

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2306712
Decision Date:	10/2/2023	Hearing Date:	09/12/2023
Hearing Officer:	Emily Sabo	Record Open to:	09/26/2023

Appearance for Appellant:



Appearance for MassHealth:

Kelly Souza, Taunton 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; Over 65	
Decision Date:	10/2/2023	Hearing Date:	09/12/2023
MassHealth's Rep.:	Kelly Souza	Appellant's Rep.:	Case Manager
Hearing Location:	Taunton MassHealth Enrollment Center (Remote)	Aid Pending:	Yes

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. Through a notice dated August 3, 2023, MassHealth denied the Appellant's application for MassHealth benefits because she did not return her eligibility review form. The Appellant filed a timely fair hearing request on August 8, 2023.

The hearing yielded the following summarized testimony: MassHealth had not received a MassHealth application from the Appellant; it only had record of her submitting a Buy-in application. The record was held open for two weeks, until September 26, 2023, for the Appellant and her representative to submit an application and supporting materials to MassHealth. The Appellant's representative submitted these materials to the MassHealth representative on September 25, 2023. The MassHealth representative confirmed that MassHealth had received the application and supporting documentation and was processing the application.

Because MassHealth has confirmed they received the Appellant's application and were processing it, the issue before the Board of Hearings is resolved. When MassHealth determines the Appellant's eligibility based on the Appellant's September 25, 2023, application and supporting documents, the Appellant will receive a new notice with separate appeal rights, should she wish to challenge anything. The appeal is thereby DISMISSED.

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.

Emily T. Sabo
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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