Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Dismissed Appeal Number: 2306164

Decision Date: 10/17/2023 **Hearing Date:** 08/24/2023

Hearing Officer: Kimberly Scanlon

Appearance for Appellant:

Via telephone

Pro se

Appearance for MassHealth:

Via telephone

Elizabeth Rodriguez



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; Over 65

Decision Date: 10/17/2023 **Hearing Date:** 08/24/2023

MassHealth's Rep.: Elizabeth Rodriguez Appellant's Rep.: Pro se

Hearing Location: Tewksbury 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 July 3, 2023, MassHealth informed the Appellant that he no longer qualifies for MassHealth benefits because he did not complete the annual eligibility renewal within the allowed time. The notice further stated that the Appellant's coverage is ending on July 17, 2023. (130 CMR 502.007(C)(2); Exhibit 1). The Appellant filed this appeal in a timely manner on July 21, 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 terminated the Appellant's coverage because he did not complete the annual eligibility renewal within the allowed timeframe.

Issue

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

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Summary of Evidence

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: the Appellant's annual eligibility renewal was received; however, the verifications were not processed immediately by MassHealth. She explained that she was able to process the verifications and the Appellant's coverage was approved.¹ The Appellant will receive an approval notice by mail.

The Appellant appeared at the hearing telephonically and testified that he survived a heart attack and as a result, did not immediately open the pertinent mail and return it to MassHealth. He expressed his appreciation for MassHealth.

Findings of Fact

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

- 1. The Appellant is over the age of 65. (Exhibit 3).
- 2. On or about July 3, 2023, MassHealth informed the Appellant that his coverage was ending on July 17, 2023 because he did not complete the annual eligibility renewal within the allowed time. (Testimony; Exhibit 1).
- 3. The Appellant timely appealed on July 21, 2023. (Exhibit 2).
- 4. The Appellant's coverage was approved by MassHealth after verifications were received and processed. (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 MassHealth representative further explained that she approved the Appellant's coverage back to June 1, 2023.

- (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 submitted his annual eligibility renewal and requested verifications. As a result thereof, MassHealth approved his coverage. 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

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	recei	pt	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