Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2416362
Decision Date:	1/13/2025	Hearing Date:	12/02/2024
Hearing Officer:	Patrick Grogan	Record Open to:	N/A

Appearance for Appellant:

Appearance for MassHealth: Carmen Rivera, Quincy MEC

Interpreter: N/A



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, Retroactive Coverage
Decision Date:	1/13/2025	Hearing Date:	12/02/2024
MassHealth's Rep.:	Carmen Rivera	Appellant's Rep.:	
Hearing Location:	Remote (Tel)	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 October 11, 2024, MassHealth approved the Appellant's application for MassHealth benefits beginning October 1, 2024 (see 130 CMR 502.006 and Exhibit 1). The Appellant filed this appeal in a timely manner on October 24, 2024 (see 130 CMR 610.015(B) and Exhibit 2). Imposition of a coverage date is a MassHealth action and is valid grounds for appeal (see 130 CMR 610.032(3)).

Action Taken by MassHealth

MassHealth approved the Appellant's application for MassHealth benefits beginning October 1, 2024. (see 130 CMR 502.006 and Exhibit 1).

lssue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.006, in determining that the Appellant's MassHealth coverage begins October 1, 2024 (see 130 CMR 502.006 and Exhibit 1).

Summary of Evidence

The Appellant is a MassHealth member under the age of 65 who applied for MassHealth benefits. (Testimony) The Appellant had been receiving MassHealth benefits, however, on May 16, 2023, a Notice was sent to the Appellant instructing him to renew his coverage by June 30, 2023. (Testimony). On July 7, 2023, MassHealth, having received nothing responsive from the Appellant, sent a notice of termination, dated July 7, 2023, to the Appellant informing him that his coverage was ending due to the lack of a renewal. (Testimony). MassHealth stated the Appellant's coverage ended September 30, 2023. (Testimony) MassHealth testified that all mailings were sent to the Appellant's listed mailing address (Testimony, Exhibit 1) MassHealth testified that a phone call, that was treated as a new application for MassHealth benefits, was received on October 11, 2024. (Testimony) The Appellant was approved for MassHealth Standard beginning on October 1, 2024. (Testimony, 130 CMR 502.006) The Approval Notice, which is the subject of the instant appeal, was mailed to the same address, the Appellant's mailing address. (Exhibit 1). On the Fair Hearing Request, the Appellant's address is listed as the same address as the Appellant's listed mailing address. (Exhibit 2) The Notice of Hearing lists the same address, the Appellant's mailing address. (Exhibit 3)

In the Appellant's Fair Hearing Request, the Appellant indicated that he was seeking retroactive coverage from September 4, 2023. (Exhibit 3). The Appellant indicated he was not aware he had to do a renewal and indicated that he had suffered a heart attack in the previous year. (Testimony, Exhibit 3) At Hearing, the Appellant testified that he did not receive the notices in 2023. (Testimony) The Appellant stated that he did receive the Notice which is the subject of this Appeal (Exhibit 1) as well as the Notice of Hearing. (Exhibit 3) MassHealth confirmed that all Notices list the same mailing address as the address listed on Exhibit 1. (Testimony) In response to inquiry posed, the Appellant stated he did not reside at the listed address, but that it was his mailing address, it continues to be the location where his mail is to be sent, and that he has utilized that address for the past five to ten years. (Testimony)

Findings of Fact

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

- 1. The Appellant is an MassHealth member who applied for MassHealth benefits. (Testimony)
- 2. The Appellant mailing address is at Exhibit 1, Exhibit 2, Exhibit 3, Exhibit 4) (Testimony,
- 3. MassHealth received a telephone call, which MassHealth treated as an application for MassHealth benefits on behalf of the Appellant, on October 11, 2024. (Testimony, Exhibit 1)

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- 4. The Appellant had been approved for MassHealth Standard, beginning on October 1, 2024. (Testimony, 130 CMR 502.006)
- 5. The Appellant seeks retroactive coverage back to September 4, 2023. (Exhibit 2)

Analysis and Conclusions of Law

The Appellant has the burden "to demonstrate the invalidity of the administrative determination." <u>Andrews</u> v. <u>Division of Medical Assistance</u>, 68 Mass. App. Ct. 228. See also <u>Fisch</u> v. <u>Board of Registration in Med.</u>, 437 Mass. 128, 131 (2002); <u>Faith Assembly of God of S.</u> <u>Dennis & Hyannis</u>, Inc. v. <u>State Bldg. Code Commn.</u>, 11 Mass. App. Ct. 333, 334 (1981); <u>Haverhill</u> <u>Mun. Hosp</u>. v. <u>Commissioner of the Div. of Med. Assistance</u>, 45 Mass. App. Ct. 386, 390 (1998).

The Appellant had been receiving MassHealth benefits, however, on May 16, 2023, a Notice was sent to the Appellant instructing him to renew his coverage by June 30, 2024. (Testimony). On July 7, 2023, MassHealth, having received nothing responsive from the Appellant, sent a notice of termination, dated July 7, 2023, to the Appellant informing him that his coverage was ending due to the lack of a renewal. (Testimony). MassHealth stated the Appellant's coverage ended September 30, 2023. (Testimony). Had the Appellant sought to appeal the loss of MassHealth benefits in accordance with the July 2023 Notice, the appeal could not be heard based upon timeliness. The time standards for an Appeal may be found at 610.015(B)(1):

610.015: Time Limits

(B) Time Limitation on the Right of Appeal. The date of request for a fair hearing is the date on which BOH receives such a request in writing. BOH must receive the request for a fair hearing within the following time limits:

(1) 60 days after an applicant or member receives written notice from the MassHealth agency of the intended action. Such notice must include a statement of the right of appeal and the time limit for appealing. In the absence of evidence or testimony to the contrary, it will be presumed that the notice was received on the fifth day after mailing;

When an Appeal is not timely, the Appeal will be dismissed pursuant to 130 CMR 610.035 (A)(1):

610.035: Dismissal of a Request for a Hearing

(A) BOH will dismiss a request for a hearing when

(1) the request is not received within the time frame specified in 130 CMR 610.015;

Therefore, had the Appellant been seeking to appeal the loss of MassHealth benefits in

accordance with the July 2023 Notice within the instant appeal, the appeal would need to be dismissed pursuant to 130 CMR 610.015(B)(1) and 130 CMR 610.035(A)(1).

The Appellant's argument that he did not receive the Notice is belied by the address listed on all of the Notices, which, as the Appellant testified, is the Appellant's mailing address. The Notice sent to the Appellant instructing him to renew his coverage by June 30, 2023 was mailed to the Appellant's mailing address. (Testimony). On July 7, 2023, MassHealth, having received nothing responsive from the Appellant, sent a notice of termination, dated July 7, 2023, to the Appellant's mailing address. (Testimony). MassHealth stated the Appellant's coverage ended September 30, 2023. (Testimony). The Approval Notice which is the subject of this appeal, dated October 11, 2024, was sent to the Appellant's mailing address. (Exhibit 1) The Fair Hearing Request list the Appellant's mailing address as the same mailing address MassHealth utilized to send the Notices. (Exhibit 2). The Notice of Hearing lists the same address as the Notices and the Fair Hearing Request list, the Appellant's mailing address. (Exhibit 3) The Appellant confirmed receipt of the Notice of Hearing, which was mailed to the Appellant's mailing address, the same address where the Notices were mailed. (Testimony, Exhibit 1, Exhibit 3). Based upon this record, the Appellant has failed to show the invalidity of MassHealth's determination based upon MassHealth's testimony and the listing on the Notices of the Appellant's mailing address. Indeed, the Fair Hearing Request as well as the Notice of Hearing both confirm the Appellant's residence as the address MassHealth sent the Notices. (Testimony, Exhibit 2, Exhibit 3) Moreover, the Appellant confirmed receipt of the Notice of Approval and the Notice of Hearing which were mailed to the Appellant's mailing address. (Testimony) Accordingly, MassHealth did not err in mailing the Appellant's Notices to the listed address, which is the mailing address the Appellant has utilized for approximately five to ten years, and where he received the Approval Notice and the Notice of Hearing. (Testimony, Exhibit 1, Exhibit 2, Exhibit 3, Exhibit 4)

Regarding the Appellant's request for retroactive coverage during the time period when MassHealth benefits had ceased, here, the applicable Regulation can be found at 130 CMR 502.006(A)(2)(a):

502.006: Coverage Dates

(A) Start Date of Coverage for Applicants. For individuals applying for coverage, the date of coverage for MassHealth is determined by the coverage type for which the applicant may be eligible. 130 CMR 505.000: Health Care Reform: MassHealth: Coverage Types describes the rules for establishing this date, except as specified in 130 CMR 502.003(E)(1), (F)(2), and (H)(2).

(1) The start date of coverage for individuals approved for benefits under provisional eligibility is described at 130 CMR 502.003(E)(1).
(2) The start date of coverage for individuals who do not meet the requirements for provisional eligibility, as described at 130 CMR 502.003(E)(2)(a), is described at 130 CMR 502.006(A)(2)(a) through (c), except individuals described at 130 CMR 502.006(C).

(a) 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, except as specified in 130 CMR 506.006(C).

In the instant appeal, the phone call, treated as a new application submitted on behalf of the Appellant, was received on October 11, 2024. MassHealth was able to approve the Appellant for MassHealth Standard, beginning on October 1, 2024, 10 days prior to the date of the application. (Testimony, Exhibit 1) MassHealth's administrative determination comports with the explicit dictates of 130 CMR 502.006(A)(2)(a). The Notices were mailed to the Appellant at the Appellant's mailing address. (Testimony, Exhibit 1) The Appellant confirmed receipt of the Approval Notice and the Notice of Hearing, mailed to the same address. (Exhibit 1, Exhibit 3) Accordingly, on this record, the Appellant has not met the burden, by a preponderance of evidence, to show that the MassHealth determination is invalid. Therefore, this 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.

> Patrick Grogan Hearing Officer Board of Hearings

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

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