

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



|                         |              |                          |            |
|-------------------------|--------------|--------------------------|------------|
| <b>Appeal Decision:</b> | Denied       | <b>Appeal Number:</b>    | 2311365    |
| <b>Decision Date:</b>   | 2/26/2024    | <b>Hearing Date:</b>     | 12/12/2023 |
| <b>Hearing Officer:</b> | Mariah Burns | <b>Record Open Date:</b> | 01/05/2024 |

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Elizabeth Nickoson, Taunton MassHealth  
Enrollment Center



*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>   | Denied             | <b>Issue:</b>            | Under 65; Eligibility; Annual Renewal |
| <b>Decision Date:</b>     | 2/26/2024          | <b>Hearing Date:</b>     | 12/12/2023                            |
| <b>MassHealth's Rep.:</b> | Elizabeth Nickoson | <b>Appellant's Rep.:</b> | Pro se                                |
| <b>Hearing Location:</b>  | Remote             | <b>Aid Pending:</b>      | Yes                                   |

### 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 21, 2023, MassHealth terminated the appellant's MassHealth Standard benefits for failure to submit an annual renewal application. *See* 130 CMR 502.007 and Exhibit 1. The appellant filed this appeal in a timely manner on November 10, 2023, and aid pending was applied *See* 130 CMR 610.015(B) and Exhibit 2. Termination of assistance is valid grounds for appeal. *See* 130 CMR 610.032.

### Action Taken by MassHealth

MassHealth terminated the appellant's benefits.

### Issue

The appeal issue is whether MassHealth correctly determined that the appellant failed to submit an annual renewal, leading to the termination of his benefits.

### Summary of Evidence

The appellant is a young adult over the age of 19 who, prior to the issuance of the notice on

appeal, resided in a household with his father. MassHealth was represented by a worker from the Taunton MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the evidence provided at hearing.

The MassHealth representative reported that the agency never received a 2023 renewal application from the appellant. As his renewal was unable to be completed automatically, a notice terminating his MassHealth Standard benefits was sent out on October 21, 2023.

The appellant did not contest the assertion that he did not submit a renewal application. Instead, he reported that he wished to be removed from his father's household and be made his own head of household. The MassHealth representative explained he would need to submit his own application to facilitate that change. The record was kept open until January 5, 2024, to allow the appellant time to complete his own application. The appellant did not submit an application during the record open period.

## **Findings of Fact**

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

1. The appellant is a young adult between the ages of 19 and 21. Testimony, Exhibit 4.
2. Prior to the issuance of the notice at issue, the appellant was receiving MassHealth Standard benefits and resided in a household with his father. Testimony, Exhibit 4.
3. The appellant failed to submit a renewal application in 2023, a fact which the appellant does not contest. Testimony, Exhibit 1.
4. MassHealth was unable to automatically renew the appellant's benefits, and as a result, issued a termination notice on October 21, 2023. Exhibit 1.
5. The appellant filed a timely notice of appeal on November 10, 2023, and Aid Pending was applied. Exhibit 2.
6. After hearing, the record was kept open until January 5, 2024, to allow the appellant an opportunity to apply for benefits under his own household. Testimony.
7. The appellant did not submit his own application during the record open period. Exhibit 5.

## **Analysis and Conclusions of Law**

MassHealth reviews a member's eligibility once every twelve months through automatic renewal,

a renewal application, or periodic data matches. 130 CMR 502.007(A) and (C). The agency first attempts an automatic renewal “based on electronic data matches with federal and state agencies.” Id. at 502.007(C)(1). If an automatic renewal is not possible, MassHealth uses the following process:

(2) Prepopulated Renewal Application. Households whose continued eligibility cannot be determined based on electronic data matches with federal and state agencies and households whose eligibility would change to a less comprehensive benefit for at least one member of the household as a result of the data matches will be required to complete a prepopulated renewal application.

(a) The MassHealth agency will notify the head of household of the need to complete the renewal application.

(b) The head of household will be given 45 days from the date of the request to return the paper prepopulated renewal application, log onto their MAHealthConnector.org account to complete the renewal application online, or call the MassHealth agency to complete the renewal application telephonically.

1. If the renewal application is completed within 45 days, eligibility will be determined using the information provided by the individual with verification confirmed through electronic data matches if available. If verification through electronic data match is unsuccessful, the MassHealth agency will request required verifications as described in 130 CMR 502.003 and the individual continues to receive benefits pending verification.

2. If the renewal application is not completed within 45 days, the MassHealth agency will

a. use information received from electronic sources, if available, and redetermine eligibility; or

b. if information is not available from electronic sources, terminate MassHealth coverage as described at 130 CMR 502.006(B).

130 CMR 502.007(C)(2).

Here, the appellant does not challenge the assertion that he did not submit a renewal application as required. Instead, he asked for the record to be kept open to afford him time to submit a new application under his own household. MassHealth reported that, upon expiration of the record open period, the appellant had yet to submit his own application.

As the appellant does not challenge the basis for the termination, I find that MassHealth made no error in issuing the October 21, 2023, notice. For the foregoing reasons, the appeal is DENIED.

## **Order for MassHealth**

None, other than to remove Aid Pending.

## **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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Mariah Burns  
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