

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2402012
Decision Date:	03/29/2024	Hearing Date:	03/27/2024
Hearing Officer:	Marc Tonaszuck		

Appearance for Appellant:




Appearance for MassHealth:

Eva Zoledziewski



*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	Issue:	Eligibility – Under Age 65; Healthcare Reform
Decision Date:	03/29/2024	Hearing Date:	03/27/2024
MassHealth's Rep.:	Eva Zoledziewski	Appellant's Rep.:	
Hearing Location:	Springfield MassHealth Enrollment Center	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 12/28/2023, MassHealth informed the appellant that her MassHealth benefits would terminate on 01/11/2024 because she did not provide requested proof of eligibility within the time allowed (130 CMR 502.003(D); Exhibit 1). The appellant filed this timely appeal on 02/07/2024 (130 CMR 610.015(B); Exhibit 2). Termination of benefits is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth terminated the appellant's application for benefits for failure to submit requested verifications.

Issue

Whether the requested verifications were submitted to MassHealth prior to or at hearing.

Summary of Evidence

The MassHealth representative testified the appellant was receiving MassHealth benefits as someone who is disabled and under the age of 65. In 2023, MassHealth sent a letter to the appellant requesting proof of residency. The requested information was due by 12/21/2023. MassHealth did not receive the requested verification by the deadline and on 01/11/2024, the appellant's MassHealth benefits were terminated. On 01/26/2024, MassHealth received the proof of residency, and the appellant was again approved for MassHealth benefits with an effective date of 01/16/2024.

The [REDACTED] appeared at the fair hearing in person. He testified that the appellant is disabled and she receives PCA services. Because of this issue, the appellant's benefits lapsed between 01/11/2024 and 01/16/2024, causing her PCAs to be unpaid for that time period. Moreover, she has pharmacy expenses that were paid out of pocket during that time.

Findings of Fact

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

1. The appellant lives in the community. She is under 65 years of age and has been determined to be disabled.
2. The appellant was eligible for, and receiving, MassHealth benefits.
3. In 2023, MassHealth sent the appellant a request for her to verify her residency. Her verification was due by 12/21/2023.
4. MassHealth did not receive the appellant's verification of residency by 12/21/2023.
5. Through a notice dated 12/28/2023, MassHealth informed the appellant that her MassHealth benefits would terminate on 01/11/2024 because she did not provide requested proof of eligibility within the time allowed.
6. The appellant's MassHealth benefits terminated on 01/11/2024.
7. On 02/07/2024, the appellant filed a timely appeal to the 12/28/2024 MassHealth termination notice.

8. On 03/27/2024, a fair hearing took place at the Springfield MassHealth Enrollment Center. The appellant was represented by her adult son during the hearing. He appeared in person.
9. The MassHealth representative appeared at the fair hearing virtually through video.
10. The MassHealth representative testified that the appellant provided the requested verification of residency to MassHealth on 01/26/2024.
11. The appellant was again determined to be eligible for MassHealth benefits with an effective date of 01/16/2024.
12. The appellant experienced a lapse of her MassHealth benefits from 01/11/2024 to 01/16/2024, during which time she had unpaid medical expenses.

Analysis and Conclusions of Law

Fair hearing regulations at 130 CMR 610.071(A)(2) state as follows:

The Hearing Officer shall not exclude evidence at the hearing for the reason that it had not been previously submitted to the Division, provided that the hearing officer may permit the Division representative reasonable time to respond to newly submitted evidence. **The effective date of any adjustments to the appellant's eligibility status shall be the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted** (*Emphasis Added.*)

The appellant was receiving MassHealth benefits and in 2023, MassHealth sent her a request to verify her residency. The appellant's verification was not received by the requested deadline and on 12/28/2023, MassHealth informed her that it would terminate her benefits on 01/11/2024. Her MassHealth benefits terminated on 01/11/2024. On 01/26/2024, the appellant provided the requested verification to MassHealth and she was again determined to be eligible for benefits effective on 01/16/2024. She experienced a lapse of benefits from 01/11/2024 to 01/16/2024, during which time she has unpaid medical expenses.

The appellant filed a timely appeal to MassHealth's termination notice and prior to the fair hearing, she provided the requested verification which was the basis of the 12/28/2023 termination notice. Pursuant to the above fair hearing regulation, even though the verification was submitted after the date of the termination notice, she filed a timely appeal to the termination notice and she met the eligibility conditions for MassHealth benefits as of the date of the termination notice. Accordingly, this appeal is approved.

Order for MassHealth

Rescind the 12/28/2023 termination notice. Approve the appellant for MassHealth Standard benefits effective on 01/11/2024 to cover the lapse of benefits from 01/11/2024 to 01/16/2024. Send notice of implementation only. Do not include appeal rights.

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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104