

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2417350
Decision Date:	01/14/2025	Hearing Date:	12/11/2024
Hearing Officer:	Mariah Burns	Record Open to:	12/27/2024 (appellant); 01/03/2025 (MassHealth)

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Carmen Rivera, Quincy MassHealth Enrollment
Center

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

Appeal Decision:	Denied	Issue:	Under 65; Eligibility; Renewal
Decision Date:	01/14/2025	Hearing Date:	12/11/2024
MassHealth's Rep.:	Carmen Rivera	Appellant's Rep.:	[REDACTED]
Hearing Location:	Remote	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 25, 2024, MassHealth terminated the appellant's MassHealth Limited benefits because MassHealth determined that the appellant did not properly submit a renewal application. See 130 CMR 502.007(C)(2) and Exhibit 1. The appellant filed this appeal in a timely manner on November 8, 2024. See 130 CMR 610.015(B) and Exhibit 2. Termination of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth terminated the appellant's MassHealth Limited benefits.

Issue

The appeal issue is whether MassHealth acted within the scope of the regulations in terminating the appellant's MassHealth Limited benefits.

Summary of Evidence

The appellant is an adult under the age of 65 who was assisted at the hearing by a [REDACTED] -

speaking interpreter. MassHealth was represented at the hearing by a worker from the Quincy MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the testimony and evidence provided at the hearing.

The appellant's original MassHealth application was received and processed on March 12, 2024, approving her for MassHealth Limited with a start date of March 2, 2024. (Exhibit 4). The appellant's immigration status was initially incorrectly coded as being present due to a work authorization, however the appellant is a [REDACTED] entrant. (Testimony). In September 2024, MassHealth sent the appellant a renewal application with a due date of October 19, 2024. (Testimony; exhibit 6, p. 9). The MassHealth representative noted that the renewal application was not received and MassHealth terminated benefits by notice dated October 25, 2024. (Exhibit 1). The MassHealth representative stated further that a noncustodial parent form was received, but not dated, so was unacceptable. The termination notice states that if the appellant submits the annual eligibility renewal within 90 days of the November 8, 2024 termination date, MassHealth will reconsider eligibility. (Exhibit 1).

The appellant testified that she received MassHealth's renewal notice, and that she believed she submitted the application on November 7, 2024. The MassHealth representative reported that a submission was received from the appellant, but it only included the appellant's immigration documentation, and not the renewal paperwork. (Exhibit 5).

The hearing record was kept open until December 27, 2024, for the appellant to submit a renewal application, and until January 3, 2025 for MassHealth to review the renewal application. The MassHealth representative mailed a paper application and emailed a hyperlink that would allow the appellant to submit an application online. The appellant was also made aware of her ability to apply by phone.

By email dated December 27, 2024, the MassHealth representative reported that on December 19, 2024, the appellant again submitted an incomplete renewal application. (Exhibit 6). The MassHealth representative noted that the appellant only provided the signature page with none of the renewal pages, and, further, the noncustodial parent form was still improperly executed. (Exhibit 6). A new MassHealth notice was sent to the appellant on December 27, 2024 with instructions to submit a proper renewal online or via the phone. (Exhibit 7).

Findings of Fact

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

1. The appellant is an adult under the age of 65 who was assisted at the hearing by a [REDACTED]-speaking interpreter.

2. The appellant's original MassHealth application was received and processed on March 12, 2024, approving her for MassHealth Limited with a start date of March 2, 2024.
3. The appellant's immigration status was initially incorrectly coded as being present due to a work authorization, however the appellant is a [REDACTED] entrant.
4. In September 2024, MassHealth sent the appellant a renewal application with a due date of October 19, 2024; the renewal application was not received and MassHealth terminated benefits by notice dated October 25, 2024.
5. A noncustodial parent form was received at MassHealth, but not dated, so was unacceptable.
6. The termination notice states that if the appellant submits the annual eligibility renewal within 90 days of the November 8, 2024 termination date, MassHealth will reconsider eligibility.
7. MassHealth received a submission from the appellant on November 7, 2024, but it only included the appellant's immigration documentation.
8. The hearing record was kept open until December 27, 2024, for the appellant to submit a renewal application, and until January 3, 2025 for MassHealth to review the renewal application.
9. MassHealth mailed a paper application and emailed a hyperlink that would allow the appellant to submit an application online; the appellant was also made aware of her ability to apply by phone.
10. By email dated December 27, 2024, the MassHealth representative reported that on December 19, 2024, the appellant again submitted an incomplete renewal application; the appellant only provided the signature page with none of the renewal pages, and the noncustodial parent form was still improperly executed.
11. A new MassHealth notice was sent to the appellant on December 27, 2024 with instructions to submit a proper renewal online or via the phone.

Analysis and Conclusions of Law

MassHealth reviews a member's eligibility "once every 12 months...[or] as a result of a member's change in circumstances, or a change in MassHealth eligibility rules, or as a result of a member's failure to provide verification within requested time frames." 130 CMR 502.007(A). The agency first attempts an automatic renewal "based on electronic data matches with federal and state

agencies.” *Id.* at 502.007(C)(1). If an automatic renewal is not possible, MassHealth uses the following process:

(2) Prepopulated Renewal Application. Households whose continued eligibility cannot be determined based on electronic data matches with federal and state agencies and households whose eligibility would change to a less comprehensive benefit for at least one member of the household as a result of the data matches will be required to complete a prepopulated renewal application.

(a) The MassHealth agency will notify the head of household of the need to complete the renewal application.

(b) The head of household will be given 45 days from the date of the request to return the paper prepopulated renewal application, log onto their MAHealthConnector.org account to complete the renewal application online, or call the MassHealth agency to complete the renewal application telephonically.

1. If the renewal application is completed within 45 days, eligibility will be determined using the information provided by the individual with verification confirmed through electronic data matches if available. If verification through electronic data match is unsuccessful, the MassHealth agency will request required verifications as described in 130 CMR 502.003 and the individual continues to receive benefits pending verification.

2. If the renewal application is not completed within 45 days, the MassHealth agency will

a. use information received from electronic sources, if available, and redetermine eligibility; or

b. if information is not available from electronic sources, terminate MassHealth coverage as described at 130 CMR 502.006(B).

3. If the individual submits the prepopulated renewal application within 90 days of the termination date, as described in 130 CMR 502.007(C)(2)(b)2., and is determined eligible for a MassHealth benefit, the date of coverage for MassHealth is determined by the coverage type for which the individual is now eligible, in accordance with 130 CMR 502.006(A). The begin date of MassHealth coverage may be retroactive to the date of the termination if the individual requests retroactive coverage and has incurred covered medical services since the date of the termination.

4. If the prepopulated renewal application is returned, but the required verifications are not submitted with the form, a second 90-day period starts on the date that the prepopulated form is

returned.

5. If the prepopulated renewal application is not submitted within 90 days of the previous termination date, a new application is required.

130 CMR 502.007(C)(2). An applicant for any MassHealth benefits is required to “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...” 130 CMR 501.010(A).

An appellant bears the burden of proof at fair hearings “to demonstrate the invalidity of the administrative determination.” *Andrews v. Division of Medical Assistance*, 68 Mass. App. Ct. 228, 231 (2006). The fair hearing decision, established by a preponderance of evidence, is based upon “evidence, testimony, materials, and legal rules, presented at hearing, including the MassHealth agency’s interpretation of its rules, policies and regulations.” 130 CMR 610.085(A). In this case, the appellant must show that she has properly submitted a renewal application to determine her eligibility for benefits. After reviewing the evidence, I find that she has not met that burden.

The appellant did not submit a completed renewal application by the MassHealth deadline of October 19, 2024, and, further, did not submit a completed renewal application during the record open period ending December 27, 2024. The appellant must submit a renewal application to MassHealth in order for MassHealth to determine her eligibility. MassHealth’s action in terminating the appellant’s MassHealth due to failure to submit a complete renewal application is upheld and 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.

Mariah Burns
Hearing Officer
Board of Hearings

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator

