

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2310416
Decision Date:	12/11/2023	Hearing Date:	12/01/2023
Hearing Officer:	Thomas J. Goode		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Alana Murray, Springfield 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:	Denied	Issue:	Eligibility
Decision Date:	12/11/2023	Hearing Date:	12/01/2023
MassHealth's Rep.:	Alana Murray	Appellant's Rep.:	Pro se
Hearing Location:	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 October 3, 2023, MassHealth approved Appellant for CarePlus coverage effective September 22, 2023 (130 CMR 505.008(E), 502.006(A)(2)(a) and Exhibit 1). Appellant filed this appeal in a timely manner on October 25, 2023 (130 CMR 610.015(B) and Exhibit 2). Notice of an eligibility start date is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved Appellant for CarePlus coverage effective September 22, 2023.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.008(E), 502.006(A)(2)(a) in determining Appellant's eligibility for CarePlus coverage effective September 22, 2023.

Summary of Evidence

The MassHealth representative testified that Appellant submitted an application for MassHealth benefits on October 2, 2023. On October 3, 2023, MassHealth determined that Appellant was eligible for MassHealth CarePlus effective September 22, 2023, which is 10 days prior to the date of application. Appellant is [REDACTED] old, and a household size of one non-disabled person with no reported income and no recent MassHealth eligibility history.

Appellant testified that he was involved in an accident on [REDACTED] 2023, and was told that he would be covered under a Workers' Compensation claim, which was denied 14 days later on [REDACTED] 2023. Appellant applied for MassHealth on [REDACTED] 2023, as soon as he learned the Workers' Compensation claim was denied. Appellant requested that CarePlus coverage begin effective [REDACTED], 2023 to cover medical expenses.

Findings of Fact

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

1. On [REDACTED] 2023 an application for MassHealth benefits was submitted by Appellant.
2. On October 3, 2023, MassHealth determined that Appellant is eligible for MassHealth CarePlus effective September 22, 2023, which is 10 days prior to the date of application.
3. Appellant is [REDACTED] old, and a household size of one non-disabled person with no reported income and no recent MassHealth eligibility history.

Analysis and Conclusions of Law

Appellant submitted a completed application to MassHealth on [REDACTED] 2023. Appellant is [REDACTED] old, and a household size of one non-disabled person with no reported income and no recent MassHealth eligibility history. On October 3, 2023, MassHealth correctly determined that Appellant is eligible for MassHealth CarePlus, and determined a September 22, 2023 coverage effective date which Appellant challenged.¹ The medical coverage date for MassHealth benefits

¹ Although Appellant did not challenge the coverage type, Appellant is not categorically eligible for a coverage type other than CarePlus. The MassHealth coverage types are set forth at 130 CMR 505.001(A) as follows: (1) Standard – for pregnant women, children, parents and caretaker relatives, young adults, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health members, and medically frail as such term is defined in 130 CMR 505.008(F); (2) CommonHealth – for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard; (3) CarePlus – for adults 21 through 64 years of age who are not eligible for MassHealth Standard; (4) Family Assistance – for children, young adults, certain noncitizens, and persons who are HIV positive who are not eligible

is established according to the MassHealth coverage type (130 CMR 502.006).² The start date for MassHealth CarePlus is correctly determined in Appellant's case under 502.006(A)(2)(a) as described below.

502.006: Coverage Dates

(A) Start Date of Coverage for Applicants. For individuals applying for coverage, the date of coverage for MassHealth is determined by the coverage type for which the applicant may be eligible. 130 CMR 505.000: *Health Care Reform: MassHealth: Coverage Types* describes the rules for establishing this date, except as specified in 130 CMR 502.003(E)(1)³, (F)(2)⁴, and (H)(2)⁵.

(1) The start date of coverage for individuals approved for benefits under provisional eligibility is described at 130 CMR 502.003(E)(1).

(2) The start date of coverage for individuals who do not meet the requirements for provisional eligibility, as described at 130 CMR 502.003(E)(2)(a), is described at 130 CMR 502.006(A)(2)(a) through (c), except individuals described at 130 CMR 502.006(C).⁶

(a) For individuals who submit all required verifications within the 90-day time frame, the start date of coverage is determined upon receipt of the

for MassHealth Standard, CommonHealth, or CarePlus; (5) Small Business Employee Premium Assistance – for adults or young adults who (a) work for small employers; (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus; (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage; (6) Limited – for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs, and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and (7) Senior Buy-In and Buy-In – for certain Medicare beneficiaries.

² See 130 CMR 505.008(E): The MassHealth CarePlus coverage start date is described at 130 CMR 502.006: *Coverage Dates*, except as described at 130 CMR 505.008(E)(2) which addresses provisional eligibility as described in 130 CMR 502.003(E).

³ 502.003(E)(1),(2) address provisional eligibility criteria for applicants with outstanding corroborative information and do not apply to the facts at hand.

⁴ 502.003(F)(2) addresses criteria and coverage start dates based on a reasonable opportunity to verify citizenship and identity or immigration status and does not apply to the facts at hand.

⁵ There is no evidence that a presumptive determination of eligibility was made in accordance with 130 CMR 450.110 by a qualified hospital.

⁶ See 130 CMR 502.006(C) for limitations, none of which apply to the facts at hand: MassHealth coverage start dates are subject to the following limitations. (1) The start date for Medicare premium payments for individuals determined eligible for MassHealth Standard, MassHealth CommonHealth, and MassHealth Senior Buy-in and Buy-in is described at 130 CMR 505.002(O), 505.004(L), and 505.007. (2) The start date for Premium Assistance Payment for individuals eligible for MassHealth Standard, MassHealth CommonHealth, MassHealth Family Assistance, and MassHealth CarePlus is described at 130 CMR 506.012(F)(1)(d). (3) The start date for MassHealth CommonHealth for persons described at 130 CMR 505.004(C) who have been notified by the MassHealth agency that they must meet a one-time deductible have their medical coverage start date established in accordance with 130 CMR 506.009(E): *Notification of the Deductible*.

requested verifications and coverage begins ten days prior to the date of application, except as specified in 130 CMR 506.006(C).⁷ (emphasis added)

(b) For individuals who fail to provide verifications of information within 90 days of the receipt of the MassHealth agency's request and the MassHealth agency used information received from electronic data sources to determine eligibility, the start date of coverage is determined upon the agency's eligibility determination and coverage begins ten days prior to the date of application, except as specified in 130 CMR 502.006(C).

(c) For individuals denied for failure to provide verification of requested information who then provide requested verifications or report changes after the denial, the start date of coverage is ten days prior to the date of receipt of all requested verifications or a reported change, except as specified in 130 CMR 502.003(D)(2)(d) and 502.006(C).

Accordingly, the start date for CarePlus based on a completed application submitted on October 2, 2023 is September 22, 2023. The MassHealth determination is correct; and the appeal is DENIED.

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.

Thomas J. Goode
Hearing Officer
Board of Hearings

cc: Appeals Coordinator, Dori Matthieu, MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

⁷ 506.006(C) does not appear in the MassHealth regulations. A reading consistent with 502.006 points to 502.006(C) and limitations which do not apply to the facts at hand. See fn. 6.