

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved; Dismissed	Appeal Number:	2408584
Decision Date:	09/26/2024	Hearing Date:	07/05/2024
Hearing Officer:	Emily Sabo	Record Open to:	08/09/2024

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Alyshia Guertin-Aguirre, Charlestown 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; Dismissed	Issue:	Community Eligibility—Over 65
Decision Date:	09/26/2024	Hearing Date:	07/05/2024
MassHealth's Rep.:	Alyshia Guertin-Aguirre	Appellant's Rep.:	Pro se
Hearing Location:	Charlestown MassHealth Enrollment Center - Room (Telephone)	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 notice dated May 15, 2024, MassHealth terminated the Appellant's MassHealth Standard benefits, as of May 29, 2024, because she did not return the eligibility renewal form to MassHealth. 130 CMR 502.007, 130 CMR 516.006, and Exhibit 1. The Appellant filed this appeal in a timely manner on May 29, 2024. 130 CMR 610.015(B) and Exhibit 2.

The hearing was held telephonically, and the Appellant verified her identity. The Appellant testified that she has been eligible for MassHealth since 2009 and has not been asked to re-apply since 2013. The MassHealth representative testified that because the Appellant is over the age of 65, the Appellant would need to submit an over-65 application.

The record was held open until July 24, 2024, for the Appellant to submit the application, and until August 9, 2024, for MassHealth to review and respond. Exhibits 5 & 6. The MassHealth representative stated that MassHealth received the Appellant's application on July 24, 2024. Exhibit 7. Because the Appellant submitted the application, there is no longer an issue in dispute.

before the Board of Hearings. Therefore, this appeal is dismissed. 130 CMR 610.035(A)(8).¹

Order for MassHealth

Process the Appellant's application, and send written notice of new eligibility determination, with appeal rights.

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

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

¹ Once the application is processed and MassHealth makes a new eligibility determination, a new notice will also include instructions about how the Appellant can appeal the decision to the Board of Hearings.