

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2411903
Decision Date:	10/22/2024	Hearing Date:	09/06/2024
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:



Appearance for MassHealth:

Marie Ngonga



*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:	MCO Start Date
Decision Date:	10/22/2024	Hearing Date:	09/06/2024
MassHealth's Rep.:	Marie Ngonga	Appellant's Rep.:	██████
Hearing Location:	Charlestown MEC		

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 11, 2024, MassHealth approved Appellant for MassHealth CarePlus with a start date of July 1, 2024 (Exhibit A). Appellant filed for this appeal in a timely manner on July 31, 2024 seeking to have her related coverage by her managed care organization (MCO) backdated prior to her enrollment (see 130 CMR 610.015(B) and Exhibit A). Eligibility start date determinations constitute valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved Appellant for MassHealth CarePlus with a start date of July 1, 2024.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it approved Appellant for MassHealth CarePlus with a start date of July 1, 2024 and whether Appellant is entitled to an earlier coverage date from her MCO.

Summary of Evidence

The hearing was conducted virtually by video conference.

The MassHealth representative testified that this matter concerns the coverage start date of Appellant's MassHealth CarePlus benefits with the MassHealth Managed Care Organization (MCO), Wellsense. According to the MassHealth representative, Appellant was approved for CarePlus as of July 1, 2024, and was fee for service as of July 1, 2024. Appellant enrolled in the CarePlus MCO, Wellsense on July 15, 2024, which became effective as of July 18, 2024. Masshealth understands that Appellant had treatment on [REDACTED], and wants her Wellsense benefits to start on [REDACTED].

Appellant testified that she was in [REDACTED] on [REDACTED], when she needed to go to an urgent care facility for medical treatment. Appellant testified that the urgent care facility refused to bill MassHealth and made her personally responsible for the bill. The facility took Appellant's license and held it until the bill was paid.

Appellant also testified that she tried to enroll online with Wellsense on [REDACTED], which was a Saturday. The website instructed potential enrollers if they needed treatment that same day, to call a customer service number for assistance; however, because it was a Saturday customer service was not available. Appellant called first thing on Monday, July 15, 2024, to enroll and explained her situation. Nevertheless, she enrolled with Wellsense with a start date of July 18, 2024. Appellant is seeking to have her bill covered and would like either to have her Wellsense coverage start as of July 13, 2024, or to have Masshealth cover the bill.

Upon questioning by the hearing offer, Appellant testified that she has not yet filed the claim with MassHealth. The hearing officer urged her to do so and if she were denied, to appeal the denial. In the meantime, this decision would address the matter of her coverage start date with the MCO, Wellsense.

Findings of Fact

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

1. Appellant was approved for Care Plus as of July 1, 2024, and was fee for service as of July 1, 2024.
2. Appellant was enrolled in the CarePlus MCO, Wellsense, as of July 18, 2024.
3. Appellant was in [REDACTED], when she needed to go to an urgent care facility for medical treatment.

4. The urgent care facility refused to bill MassHealth and made her personally responsible for the bill.
5. Appellant tried to enroll online with Wellsense on [REDACTED], which was a Saturday.
6. The website instructed potential enrollers if they needed treatment that same day, to call a customer service number for assistance; however, because it was a Saturday customer service was not available.
7. Appellant called first thing on Monday, July 15, 2024, to enroll and explained her situation.
8. Appellant was enrolled with Wellsense with a start date of July 18, 2024.
9. By the date of the hearing, Appellant had not filed a claim with MassHealth for the treatment she received in Hawaii on July 13, 2024.

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 her burden.

Appellant was determined eligible for MassHealth CarePlus as of July 1, 2024, which means as of this date, she was covered by MassHealth on a fee for service basis until she enrolled in an MCO (see, 130 CMR 502.003(E) (provisional eligibility) and MassHealth All Provider Bulletin 243 of March 2014). Appellant's bill for treatment which occurred outside of the Commonwealth on July 13, 2024, should be billed through MassHealth CarePlus under fee for service.

The coverage start date with the MCO Wellsense was not dependent on any MassHealth action, rather it depended on when Appellant enrolled with the MCO. MassHealth operates within traditional hours on a typical five-day workweek, which does not include weekends; therefore, MassHealth could not be expected to address Appellant's desire to enroll with an MCO on a weekend. That concern was addressed properly and promptly on Monday July 15, 2024, when Appellant called to enroll. This record presents no error of fact or law on which to base a change in the subject eligibility determination of July 11, 2024, or Appellant's subsequent start date with Wellsense.

For the foregoing reasons, the appeal is denied. Appellant needs to file her July 13, 2024, claim under MassHealth CarePlus fee for service.

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

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