

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2312783
Decision Date:	3/1/2024	Hearing Date:	1/11/2024
Hearing Officer:	Patrick Grogan	Record Open to:	2/9/24

Appearance for Appellant:



Appearance for MassHealth:

Harry Giang, MassHealth Charlestown

Interpreter:

N/A



*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, Renewal Application
Decision Date:	3/1/2024	Hearing Date:	01/11/2024
MassHealth's Rep.:	Harry Giang	Appellant's Rep.:	[REDACTED]
Hearing Location:	Remote (Tel)	Aid Pending:	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 27, 2023, MassHealth terminated the Appellant's MassHealth benefits because MassHealth determined that the Appellant did not complete the annual eligibility renewal within the allowed time. (see 130 CMR 502.007(C)(2) and Exhibit 1). The Appellant filed this appeal in a timely manner on December 8, 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 MassHealth benefits because MassHealth determined that the Appellant did not complete the annual eligibility renewal within the allowed time. (see 130 CMR 502.007(C)(2) and Exhibit 1).

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.007(C)(2), in terminating the Appellant's MassHealth benefits because MassHealth determined that the Appellant did not complete the annual eligibility renewal within the allowed time.

Summary of Evidence

The Appellant is a child under the age of 18 whose MassHealth coverage was unable to be automatically renewed for MassHealth benefits based upon available federal and state data sources. (Testimony, Exhibit 1) Due to the Appellant not returning a completed annual eligibility renewal within the allotted time, MassHealth sent out a request for a completed application. (Testimony) A completed application was not received, and a termination notice, dated October 27, 2023, was sent out because MassHealth determined that the Appellant did not return a completed annual eligibility renewal within the allotted time. (Testimony, Exhibit 1) The instant appeal followed.

The Appellant was represented by his father. (Testimony). The Appellant's father was seeking to appeal for all his children, all who received Notices of Termination due to not returning a completed annual eligibility renewal within the allotted time¹. (Testimony) The Appellant's father indicated that the town in which he resides, was having issues with delivering his mail due a closure of the local United States Postal Office. (Testimony) Due to this, the father testified that the Appellant did not receive the renewal application. (Testimony)

The Record was left open until January 26, 2024 for the Appellant to complete a renewal application, and the Record was further left open until February 9, 2024 for MassHealth to review any submission by the Appellant. (Exhibit 5) Pursuant to the Record Open form and as discussed at the Hearing, the Appellant's father was furnished multiple ways to complete the renewal application: "Completed Renewal Application – 1) Return the Application that will be remailed 2) Complete the Application online @ MAHIX.Org or 3) Complete the Application telephonically by calling (800) 841-2900." (Testimony, Exhibit 5)

On February 29, 2024, MassHealth confirmed that no application response has been received and that the Appellant's father had not returned "the renewal form that was remailed to him or complete an online or phone renewal." (Exhibit 6)

Findings of Fact

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

1. The Appellant is child under the age of 18 whose MassHealth coverage was unable to be automatically renewed for MassHealth benefits based upon available federal and state data sources. (Testimony, Exhibit 1)

¹ The Appellant in Appeal # 2312783 was listed as the Appellant's father; however, the father is not the subject of this appeal. The Appellant is the eldest sibling. The Appellant, and his siblings, all did not complete renewals. The Appellant, and his siblings, currently have aid pending. As stated within Exhibit 6, no renewals were received prior to the expiration of the Record Open period.

2. A denial notice, dated October 27, 2023, was sent out because MassHealth determined that the Appellant had not return a completed annual eligibility renewal within the allotted time. (Testimony, Exhibit 1)
3. The Record was left open until January 26, 2024 for the Appellant to complete a renewal application, and the Record was further left open until February 9, 2024 for MassHealth to review any submission by the Appellant. (Exhibit 5)
4. The Appellant's father was provided multiple ways to complete the renewal application: "Completed Renewal Application – 1) Return the Application that will be remailed 2) Complete the Application online @ MAHIX.Org or 3) Complete the Application telephonically by calling (800) 841-2900." (Testimony, Exhibit 5)
5. On February 29, 2024, MassHealth confirmed that no application response has been received and that the Appellant's father had not returned "the renewal form that was remailed to him or complete an online or phone renewal." (Exhibit 6)

Analysis and Conclusions of Law

Despite multiple opportunities provided to the Appellant, the Appellant has not completed a renewal application to MassHealth. 130 CMR 502.007(C)(2) states:

502.007: Continuing Eligibility

(C) Eligibility Reviews. MassHealth reviews eligibility in the following ways.

(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). (Emphasis added)

3. If the individual submits the prepopulated renewal application within 90 days of the termination date, as described in 130 CMR 502.007(C)(2)(b)2., and is determined eligible for a MassHealth benefit, the date of coverage for MassHealth is determined by the coverage type for which the individual is now eligible, in accordance with 130 CMR 502.006(A). The begin date of MassHealth coverage may be retroactive to the date of the termination if the individual requests retroactive coverage and has incurred covered medical services since the date of the termination.

4. If the prepopulated renewal application is returned, but the required verifications are not submitted with the form, a second 90-day period starts on the date that the prepopulated form is returned.

5. If the prepopulated renewal application is not submitted within 90 days of the previous termination date, a new application is required.

(c) If the member's coverage type changes, the start date for the new coverage type is determined as follows.

1. If the member's coverage type changes, the start date for the new coverage type is effective as described in 130 CMR 502.006(A).

2. However, premium assistance payments under MassHealth Family Assistance begin in the month of the MassHealth agency's eligibility determination or in the month the insurance begins, whichever is later in accordance with 130 CMR 506.012(F)(1)(d).

The Appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228. See also Fisch v. Board of Registration in Med., 437 Mass. 128, 131 (2002); Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn., 11 Mass. App. Ct. 333, 334 (1981); Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance, 45 Mass. App. Ct. 386, 390 (1998).

On October 27, 2023, MassHealth sent out a Notice terminating the Appellant's MassHealth benefits because MassHealth determined that the Appellant did not complete the annual eligibility renewal with the allowed time. (Exhibit 1). The Appellant timely appealed, and at the Hearing held on January 11, 2024, the Record was left open until January 26, 2024, for the Appellant to complete a renewal application, and the Record was further left open until February 9, 2024 for MassHealth to review any submission by the Appellant. (Exhibit 5) The Appellant's father was furnished multiple ways to complete the renewal application: "Completed Renewal Application – 1) Return the Application that will be remailed 2) Complete the Application online @ MAHIX.Org or 3) Complete the Application telephonically by calling (800) 841-2900." (Testimony, Exhibit 5)

On February 29, 2024, MassHealth confirmed that no application response has been received and that the Appellant's father had not returned "the renewal form that was remailed to him or complete an online or phone renewal." (Exhibit 6) The Appellant has not provided the necessary renewal application for MassHealth to determine his eligibility despite multiple opportunities and an extension issued at the January 11, 2024 Hearing with multiple options for completing the renewal application (mail, online, telephone). At the expiration of the Record Open period, the Appellant has failed to return a completed renewal application. Accordingly, the Appellant has not met his burden to show the invalidity of MassHealth's determination, 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.

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.

Patrick Grogan
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129