

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2301109
Decision Date:	4/28/2023	Hearing Date:	03/13/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via telephone:
Pro se

Appearance for MassHealth:

Via telephone:
Sunnatra Som, Tewksbury MEC



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:	4/28/2023	Hearing Date:	03/13/2023
MassHealth's Rep.:	Sunnatra Som	Appellant's Rep.:	Pro se
Hearing Location:	Tewksbury MassHealth Enrollment Center 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 February 2, 2023, MassHealth informed the appellant that it would terminate his benefits on February 16, 2023 because the appellant failed to submit verifications in a timely manner (Exhibit 1). The appellant filed this appeal in a timely manner on February 10, 2023 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth terminated the appellant's benefits for failure to submit requested verifications in a timely manner.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant failed to submit requested verifications in a timely manner and terminating his benefits.

Summary of Evidence

The MassHealth representative appeared via telephone and testified as follows: on February 2, 2023, MassHealth issued a notice stating that the appellant does not qualify for MassHealth benefits because he did not provide proof in the time allowed. The notice stated that benefits would terminate on February 16, 2023. The notice also specified that MassHealth was missing proof of residency, which was due by January 16, 2023. MassHealth did receive a copy of the appellant's lease agreement, but that was not sufficient proof of residency. MassHealth required additional proof, such as a rent receipt. At hearing, the MassHealth representative was able to accept the appellant's attestation of his address over the phone and update his case.

The MassHealth representative initially thought he could backdate MassHealth coverage to February 16, 2023 to avoid any gap in coverage; however, he realized that the appellant was not on MassHealth and did not qualify for MassHealth benefits. The appellant is under the age of 65, has a household size of one, and is not disabled. He is working and his income is at 150.1% of the Federal Poverty Level (FPL), putting him above the limit (133% of the FPL) to qualify for MassHealth benefits. Instead, the appellant had previously been on the Health Connector and now qualified for Health Connector benefits with a start date of April 1, 2023.

The appellant appeared via telephone and attested to his address, where he has lived for two years. He did not dispute his income or the benefits for which he was approved.

Findings of Fact

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

1. The appellant is under the age of 65, has a household size of one and income at 150.1% of the FPL, and is not disabled (Testimony and Exhibit 4).
2. On February 2, 2023, MassHealth issued a notice stating that the appellant does not qualify for MassHealth benefits because he did not provide proof in the time allowed (Testimony and Exhibit 1).
3. The notice specified that MassHealth was missing proof of residency, which was due by January 16, 2023 and that benefits would terminate on February 16, 2023 (Testimony and Exhibit 1).
4. On February 10, 2023, the appellant timely appealed the notice (Exhibit 2).
5. At hearing, MassHealth was able to accept the appellant's attestation of his address over the phone and update his case (Testimony).
6. Based on his income and circumstances, the appellant had not been on MassHealth and did not qualify for MassHealth benefits (Testimony).

7. The appellant qualified for a Health Connector plan with a start date of April 1, 2023 (Testimony).

Analysis and Conclusions of Law

Pursuant to 130 CMR 502.007(C)(3), when reviewing eligibility, “the MassHealth agency matches files of MassHealth members with other agencies and information sources as described in 130 CMR 502.004 to update or verify eligibility.”

(a) If the electronic data match indicates a change in circumstances that would result in potential reduction or termination of benefits, the MassHealth agency will notify the member of the information that was received through the data match and require the member to respond within 30 days of the date of the notice.

1. If the member responds within 30 days and confirms the data is correct, eligibility will be determined using the confirmed data from the electronic data match.

2. If the member responds within 30 days and provides new information, eligibility will be determined using the information provided by the member. Additional verification from the member will be required.

3. **If the member does not respond within 30 days, eligibility will be determined using available information received from the electronic data sources. If information necessary for eligibility determination is not available from electronic data sources, MassHealth coverage will be terminated.**

(130 CMR 502.007(C)(3); emphasis added).

The issue in this appeal was whether the appellant submitted verifications to MassHealth in a timely manner. Specifically, MassHealth did not have sufficient proof of address. At hearing, the appellant attested to his address and MassHealth was able to process his case.

MassHealth offers a variety of benefits based upon an individual’s circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below a certain financial threshold. Based on his household size and income, the appellant was above the income limit to qualify for MassHealth benefits. The appellant qualified for a Health Connector plan with a start date of April 1, 2023.

Furthermore, the Board of Hearings has limited jurisdiction to redress complaints. Particularly, the Board of Hearings may only redress disputes arising from MassHealth determinations.¹ See 130

¹ Certain other limited areas of jurisdiction exist within the Board of Hearings that are not based upon MassHealth decisions or decisions by MassHealth contractors, such as decisions by a nursing facility to discharge or transfer a resident. See 130 CMR 610.032(C). Any authority regarding Health Connector decisions is specifically limited to those matters the Health Connector has delegated to the Board of Hearings. At the moment, no such delegation

CMR 610.032. Here, based on the notice under appeal dated February 2, 2023, the only MassHealth related dispute is whether MassHealth correctly denied the appellant's application for MassHealth benefits for not submitting verifications in a timely manner. If the appellant has issue with the start date for his Health Connector coverage, he needs to contact the Health Connector.²

As the issue on appeal is missing verifications and that issue has been resolved, the appeal is dismissed.

Order for MassHealth

None.

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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc:

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

exists. See 130 CMR 610.032(A).

² Health Connector Customer Service can be reached via telephone at 1-877-623-6765. Alternatively, the Health Connector Ombuds Office can be contacted via mail at P.O. Box 960484, Boston, MA 02196. The letter should include the full name of the primary person on the Health Connector account; preferred phone number(s); email address; and a summary of the issue(s) experienced. The Health Connector Ombuds can also be contacted via an online contact form at <https://betterhealthconnector.com/ombuds-contact-form>.