

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2310908
Decision Date:	1/10/2024	Hearing Date:	12/08/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:
Via telephone:
Pro se

Appearance for MassHealth:
Via telephone:
Sherri Paiva, 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:	Denied	Issue:	Eligibility; Under 65; Verifications
Decision Date:	1/10/2024	Hearing Date:	12/08/2023
MassHealth's Rep.:	Sherri Paiva	Appellant's Rep.:	Pro se
Hearing Location:	Taunton 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 September 17, 2023, MassHealth informed the appellant that she does not qualify for MassHealth benefits because the appellant failed to submit verifications in the time allowed (Exhibit 1). The appellant filed this appeal in a timely manner on November 3, 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 denied the appellant's application for MassHealth benefits.

Issue

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

Summary of Evidence

The MassHealth representative and the appellant both appeared at hearing via telephone. The MassHealth representative testified as follows: the appellant is under the age of 65 and has a household size of 5, including the appellant, her spouse, and three dependent children. On May 19, 2023, the appellant completed an application over the phone and MassHealth sent a request for information due on August 17, 2023. MassHealth did not receive the verifications and on September 17, 2023, MassHealth issued the denial under appeal informing the appellant that she did not qualify for MassHealth benefits because she did not submit verifications in the time allowed. The notice informed her that MassHealth still required proof of income for her and her spouse and her benefits would terminate on October 1, 2023.

MassHealth explained that proof of income was then received in multiple submissions. On September 22, 2023, the appellant submitted four pay stubs for one job and on September 25, 2023, pay stubs for another job. The pay stubs were not sufficient, however, because the appellant has self-employment income, which required her to also submit her most recent tax return. MassHealth received the appellant's tax return on October 10, 2023. For some reason, the Health Connector continued to say that the proof was unacceptable, but the day prior to hearing, the MassHealth representative was able to print everything, put it all together, and considered the verifications satisfied. MassHealth testified that the appellant has a gross monthly income of \$8,406.34, putting her at 282.07% of the Federal Poverty Level. The income limit for MassHealth benefits for a non-disabled person under the age of 65 is 133% of the Federal Poverty Level, which is \$3,895 gross per month for a household of five. As of December 7, 2023, the appellant is eligible for a Connector Care plan with a subsidy through the Health Connector.

The appellant understood that MassHealth now had all the verifications needed, but she was frustrated with the process. She got the verifications request in May and called in June and July and was told by MassHealth that she was all set. When she got the September 17 notice, she uploaded all her pay stubs on September 22nd. She was then told those pay stubs were insufficient and she uploaded additional pay stubs on September 25th. She was told again that those were insufficient and her income still was not verified. At one point, she was also told she was not a Massachusetts resident and needed to provide proof of residency even though she has lived here since 2004. In October, after she uploaded her taxes, she was told the tax return was not valid. It was extremely frustrating and she expressed being done with MassHealth. She has taken steps to get health insurance through her work.

MassHealth responded that it was the Health Connector that was finding the submissions unacceptable, not MassHealth. All the submissions were assigned to a Health Connector worker, not a MassHealth worker, but MassHealth has since determined that it has the necessary documentation.

Findings of Fact

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

1. The appellant is under the age of 65 with a household size of five (Testimony and Exhibit 4).
2. On May 19, 2023, after the appellant completed an application over the phone, MassHealth issued a request for information with a due date of August 17, 2023 (Testimony).
3. MassHealth did not receive the requested information by August 17, 2023 and, on September 17, 2023, MassHealth issued a notice informing the appellant that she does not qualify for MassHealth benefits because she did not provide proof in the time allowed (Testimony and Exhibit 1).
4. The notice specified that MassHealth was missing proof of income for her and her spouse, which was due on August 17, 2023, and that benefits would terminate on October 1, 2023 (Testimony and Exhibit 1).
5. On November 3, 2023, the appellant timely appealed the notice (Exhibit 2).
6. The appellant submitted pay stubs on September 22 and 25, 2023, but due to self-employment income, MassHealth also required her 2022 tax return, which was not submitted until October 10, 2022 (Testimony).
7. The Health Connector continued to show that the appellant did not submit acceptable proof, but on December 7, 2023, MassHealth determined that it had the necessary proof of income (Testimony).
8. Based on a gross monthly income of \$8,406.34 and a Federal Poverty Level of 282.07%, the appellant is eligible for a Connector Care plan with a subsidy through the Health Connector, effective December 7, 2023 (Testimony).

Analysis and Conclusions of Law

Pursuant to 130 CMR 502.003(D), MassHealth requires verification of eligibility factors including income. The following time standards apply to the verification of eligibility factors:

- (1) The applicant or member has 90 days from the receipt of the Request for Information Notice to provide all requested verifications.
- (2) If the applicant or member fails to provide verification of information within 90 days of receipt of the MassHealth agency's request, the MassHealth agency does

one of the following.

(a) If the required information is available from electronic data sources, the MassHealth agency uses that information to redetermine eligibility.

(b) If the required information is not available from electronic data sources, MassHealth coverage is denied or terminated except for individuals described at 130 CMR 502.001(D)(1) through (4).

(c) If the required verifications are received within one year from the date the application or renewal form was received, coverage is reinstated to a date ten days before the receipt of the verifications.

(d) If the required verifications are not received within one year of receipt of the previous application or renewal form, a new application must be completed.

See 130 CMR 502.003(D).

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 CMR 610.032. Here, based on the notice under appeal dated September 17, 2023, the only MassHealth related dispute is whether MassHealth correctly denied the appellant's application for MassHealth benefits because she did not submit verifications in a timely manner. Specifically, MassHealth did not have sufficient proof of income and needed the appellant's tax return because of self-employment. If the appellant has issue with the Health Connector coverage, she needs to contact the Health Connector.²

On May 19, 2023, the appellant did a renewal over the phone. MassHealth issued a request for information on May 19, 2023 with a due date of August 17, 2023. The appellant sent in multiple pay stubs in September (after the August 17 deadline), but because she has self-employment income, MassHealth still required the appellant's tax return to complete the redetermination. The appellant did not submit her tax return until October 10, 2023, also after the August 17 deadline. While it appears the Health Connector did not consider the proof acceptable, MassHealth testified at hearing that it had the verifications and proof of income necessary to make a determination.

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 exists. See 130 CMR 610.032(A).

² Based on the income verified, the appellant qualified for a Health Connector plan with a tax subsidy. 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>.

As the issue on appeal is missing verifications and the appellant did not submit them within the time allowed, MassHealth's decision on September 17, 2023 was correct and the appeal is denied.³

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: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780

³ The appellant can direct any questions about Health Connector plans to 1-877-MA-ENROLL (1-877-623-6765).