

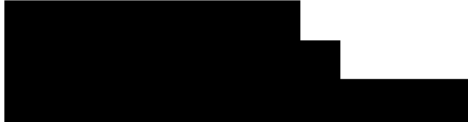
# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	DENIED	<b>Appeal Numbers:</b>	2412439 and 2412472
<b>Decision Date:</b>	10/2/2024	<b>Hearing Date:</b>	09/19/2024
<b>Hearing Officer:</b>	Sharon Dehmand		

**Appearance for Appellant:**



**Appearance for MassHealth:**

Asia Brown, Quincy MEC

**Interpreter:**



*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>	Community Eligibility – under 65
<b>Decision Date:</b>	10/2/2024	<b>Hearing Date:</b>	09/19/2024
<b>MassHealth's Rep.:</b>	Asia Brown	<b>Appellant's Rep.:</b>	Pro se; [REDACTED]
<b>Hearing Location:</b>	Remote	<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 two separate notices dated July 25, 2024, MassHealth notified the appellants that their coverage will end on August 8, 2024, because they did not submit job update forms to MassHealth within the allowed time frame. See 130 CMR 502.007; Exhibit 1A; and Exhibit 1B. The appellants filed timely appeals on August 6, 2024.<sup>1</sup> See 130 CMR 610.015(B); Exhibit 2A; and Exhibit 2B. Aid pending protection was put in place to protect the appellants' MassHealth benefits. Any action to suspend, reduce, terminate, or restrict a member's assistance is a valid ground for appeal to the Board of Hearings. See 130 CMR 610.032(A)(3).

### Action Taken by MassHealth

MassHealth terminated the appellants' coverage effective on August 8, 2024, because they did not submit job update forms to MassHealth within the allowed time frame.

### Issue

---

<sup>1</sup> A fair hearing request was received from the appellants' mother, head of household. However, her MassHealth notice, if any, was not a subject of this appeal. See Exhibit 2C.

Whether MassHealth was correct in terminating the appellants' coverage for failure to submit job update forms to MassHealth within the allowed time frame. See 130 CMR 502.007.

## Summary of Evidence

All parties participated telephonically. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. The appellants appeared<sup>2</sup> with their mother who participated as their appeal representative and through an interpreter verified her identity.<sup>3</sup> The following is a summary of the testimonies and evidence provided at the hearing:

The MassHealth representative testified that the appellants are adults under the age of 65. Their mother is the head of household. The appellants have been on MassHealth CarePlus since April 2, 2024. The MassHealth representative stated that on June 19, 2024, a job update form was mailed out to the appellants' head of household as well as one of the appellants. Neither of the job update forms were returned to MassHealth as requested. Through two separate notices dated July 25, 2024, MassHealth notified the appellants that their MassHealth coverage will end on August 8, 2024, because they did not submit the job update forms within the allowed time frame. Aid pending protection was put in place to protect the appellants' MassHealth benefits. As of the hearing date, MassHealth had not received the completed job update forms from the appellants.

The appellants' mother acknowledged the receipt of the job update forms. She also admitted that she has not submitted the forms. However, she said that she has failed to return the forms because she was unsure of where to submit them.

The MassHealth representative advised the appellants of the many ways available to them for the submission of the job update forms along with the requested paystubs. The appellants' mother stated that she will gather all the required information, complete the forms, and submit all documents to MassHealth within the next few days.

## Findings of Fact

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

---

<sup>2</sup> Before the start of the hearing, one of the appellants left the hearing due to his work obligation and designated his mother as his appeal representative.

<sup>3</sup> The mother provided incomplete identification information for the absent appellant. On September 24, 2024, this Hearing Officer contacted the appellant and the MassHealth representative, telephonically, and verified the appellant's identity.

1. The appellants are adults under the age of 65 and their mother is the head of household. (Testimony).
2. The appellants have been on MassHealth CarePlus since April 2, 2024. (Testimony; Exhibit 4A; and Exhibit 4B).
3. On June 19, 2024, job update forms were mailed out to the appellants' head of household as well as one of the appellants. (Testimony).
4. MassHealth did not receive the job update forms as requested. (Testimony).
5. On July 25, 2024, MassHealth notified the appellants that their MassHealth coverage will end on August 8, 2024, because they did not submit the job update forms within the allowed time frame. (Testimony; Exhibit 1A; and Exhibit 1B)
6. The appellants filed timely appeals on August 6, 2024. (Exhibit 2A and Exhibit 2B).
7. Aid pending protection was put in place to protect the appellants' MassHealth benefits. (Testimony).
8. As of the hearing date, MassHealth had not received the requested job update forms. (Testimony).

## **Analysis and Conclusions of Law**

In order to determine eligibility, applicants have certain responsibilities as set forth in 130 CMR 501.010.

....(A) Responsibility to Cooperate. The applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining available health insurance. The MassHealth agency may request corroborative information necessary to maintain eligibility, including obtaining or maintaining available health insurance. The applicant or member must supply such information within 30 days of the receipt of the agency's request. If the member does not cooperate, MassHealth benefits may be terminated.

(B) Responsibility to Report Changes. The applicant or member must report to the MassHealth agency, within ten days or as soon as possible, changes that may affect eligibility. Such changes include, but are not limited to, income, the availability of health insurance, and third-party liability.

(C) Cooperation with Quality Control. The Quality Control Division periodically conducts an independent review of eligibility factors in a sampling of case files. When a case file is selected for review, the member must cooperate with the representative of Quality Control. Cooperation includes, but is not limited to, a personal interview and the furnishing of requested information. If the member does not cooperate, MassHealth may be terminated.

The MassHealth agency requires verification of eligibility factors including income, residency, citizenship, immigration status, and identity as described in 130 CMR 503.000. See 130 CMR 502.003. The MassHealth agency may initiate information matches with other agencies and information sources when an application is received, at annual renewal, and periodically, in order to update or verify eligibility. See 130 CMR 502.004. If the electronic data match indicates a change in circumstances that would result in potential reduction or termination of benefits, the MassHealth agency will notify the member of the information that was received through the data match and require the member to respond within 30 days of the date of the notice. See 130 CMR 502.007(C)(3)(a). If the member does not respond within 30 days and information necessary for eligibility determination is not available from electronic data sources, MassHealth coverage will be terminated. See 130 CMR 502.007(C)(3)(a)(3).

In the instant case, MassHealth notified the appellants on June 19, 2024, that they must submit job update forms, in order for MassHealth to determine their continued eligibility for benefits. See Id.; 130 CMR 501.010(A). The appellants confirmed the receipt of the job update forms and admitted that they had not submitted the forms as of the date of the hearing because they were unsure as to where to submit the forms. The appellants stated that they will submit the forms within the next few days by going to a MassHealth Enrollment Center.<sup>4</sup>

Since the appellants admitted not submitting the required information in the allowed time frame, MassHealth appropriately notified the appellants that their coverage will end on August 8, 2024, for their failure to submit the required forms. See 130 CMR 502.007(C)(3)(a)(3).

For the foregoing reasons, both appeals are DENIED.

## **Order for MassHealth**

Remove the aid pending protection from both appeals.

---

<sup>4</sup> If MassHealth receives the appellants' job update forms, determinations of benefits will be made by MassHealth and the appellants will have separate rights of appeal based on the new determinations.

## 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.

---

Sharon Dehmand, Esq.  
Hearing Officer  
Board of Hearings

[REDACTED]

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171