

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2411092
Decision Date:	10/7/2024	Hearing Date:	08/23/2024
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:



Appearance for MassHealth:

Jacob Sommer



*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:	Community Under 65 Eligibility Start Date
Decision Date:	10/7/2024	Hearing Date:	08/23/2024
MassHealth's Rep.:	Jacob Sommer	Appellant's Rep.:	Pro se
Hearing Location:	Charlestown		

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 July 10, 2024, MassHealth approved Appellant for MassHealth Standard benefits effective June 30, 2024 (see 130 CMR and Exhibit A). Appellant filed this appeal in a timely manner on July 17, 2024, seeking an earlier start date (see 130 CMR 610.015(B) and Exhibit A). Determination of a start date constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved Appellant for MassHealth Standard benefits effective June 30, 2024.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it started Appellant's Standard benefits on June 30, 2024.

Summary of Evidence

The MassHealth representative testified that in May 2021, Appellant filed an application for MassHealth benefits on which he identified himself as a US citizen. The application was approved during the COVID pandemic, but MassHealth sent a written request for proof of citizenship and residency which MassHealth did not receive.

After the COVID public health emergency was lifted and MassHealth began reviewing eligibility for all MassHealth members, Appellant failed to file a renewal form that was due in October 2023. In December 2023 the renewal was received and Appellant again stated that he was a US citizen and MassHealth again sent a written request asking for proof of citizenship and residency. The requested verifications were not received by the due date of March 5th, 2024. On April 23rd, 2024, MassHealth issued a termination letter.

On July 10, 2024, Appellant contacted MassHealth and changed his immigration status from US citizen to Legal Permanent Resident and indicated that he was homeless. MassHealth approved Appellant for MassHealth Standard with a start date of June 30, 2024, which is 10 days prior to receiving the missing verifications on July 10, 2024. The MassHealth representative also testified that as of December 2023 all notices were being sent to Appellant and his authorized representative.

Appellant's representative testified that the June 30, 2024, start date leaves a gap in coverage during which time Appellant was being provided psychiatric care. According to Appellant's representative, Appellant could not be discharged due to his psychiatric diagnosis; therefore, treatment was continued. Appellant's representative also testified that she spoke to a MassHealth representative who purportedly told her that MassHealth had originally keyed Appellant citizenship information incorrectly when the original application was filed in 2021. Appellant's representative asserts that it was only due to MassHealth's error that they were seeking verification of citizenship that was in fact not necessary. Appellant's representative seeks to have the coverage gap eliminated based on this purported error.

In response, the MassHealth representative testified that she is unaware of any such error made by MassHealth and noted that Appellant also indicated that he was a US citizen in December 2023 when he filed his renewal form. Additionally, verification of citizenship was not the only issue insofar as MassHealth was also requesting verification of residency which was not supplied until Appellant contacted MassHealth in July 2024 and reported that he was homeless.

Findings of Fact

By a preponderance of the evidence, this record supports the following findings:

1. In May 2021, Appellant filed an application for MassHealth benefits on which he identified himself as a US citizen.
2. The application was approved during the COVID pandemic, but MassHealth sent a written request for proof of citizenship and residency which MassHealth did not receive.
3. Appellant failed to file a renewal form that was due in October 2023.
4. In December 2023 the renewal was received and Appellant again stated that he was a US citizen and MassHealth again sent a written request asking for proof of citizenship and residency.
5. The requested verifications were not received by the due date of March 5, 2024.
6. On April 23, 2024, MassHealth issued a termination letter.
7. On July 10, 2024, Appellant contacted MassHealth and changed his immigration status from US citizen to Legal Permanent Resident and also indicated that he was homeless.
8. MassHealth approved Appellant for MassHealth Standard with a start date of June 30, 2024, which is 10 days prior to receiving the missing verifications on July 10, 2024.
9. As of December 2023, all MassHealth notices were being sent to Appellant and his authorized representative.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). Appellant has not met his burden.

Determination of a start date for MassHealth Standard is controlled by the following regulations:

130 CMR 505.002(P) Medical Coverage Date.

1. The medical coverage date for MassHealth Standard is described at 130 CMR 502.006:

Coverage Dates, except as described at 130 CMR 505.002(P)(2).

2. Provisional eligibility is described in 130 CMR 502.003(E): Provisional Eligibility.

130 CMR 502.006(A)(2)(d) states: (emphasis and bracketed qualifications supplied):

For individuals denied for failure to provide verification of requested information who then provide requested verifications or report changes after the denial, the start date of coverage is described in 130 CMR 502.006(A)(2)(d)1. and 2.

1. For individuals who are pregnant or younger than 19 years old
 - a. If covered medical services were received during such period, and the individual would have been eligible at the time services were provided, the start date of coverage is determined upon receipt of the verifications and may be retroactive to the first day of the third calendar month before the received date of the verifications, except as specified in 130 CMR 502.006(C).
 - b. If covered medical services were not received during such period, or the individual would not have been eligible at the time services were provided, the start date of coverage is determined upon receipt of the verifications and coverage begins ten days prior to the received date of the verifications, except as specified in 130 CMR 502.006.
2. **For all other individuals, coverage will begin ten days prior to the date of receipt of all requested verifications or a reported change,** except as specified in 130 CMR 502.003(D)(2)(d) [concerning the need to file a new application if missing verification are filed more than a year after filing the application or renewal form] and 502.006(C) [concerning the start date for Medicare Premiums and Premium Assistance payments after missing verifications are filed].

This matter does not involve provisional coverage or a member who was pregnant; therefore 130 CMR 502.006(A)(2)(d)(2) applies. Neither of the two exceptions concerning Medicare premiums or Premium Assistance payments are at issue. Accordingly, Appellant's benefits were to start ten days prior to July 10, 2024, the day Appellant provided MassHealth with the information that he was not a U.S. citizen, but had Legal Permanent Residence status, and was homeless. This date would be June 30, 2024, the date MassHealth granted.

At hearing, Appellant asserted, but did not prove, that MassHealth made an error by keying-in incorrect information about Appellant's US citizenship on his application in 2021. The basis of this assertion was a telephone conversation purportedly made with a MassHealth worker. Appellant offered no corroboration or other proof that such a call was made and what was said.

Even if such proof had been provided, it does not obviate the uncontested fact that Appellant subsequently reported that he was a US citizen on the renewal form he filed in December 2023. The claim also does not address the uncontested fact that MassHealth was also seeking proof of residency, which was not addressed until July 10, 2024, when Appellant reported that he was homeless.

On this record, there is no basis in fact or law to disturb MassHealth's action. 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

[REDACTED]

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