing which would preserve the original application date.

In this matter, the Appellant did not appeal the denial and thus did not preserve the original application date.

The Appellant submitted the missing information on August 9, 2022. Accordingly, MassHealth considered August 9, 2022, the reapplication date which is consistent with the regulations. See 130 CMR 516.002 (A) (B). Therefore, this action taken by MassHealth was correct. For those reasons, MassHealth's decision shall not be disturbed, and this appeal is DENIED.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

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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.

Alexis Demirjian Hearing Officer Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

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