

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2419610
Decision Date:	3/3/2025	Hearing Date:	01/22/2025
Hearing Officer:	Amy B. Kullar, Esq.	Record Open to:	1/29/2025; 2/18/2025

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Lashaun Kelley, Quincy 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:	Community eligibility – under 65
Decision Date:	3/3/2025	Hearing Date:	01/22/2025
MassHealth's Rep.:	Lashaun Kelley	Appellant's Rep.:	Pro se
Hearing Location:	Quincy Harbor South 3 (Telephone)	Aid Pending:	Yes

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 10, 2024, MassHealth informed the appellant that her MassHealth benefits were ending on December 24, 2024, because the appellant did not return requested information to MassHealth in the time allowed. *See* 130 CMR 502.003(D) and Exhibit 1. The appellant filed this appeal in a timely manner on December 23, 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 informed the appellant that her benefits would be ending on December 24, 2024 because she failed to return acceptable proof of income and a non-custodial parent form for one of her minor children.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.003(D), in determining that the appellant had not provided the requested verifications within the time allowed or thereafter.

Summary of Evidence

MassHealth was represented by a benefits eligibility representative from the Quincy MassHealth Enrollment Center (MEC) (“MassHealth representative”) and the appellant represented herself. Both parties appeared by telephone. The following is a summary of the testimony and evidence provided at hearing:

The MassHealth representative testified as follows: in October 2024, while the appellant was enrolled in MassHealth Standard, the MassHealth computer system performed an auto-renewal on her account. The auto-renewal generated a MassHealth notice requesting information about the appellant and the appellant’s household, and specifically, requesting that a non-custodial parent form be completed for the appellant’s minor child, and proof of income be submitted by the appellant through a job update form. On December 10, 2024, because MassHealth had not received the completed job update form from the appellant, a notice was issued informing the appellant that her MassHealth Standard benefit would terminate on December 24, 2024. The MassHealth representative stated that the only issue here is that MassHealth is still seeking information from the appellant so that MassHealth can re-determine her household’s eligibility for MassHealth benefits; specifically, the appellant has not submitted proof of income or a non-custodial parent form for one of her minor children. These items were due to be returned to MassHealth by December 3, 2024, but they were never received.

The MassHealth representative questioned the appellant about her income, stating first that the system has zero income for the appellant, and then asking, “[Appellant], is that still true?” Testimony. The appellant responded that no, it is not correct, she is now working. The MassHealth representative requested that the appellant send in a paystub to MassHealth as proof of her income; she also stated that the appellant needs to send in a non-custodial parent form for one of her minor children. The MassHealth representative offered to mail the appellant the form and explained how the appellant could access the form online and fax it to MassHealth. The appellant stated she would likely fax the documentation since she had returned the paystubs in November 2024 to MassHealth but apparently, they were never received. Testimony. After further discussion about how much time the appellant would need to provide the outstanding information to MassHealth, the hearing officer agreed to keep the record open after the hearing so that the appellant could submit her documentation via email.

The record was left open until January 29, 2025 to give the appellant the opportunity to submit the required documentation. Exhibit 5. On January 29, 2025, the appellant emailed all parties a completed non-custodial parent form and a current pay stub. Exhibit 6. MassHealth responded to all parties on February 6, 2025, and stated that the non-custodial parent form had been processed but that the pay stub could not be processed as submitted. The pay stub is missing critical information – the employer’s name and address. Exhibit 7. On February 7, 2025, the appellant agreed to provide a letter from her employer that would include the missing information. The hearing officer extended the record open period until February 18, 2025 for the appellant to

submit this letter. Exhibit 8. The appellant did not respond to the record open email chain after February 7, 2025. On February 25, 2025, MassHealth confirmed that the appellant never provided a letter from her employer to MassHealth and the hearing officer closed the administrative record. Exhibit 9.

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 has received MassHealth Standard benefits since March 8, 2016. Testimony and Exhibit 4.
2. In December 2024, the appellant failed to respond to a request for information and return proof of income, through a job update form, and a non-custodial parent form to MassHealth; as a result, she was informed by notice dated December 10, 2024 that her MassHealth Standard benefits would be terminated on December 24, 2024. Testimony and Exhibit 1.
3. The appellant filed a timely appeal of the December 10, 2024 notice. Exhibit 2.
4. The appellant has “aid pending,” pending the outcome of this appeal.
5. As of the date of the hearing, the appellant had not returned a non-custodial parent form or acceptable proof of income to MassHealth. Testimony.
6. The record was left open until February 18, 2025, to give the appellant the opportunity to submit the non-custodial parent form and acceptable proof of income to MassHealth. Exhibits 5 and 8.
7. As of February 25, 2025, MassHealth had not received acceptable proof of income for the appellant. Exhibit 9.

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.

As part of the enrollment and renewal process, MassHealth sets forth the following requirements for individuals who have already been enrolled in MassHealth:

502.007: Continuing Eligibility

(A) **Annual Renewals.** The MassHealth agency reviews eligibility once every 12 months. Eligibility may also be reviewed 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. The MassHealth agency updates eligibility based on information received as a result of such review. The MassHealth agency reviews eligibility

- (1) by information matching with other agencies, health insurance carriers, and information sources;
- (2) through a written update of the member's circumstances on a prescribed form;
- (3) through an update of the member's circumstances in person, by telephone, or on the MAHealthConnector.org account; or
- (4) based on information in the member's case file.

(B) **Eligibility Determinations.** The MassHealth agency determines, as a result of this review, if

- (1) the member continues to be eligible for the current coverage type;
- (2) the member's current circumstances require a change in coverage type, premium payment, or premium assistance payment; or

(3) the member is no longer eligible for MassHealth.

See 130 CMR 502.007.

Here, despite receiving ample time to provide the information requested, the appellant did not submit the verification sought by MassHealth—specifically, acceptable proof of her income. Therefore, MassHealth did not err in terminating her coverage in accordance with 130 CMR 502.003(D).

The appeal is hereby DENIED.

Order for MassHealth

Remove aid pending.

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