

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2419035
Decision Date:	01/28/2025	Hearing Date:	01/16/2025
Hearing Officer:	Amy B. Kullar, Esq.		

Appearance for Appellant:



Appearance for MassHealth:

Nancy Derisma, Charlestown MassHealth
Enrollment Center



*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:	Eligibility; Under 65; Coverage start date
Decision Date:	01/28/2025	Hearing Date:	01/16/2025
MassHealth's Rep.:	Nancy Derisma	Appellant's Rep.:	██████
Hearing Location:	Charlestown MassHealth Enrollment Center - Room 1 (Telephone)	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 December 12, 2024, MassHealth informed the appellant that she is eligible for MassHealth CarePlus benefits with an effective start date of December 2, 2024. *See* Exhibit 1. The appellant filed this appeal in a timely manner challenging her coverage start date on December 12, 2024. *See* 130 CMR 610.015(B) and Exhibit 2. Challenging agency action to suspend, reduce, terminate, or restrict a member's assistance is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth notified the appellant that she is eligible for MassHealth CarePlus benefits starting on December 2, 2024.

Issue

The appeal issue is whether MassHealth was correct in determining a December 2, 2024 coverage start date for the appellant's MassHealth CarePlus coverage, or if the appellant is entitled to an earlier coverage start date.

Summary of Evidence

The MassHealth representative testified by telephone, in summary, as follows: The appellant is an adult under the age of 65; she resides in a household of one. On September 17, 2024, due to an open action in the appellant's MassHealth account, MassHealth mailed the appellant a request for proof of income; examples of sufficient proof of income (such as pay stubs) were sent along with the notice. This notice had a response due date of December 11, 2024.¹ On September 17, 2024, the appellant's proof of income was received at MassHealth. The proof provided by the appellant was determined to be insufficient, and on September 20, 2024, a notice was sent to the appellant that informed her that her proof of income was insufficient, and that she needed to provide additional documentation to MassHealth. On September 23, 2024, MassHealth received a completed job update form from the appellant, and her income was updated in the system; a notice was generated informing the appellant that she does not qualify for MassHealth benefits, but that she will receive Health Safety Net benefits for a limited time.

On December 12, 2024, the appellant called MassHealth customer service and self-attested her income as zero, giving her one person household a federal poverty level of zero (0%) percent. She was approved for MassHealth CarePlus based on the information she provided to MassHealth during that call, and as a result, the December 12, 2024 notice on appeal was generated and mailed to the appellant. The notice stated that the appellant is eligible for MassHealth CarePlus benefits with a coverage start date of December 2, 2024, which is 10 days prior to the appellant's self-attestation of her income.

The appellant testified by telephone and verified her identity. The appellant explained that she was hoping to receive retroactive coverage from MassHealth. She had surgery on August 22, 2024, and her MassHealth CarePlus benefit terminated on August 21, 2024, and now she has a huge medical bill for that surgery. She stated that she moved in [REDACTED] and she believed that she had updated her new address with MassHealth before the August notice, but that MassHealth had sent those notices to her old address. She acknowledged that she had not responded to the termination notice in August 2024.

¹ The appellant had been a MassHealth CarePlus recipient, but that coverage had ended on August 21, 2024, because the appellant had failed to respond to a notice earlier in 2024; the MassHealth representative testified that earlier notice had a response deadline of August 7, 2024. The appellant did not appeal any notice in 2024 except for the December 12, 2024 CarePlus approval notice at issue in this appeal.

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, and resides in a household of one with an FPL of 0%. Testimony and Exhibit 1.
2. On December 12, 2024, MassHealth sent a notice to the appellant informing her that she is eligible for MassHealth CarePlus benefits with a coverage start date of December 2, 2024. Exhibit 1.
3. The appellant filed a timely appeal of the December 12, 2024 notice. Exhibit 2.
4. In [REDACTED], the appellant failed to properly respond to a request for information and verify her income to MassHealth, and as a result, the appellant's CarePlus coverage was terminated effective August 21, 2024, via notice from MassHealth. Testimony.
5. The appellant did not appeal the August, 2024 termination notice (Testimony).

Analysis and Conclusions of Law

It is undisputed that on December 12, 2024, appellant met all the eligibility requirements for MassHealth CarePlus coverage; at issue is the start date of her coverage. The appellant argues that her coverage should not have been terminated on August 21, 2024; MassHealth takes the position that the appellant's coverage should begin 10 days prior to the appellant's self-attestation of her income on December 12, 2024, which is December 2, 2024.

The applicable 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 a 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 begin only ten days prior to December 12, 2024 (the date she completed her income verification), and would not reach back far enough to cover the dates of service at issue.

The appellant's opportunity to contest the August 21, 2024 termination of her benefits is tied to her failure to timely appeal an August 2024 termination notice. See 130 CMR 610.015(B)(1). It is undisputed that the appellant did not appeal this termination notice. The appellant explained that she did not receive the termination notice because she moved to a new address.

The appellant, however, had a responsibility to report her address change to MassHealth within ten days of the move. *See* 130 CMR 501.010(B). Based on the record evidence and testimony of the MassHealth representative, she failed to do so. The appellant has not demonstrated that the August termination is jurisdictionally appropriate for review in this hearing. *See* Exhibit 1 and 130 CMR 610.015(B)(1).

The appellant has not demonstrated that MassHealth erred in its determination that she is eligible for MassHealth CarePlus coverage with a start date of December 12, 2024.

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.

Amy B. Kullar, Esq.
Hearing Officer
Board of Hearings

MassHealth Representative: Thelma Lizano, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129