Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2414177
Decision Date:	12/05/2024	Hearing Date:	10/17/2024
Hearing Officer:	Kimberly Scanlon		

Appearance for Appellant:

Appearance for MassHealth: Georges Jorcelin – 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:	Denied	lssue:	Eligibility; Under 65; Coverage start date
Decision Date:	12/05/2024	Hearing Date:	10/17/2024
MassHealth's Rep.:	Georges Jorcelin	Appellant's Rep.:	
Hearing Location:	Charlestown MassHealth Enrollment Center - Room 1 (Videoconference)	Aid Pending:	No

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 17, 2024, MassHealth notified the appellant that she is eligible for MassHealth CarePlus benefits starting on July 6, 2024 (Exhibit 1, pp. 6-10). The appellant filed this appeal in a timely manner on September 13, 2024 (130 CMR 610.015(B); Exhibit 2). A dispute over the scope of assistance is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified the appellant that she is eligible for MassHealth CarePlus benefits starting on July 6, 2024.

Issue

The appeal issue is whether MassHealth was correct in determining a July 6, 2024 coverage start date for the appellant's benefits.

Summary of Evidence

The MassHealth representative appeared at the hearing virtually and testified as follows: The appellant is under the age of 65. On July 16, 2024, the appellant applied for MassHealth benefits in-person. Her application was processed, and MassHealth sent a request for additional documentation (Exhibit 1, pp. 1-5). MassHealth received the requested documentation and on July 17, 2024, MassHealth approved the appellant for CarePlus benefits starting on July 6, 2024, which is 10 days prior to receiving her application (Exhibit 1, pp. 6-10). On September 9, 2024, MassHealth notified the appellant that her benefits were upgraded from CarePlus to Standard starting on August 30, 2024, due to a change in her circumstances (Exhibit 1, pp. 11-14).

The appellant appeared by telephone and testified that she was in the custody of the Department of Children and Families (DCF) and was supposed to have MassHealth benefits through DCF until she turned **Control of Children**). The appellant was hospitalized two days prior to her Unbeknownst to the appellant, DCF terminated her MassHealth coverage four days before her **Control of Children** without notifying her beforehand. The appellant stated that she incurred extensive medical expenses resulting from her hospitalization. She testified that she is Title IV-E eligible. The appellant stated that she had a representative contact MassHealth on multiple occasions while she was hospitalized to notify MassHealth that the appellant is Title IV-E eligible.¹ She stated that MassHealth representatives did not have any knowledge of Title IV-E eligibility. On July 16th, the appellant applied in-person for MassHealth benefits. She stated that she would like her MassHealth coverage start date to be adjusted to cover her hospital expenses.

The MassHealth representative explained that while the appellant may have previously received MassHealth coverage, it was through DCF, which is a separate entity. He testified that MassHealth regulations are separate and apart from DCF requirements and in accordance with MassHealth regulations, the appellant's benefits started on July 6th, which is 10 days prior to MassHealth's receipt of her MassHealth application. The appellant testified that it is unjust and there is a lack of awareness and understanding with MassHealth representatives regarding Title IV-E eligibility.

The MassHealth representative stated that DCF may have issued the appellant a separate MassHealth Member ID number because the only date of recent coverage for her in MassHealth's computer system is July 6, 2024. Prior to July 6th, the appellant was last active with MassHealth

¹¹ Title IV-E is a portion of the federal Social Security Act that makes federal money available to states for foster care and adoption programs.

coverage in 2007. The appellant confirmed that DCF gave her a separate MassHealth ID number. The MassHealth representative suggested that the appellant should contact her case worker to inquire why DCF terminated her coverage. The appellant stated that she was told that MassHealth can adjust her start date - not DCF. Additionally, the appellant stated that her case worker informed her that she is eligible for MassHealth benefits until she turns 26 years old.

Findings of Fact

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

- 1. The appellant previously received MassHealth coverage through DCF; she was told that she would maintain coverage through DCF until she turned
- 2. The appellant was hospitalized on June 28, 2024, two days before
- 3. The appellant was informed that her MassHealth coverage was terminated by DCF on June 26, 2024, four days before she turned 22 years old.
- 4. On July 16, 2024, MassHealth received the appellant's application for benefits.
- 5. On July 16, 2024, MassHealth processed the appellant's application and requested additional documentation.
- 6. On July 17, 2024, MassHealth notified the appellant that she was approved for MassHealth CarePlus benefits starting on July 6, 2024.
- 7. On August 30, 2024, MassHealth redetermined the appellant's coverage.
- 8. On September 9, 2024, MassHealth notified the appellant that her benefits were upgraded from CarePlus to Standard starting on August 30, 2024.
- 9. The appellant has appealed MassHealth's July 17, 2024 determination.

Analysis and Conclusions of Law

It is undisputed that the appellant meets all the eligibility requirements for MassHealth coverage; at issue is the start date of her coverage. The appellant argues that her coverage should go back to cover her hospitalization because DCF terminated her benefits prematurely; MassHealth takes the position that the appellant's coverage should begin 10 days prior to receipt of her application on July 16, 2024, which is July 6, 2024.

The applicable MassHealth regulations do not provide the appellant with the remedy she seeks. The start date of coverage for MassHealth applicants is governed by 130 CMR 502.006. Pursuant to 130 CMR 502.006(A)(2)(b), for individuals who submit all required verifications within the 90-day time frame, the start date of coverage is determined upon receipt of the requested verifications and coverage begins ten days prior to the date of application. Applying this regulation, coverage can only begin ten days prior to July 16, 2024 (the date she submitted her application) and would not reach far back enough to cover the dates of service at issue.

The appellant has not demonstrated that MassHealth erred in its determination that she was eligible for MassHealth CarePlus coverage with a start date of July 6, 2024.

This appeal is denied.²

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.

Kimberly Scanlon Hearing Officer Board of Hearings

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

² This denial does not preclude the appellant from contacting her case worker regarding DCF's termination of her MassHealth benefits, as discussed at the hearing.