

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part	Appeal Number:	2312473
Decision Date:	02/27/2024	Hearing Date:	01/05/2024
Hearing Officer:	Emily Sabo		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Dionne Wisdom, 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:	Approved in part; Denied in part	Issue:	Eligibility; Under 65: Gap in Coverage; CarePlus
Decision Date:	02/27/2024	Hearing Date:	01/05/2024
MassHealth's Rep.:	Dionne Wisdom	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center (Telephone)	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 November 21, 2023, MassHealth terminated the Appellant's MassHealth CarePlus benefits, effective December 5, 2023, because the Appellant did not provide the required proof in the time allowed. *See* 130 CMR 502.003(D) and Exhibit 1. The Appellant filed this appeal in a timely manner on December 4, 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 terminated the Appellant's CarePlus benefits effective December 5, 2023.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.003(D), in terminating the Appellant's CarePlus benefits. A secondary issue, raised at hearing, is whether the

Appellant's CarePlus coverage should include the period from December 5, 2023, to December 23, 2023.

Summary of Evidence

The hearing was conducted telephonically. The MassHealth representative testified as follows: The Appellant submitted an application for MassHealth benefits on August 15, 2023. The Appellant was approved for CarePlus effective August 5, 2023. The MassHealth representative testified that the Appellant was directed to provide proof of residency by November 13, 2023. The MassHealth representative testified that because the Appellant did not submit proof of residency by November 13, 2023, on November 21, 2023, MassHealth notified the Appellant that his coverage would terminate as of December 5, 2023. The MassHealth representative testified that MassHealth received proof of the Appellant's updated address on January 2, 2024, and determined that he was eligible for CarePlus, effective December 23, 2023. The MassHealth representative explained that because the Appellant's coverage terminated due to an outstanding verification, she was unable to extend the Appellant's coverage before December 23, 2023.

The Appellant verified his identity. The Appellant testified that he had not received the request for proof of residency from MassHealth because he had been ill and was staying with his sister, who was taking care of him. The Appellant testified that he is prescribed certain medication which he takes weekly.

Findings of Fact

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

1. MassHealth found the Appellant eligible for MassHealth CarePlus effective August 5, 2023 (Testimony).
2. MassHealth directed the Appellant to provide proof of his residency by November 13, 2023 (Testimony).
3. MassHealth terminated the Appellant's CarePlus coverage, effective December 5, 2023, for failure to provide proof of residency (Testimony).
4. MassHealth determined that the Appellant was eligible for CarePlus, effective December 23, 2023 (Testimony).

Analysis and Conclusions of Law

The MassHealth regulations at 130 CMR 502.003(D) explain how MassHealth verifies an applicant's eligibility factors and the time standards:

(D) Time Standards. 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).¹

(c) If the required verifications are received within one year from the date of the application or renewal form was received, coverage is reinstated to a date 10 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.

130 CMR 502.003(D).

Here, the MassHealth representative testified that the Appellant did not submit the required information within 90 days. Therefore, MassHealth did not err when it terminated the Appellant's coverage for failure to provide the required information. 130 CMR 502.003(D)(2)(b).

Nevertheless, the MassHealth representative also testified that the Appellant submitted the required verification within one year of his August 15, 2023, application. Accordingly, based on 130 CMR 502.003(D)(2)(c), MassHealth appropriately reinstated the Appellant's CarePlus coverage "to a date 10 days before receipt of the verifications," which was December 23, 2023. 130 CMR 502.003(D)(2)(c); *see also* 130 CMR 502.006(A)(2)(d)(2) ("For all other individuals [who are not pregnant or under 19], coverage will begin ten days prior to the date of receipt of all requested verifications or a reported change."). Therefore, the appeal is approved in part, as MassHealth found that the Appellant is eligible for CarePlus; and denied in part, as MassHealth did not err in terminating the Appellant's coverage for failure to provide the required information, or only extending coverage to 10 days before receipt of the verifications.

Order for MassHealth

¹ These provisions relate to verification of breast or cervical cancer, HIV-positive, disability, and Immigration statuses.

If MassHealth has not already done so, approve the Appellant's CarePlus coverage effective to December 23, 2023.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Emily Sabo
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186