

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2410967
<b>Decision Date:</b>	10/21/2024	<b>Hearing Date:</b>	08/16/2024
<b>Hearing Officer:</b>	Scott Bernard	<b>Record Open to:</b>	09/03/2024

**Appearance for Appellant:**  
*Pro se via telephone*

**Appearance for MassHealth:**  
Katie Burgess (Taunton MEC) *via telephone*



*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>	Under 65/Failure to submit renewal
<b>Decision Date:</b>	10/21/2024	<b>Hearing Date:</b>	08/16/2024
<b>MassHealth's Rep.:</b>	Katie Burgess	<b>Appellant's Rep.:</b>	<i>Pro se</i>
<b>Hearing Location:</b>	Taunton MassHealth Enrollment Center	<b>Aid Pending:</b>	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 July 5, 2024, MassHealth informed the appellant that his MassHealth coverage would end on July 19, 2024, because records showed that MassHealth had not received a renewal application to continue his health coverage. (See 130 CMR 502.007(A) and Exhibit (Ex.) 1). The appellant filed this appeal in a timely manner on July 12, 2024. (See 130 CMR 610.015(B) and Ex. 2). Denial of assistance is valid grounds for appeal. (See 130 CMR 610.032).

The record was kept open until September 3, 2024, to allow the appellant an opportunity to submit a renewal application at which time the record closed. (Ex. 8).

### Action Taken by MassHealth

MassHealth terminated the appellant's coverage because he did not complete an annual eligibility renewal.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.007(C), in determining that the appellant did not complete the annual eligibility renewal.

## Summary of Evidence

MassHealth was represented by an eligibility worker from the Taunton MassHealth Enrollment Center (MEC) and the appellant represented himself. Both parties attended the hearing by telephone.

The MassHealth representative testified to the following. The appellant is under the age of 65 years old and lives in a household one. (Testimony; Ex. 3). The appellant is a tax filer and according to MassHealth's most recent information does not have any income. (Testimony). On May 9, 2024, MassHealth sent the appellant a notice and renewal application informing him that he needed to complete the application no later than June 23, 2024. (Testimony). The appellant did not submit the application by June 23, 2024. (Testimony). For that reason, MassHealth issued the notice under appeal informing the appellant that it would terminate his coverage on July 19, 2024. (Testimony; Ex. 1). The appellant is currently receiving MassHealth Standard as a medically frail individual and this benefit has been protected by the Board of Hearings because the appellant appealed the termination before the effective date of termination of his coverage. (Testimony; Ex. 4).

The appellant did submit an application on July 12, 2024, at the Quincy MEC. (Testimony). However, there were pages missing from the submitted application, and he also did not answer many questions in the application. (Testimony). Currently, the application is on hold in [REDACTED] in a special unit, but the MassHealth representative did not know precisely why the application was being held. (Testimony). The MassHealth representative suspected that because the appellant did not provide much in the way of answers in the application, this was being held so that MassHealth could send the appellant a notice informing him that his submitted application was missing critical data. (Testimony). The MassHealth representative did not see that MassHealth had yet issued such a notice, however. (Testimony). The MassHealth representative recommended that the appellant contact MassHealth by telephone to complete the renewal. (Testimony).

The appellant indicated that he did not know that the application was missing information and requested further time to submit the completed renewal. (Testimony). The appellant was given until August 30, 2024 to submit the renewal application. The hearing officer informed the appellant that he would contact the MassHealth representative by email on that date to confirm whether or not the appellant submitted the renewal.

On August 30, 2024, the hearing officer emailed the MassHealth representative asking whether the appellant submitted the renewal application. (Ex. 8). On September 3, 2024, the MassHealth representative responded by stating that MassHealth had not received a completed renewal as of that date. (Ex. 8).

## Findings of Fact

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

1. The appellant is under the age of 65 years old and lives in a household one. (Testimony; Ex. 3).
2. The appellant is a tax filer and according to MassHealth's most recent information does not have any income. (Testimony).
3. On May 9, 2024, MassHealth sent the appellant a notice and renewal application informing him that he needed to complete the application no later than June 23, 2024. (Testimony).
4. The appellant did not submit the application by June 23, 2024. (Testimony).
5. For that reason, MassHealth issued the notice under appeal informing the appellant that it would terminate his coverage on July 19, 2024. (Testimony; Ex. 1).
6. The appellant is currently receiving MassHealth Standard as a medically frail individual and this benefit has been protected by the Board of Hearings because the appellant appealed the termination before the effective date of the termination of his coverage. (Testimony; Ex. 4).
7. The appellant did submit an application on July 12, 2024 at the Quincy MEC but there were pages missing from the submitted application, and he also did not answer many questions in the application. (Testimony).
8. The appellant requested time after the hearing to submit the completed renewal application and was given until August 30, 2024 to do so. (Testimony; Ex. 8).
9. The hearing officer emailed the MassHealth representative on August 30, 2024 to determine whether the appellant submitted a completed renewal application. (Ex. 8).
10. On September 3, 2024, the MassHealth representative responded by stating that MassHealth had not received a completed renewal as of that date. (Ex. 8).

## Analysis and Conclusions of Law

MassHealth reviews eligibility at least once every 12 months. (130 CMR 502.007(A)). MassHealth updates eligibility based on information received as a result of such reviews. (Id.). MassHealth reviews in several different ways: by information matching with other agencies, health insurance carriers, and information sources; through a written update of the member's circumstances on a prescribed form; through an update of the member's circumstances in person, by telephone, or on

the MAHealthConnector.org account; or based on information in the member's case file. (Id.).

A household will be required to complete a prepopulated renewal application if its continued eligibility cannot be determined based on electronic data matches with federal and state agencies or if the eligibility of at least one member of the household would change to a less comprehensive benefit because of the data matches. (130 CMR 502.007(C)(2)). MassHealth will notify the head of household of the need to complete the renewal application. (130 CMR 502.007(C)(2)(a)). 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 MassHealth to complete the renewal application telephonically. (130 CMR 502.007(C)(2)(b)). If the renewal application is not completed within 45 days, the MassHealth agency uses information received from electronic sources, if available, and redetermines eligibility; or if information is not available from electronic sources, terminates MassHealth coverage. (130 CMR 502.007(C)(2)(b)(2)).

On May 9, 2024, MassHealth sent the appellant a letter informing him that he needed to complete and return an eligibility renewal form to MassHealth by June 23, 2024. MassHealth did not receive the requested eligibility renewal from the appellant by June 23, 2024, which was 45 days after May 9, 2024. For that reason, MassHealth notified the appellant in writing on July 5, 2024, that his coverage would end by July 19, 2024 because he did not submit the eligibility renewal. The appellant did submit a timely appeal of that notice on July 12, 2024, and the appellant's MassHealth coverage remained active pending the resolution of this appeal. At the hearing, the appellant asked for more time to submit a completed eligibility renewal and agreed to do so by August 30, 2024. The appellant, however, did not submit the eligibility renewal application by that date.

For the above reasons, the appeal is DENIED.

## **Order for MassHealth**

If the appellant has still not submitted a completed renewal application by the date the Board of Hearings issues this decision, end aid pending and terminate the appellant's coverage.

## 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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Scott Bernard  
Hearing Officer  
Board of Hearings

Cc:

Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780