

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2401888
<b>Decision Date:</b>	05/24/2028	<b>Hearing Date:</b>	03/08/2024
<b>Hearing Officer:</b>	Thomas Doyle	<b>Record Open to:</b>	04/05/2024

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Kay Omokoya, Charlestown MEC

**Interpreter:**



*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>	Annual Eligibility Renewal; Under 65
<b>Decision Date:</b>	05/24/2028	<b>Hearing Date:</b>	03/08/2024
<b>MassHealth's Rep.:</b>	Kay Omokoya	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Remote (phone)	<b>Aid Pending:</b>	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 January 20, 2024, MassHealth notified appellant that she does not qualify for MassHealth benefits because she did not submit the annual eligibility renewal within the required time frame (Ex. 1). Appellant appealed in a timely manner on January 31, 2024. (Ex. 2). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth notified appellant that she did not qualify for benefits because she did not submit the information it needs to decide her eligibility within the required time frame.

### Issue

The issue is whether MassHealth was correct in denying appellant's application for MassHealth benefits.

### Summary of Evidence

The MassHealth worker (worker), appellant and interpreter all appeared at hearing via phone and were sworn. The worker stated MassHealth mailed to appellant, on November 17, 2023, a notice that she needed to complete the annual renewal application. Appellant was given 45 days to complete and return the renewal application. MassHealth did not receive the renewal application in the timeframe required, and appellant's MassHealth benefit ended on February 2, 2024. On January 20, 2024, appellant was sent notice that her benefits would be terminated because she did not complete the annual eligibility renewal within the allowed time. Appellant requested a renewal application be mailed to her and the worker stated an application in Portuguese would be mailed out to her. (Testimony).

Appellant stated she was in [REDACTED] visiting her mother and would be returning on [REDACTED]. She requested a renewal form be mailed to her. She stated someone was checking her mail while she was in [REDACTED]. She asked what documents were needed to send in with the renewal application.

At the close of the hearing, the hearing officer agreed to leave the record of this appeal open until April 5, 2024 for the appellant to complete and return a renewal application that was being mailed to her by the worker. (Ex. 6).

On April 6, 2024, this hearing officer emailed the worker to ask if she had received a completed annual renewal application from appellant. She replied by email on April 9, 2024 she had not. (Ex. 6).

## Findings of Fact

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

1. On November 17, 2023, MassHealth sent appellant a notice that she needed to complete the annual renewal application. (Testimony).
2. Appellant was given 45 days to complete and return the renewal application. (Testimony).
3. MassHealth did not receive the completed renewal application in the timeframe required, and appellant's MassHealth benefit ended on February 2, 2024. (Testimony).
4. On January 20, 2024, appellant was sent notice that her benefits would be terminated because she did not complete the annual eligibility renewal within the allowed time. (Ex. 1).
5. The appellant timely appealed the January 20, 2024 notice to the Board of Hearings (Ex. 2).
6. At hearing, the MassHealth worker stated she would mail appellant a renewal application for under 65. (Testimony). At the time of the hearing, appellant was under 65. (Ex. 1; Ex. 5).

7. The record was held open for appellant to submit a completed renewal application. (Ex. 6).
8. Despite an opportunity to submit a completed renewal application following the appeal hearing, the appellant did not send a completed copy of the renewal application to MassHealth (Ex. 7).

## **Analysis and Conclusions of Law**

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007). Moreover, "[p]roof by a preponderance of the evidence is the standard generally applicable to administrative proceedings." Craven v. State Ethics Comm'n, 390 Mass. 191, 200 (1983).

### 130 CMR 502.007: Continuing Eligibility

(A) Annual Renewals. The MassHealth agency reviews eligibility once every 12 months. Eligibility may also be reviewed as a result of a member's change in circumstances, or a change in MassHealth eligibility rules, or as a result of a member's failure to provide verification within requested time frames.

### 130 CMR 501.010: Responsibilities of Applicants and Members

(A) Responsibility to Cooperate. The applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining available health insurance. The MassHealth agency may request corroborative information necessary to maintain eligibility, including obtaining or maintaining available health insurance. The applicant or member must supply such information within 30 days of the receipt of the agency's request. If the member does not cooperate, MassHealth benefits may be terminated.

In this case, despite being given additional time following the appeal hearing to submit the completed renewal application, appellant did not submit the completed renewal application to MassHealth or the hearing officer in a timely manner. Further, the appellant did not request additional time to submit the missing documentation. Therefore, I find the action taken by MassHealth is within the regulations. (130 CMR 501.010).

Accordingly, this 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.

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Thomas Doyle  
Hearing Officer  
Board of Hearings

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