

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



|                         |                  |                       |            |
|-------------------------|------------------|-----------------------|------------|
| <b>Appeal Decision:</b> | Dismissed        | <b>Appeal Number:</b> | 2306006    |
| <b>Decision Date:</b>   | 10/12/2023       | <b>Hearing Date:</b>  | 08/21/2023 |
| <b>Hearing Officer:</b> | Kimberly Scanlon |                       |            |

**Appearance for Appellant:**  
*Via telephone*  
*Pro se*

**Appearance for MassHealth:**  
*Via telephone*  
Sunnatra Som



*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

|                           |                                                                 |                          |                                      |
|---------------------------|-----------------------------------------------------------------|--------------------------|--------------------------------------|
| <b>Appeal Decision:</b>   | Dismissed                                                       | <b>Issue:</b>            | Verifications; Under 65; Termination |
| <b>Decision Date:</b>     | 10/12/2023                                                      | <b>Hearing Date:</b>     | 08/21/2023                           |
| <b>MassHealth's Rep.:</b> | Sunnatra Som                                                    | <b>Appellant's Rep.:</b> | <i>Pro se</i>                        |
| <b>Hearing Location:</b>  | Tewksbury<br>MassHealth<br>Enrollment Center<br>Room 2 (Remote) | <b>Aid Pending:</b>      | 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 July 5, 2023, MassHealth notified the Appellant that he no longer qualifies for MassHealth benefits due to failure to provide proof in the time allowed. The notice further stated that the Appellant's existing coverage would terminate on July 19, 2023. (130 CMR 502.003(D); Exhibit 1). The Appellant filed this appeal in a timely manner on July 14, 2023. (130 CMR 610.015(B); Exhibit 2). Termination of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth notified the Appellant that his coverage would be terminated for failure to provide proof in the time allowed.

### Issue

The appeal issue is whether MassHealth was correct in determining that the Appellant's coverage

would be terminated for failure to provide proof in the time allowed.

## **Summary of Evidence**

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: the Appellant is a household of one (1). Further, the Appellant's income pending on file is \$ 713.00 per week from unemployment, which equals 272.80% of the Federal Poverty Level (hereinafter "FPL"). The MassHealth representative explained that the Appellant's information carried over from his application received during the COVID pandemic (protection period), which included his income from unemployment. The MassHealth representative explained that on April 1, 2023 COVID protections were lifted. The Appellant was notified by mail that he was currently over the income limits to continue receiving MassHealth benefits, however, he qualified for coverage through the Health Connector. The notice further stated the Appellant must verify his income with MassHealth by June 25, 2023. The MassHealth representative testified that MassHealth did not receive any information from the Appellant pertaining to his income. As a result, on July 5, 2023 the Appellant was notified by mail that his benefits would terminate on July 19, 2023. (Exhibit 1). The MassHealth representative next made inquiry as to whether the Appellant was still receiving unemployment.

The Appellant appeared at the hearing telephonically and testified that he is currently employed and therefore no longer collects unemployment benefits. In response, the MassHealth representative suggested that the Appellant renew his application to update his income and to include a current paystub with his application. The Appellant explained that he attempted to do so in July, however, he was told that he must wait until September to enroll. The MassHealth representative confirmed that the Appellant was referring to Health Connector enrollment and next made inquiry about the Appellant's yearly income. The Appellant explained that he makes approximately \$ 55,000.00. The MassHealth representative reiterated that the Appellant should submit his renewal application to MassHealth and to include his current paystubs so that MassHealth could accurately re-calculate the Appellant's yearly income. The MassHealth representative offered to mail a renewal application to the Appellant. The Appellant expressed his appreciation and agreed to re-submit his renewal application and current paystubs to MassHealth, upon receipt.

## **Findings of Fact**

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

1. The Appellant is under the age of 65. (Exhibit 3).
2. On July 5, 2023, MassHealth notified the Appellant that his coverage is terminating on July 19, 2023 for failure to provide proof in the time allowed. (Testimony; Exhibit 1).

3. The Appellant timely appealed on July 14, 2023. (Exhibit 2).
4. The Appellant is currently employed. (Testimony).
5. The Appellant is no longer receiving unemployment benefits. (Testimony).
6. The Appellant will submit a renewal application and current paystubs to MassHealth, once received. (Testimony).

## Analysis and Conclusions of Law

MassHealth may make an adjustment in the matters at issue before or during an appeal period. (See, 130 CMR 610.051(B)). If the parties' adjustment resolves one or more of the issues in dispute in favor of the Appellant, the hearing officer, by written order, may dismiss the appeal in accordance with 130 CMR 610.035 as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement in favor of the appellant. *Id.*

With respect to 130 CMR 610.035, the Board of Hearings will dismiss a hearing when....

- (1) the request is not received within the time frame specified in 130 CMR 610.015;
- (2) the request is withdrawn by the appellant;
- (3) the sole issue is one of state or federal law requiring automatic change in assistance for classes of members;
- (4) the stated reason for the request does not constitute grounds for appeal as set forth in 130 CMR 610.032. Without limiting the generality of the foregoing, except as provided in 130 CMR 610.032(A)(11), no provider decision or action including, but not limited to, a provider determination about whether or the extent to which a service is medically necessary constitutes an appealable action hereunder;
- (5) the stated reason for the hearing request is outside the scope of 130 CMR 610.000 as set forth in 130 CMR 610.003;
- (6) BOH has conducted a hearing and issued a decision on the same appealable action arising out of the same facts that constitute the basis of the request;
- (7) the party requesting the hearing is not an applicant, member, or resident as defined in 130 CMR 610.004;
- (8) BOH learns of an adjustment or action that resolves all of the issues in dispute between the parties;
- (9) BOH learns that the applicant or member has passed away prior to the date of filing and there is no full compliance with 130 CMR 610.016(B) within ten days of a BOH request;
- (10) BOH learns that the applicant or member has passed away prior to the date of filing and scheduling a hearing and is not informed until the date of the hearing and there is no full compliance with 130 CMR 610.016(B); or

(11) the appellant fails to appear at a scheduled hearing.

....

(130 CMR 610.035(A)).

In the present case, the Appellant was satisfied with the explanation given at the hearing and agreed to submit a renewal application and current paystubs to MassHealth. Because the appeal issue has been resolved in the Appellant's favor, there is nothing left to dispute before the hearing officer. For the above-stated reasons, this 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.

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Kimberly Scanlon  
Hearing Officer  
Board of Hearings

cc:

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