

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2419835
Decision Date:	02/07/2025	Hearing Date:	01/28/2025
Hearing Officer:	Thomas J. Goode	Record Open to:	01/31/2025

Appearance for Appellant:



Appearance for MassHealth:

Maran Yi, Tewksbury 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	Issue:	Eligibility
Decision Date:	02/07/2025	Hearing Date:	01/28/2025
MassHealth's Rep.:	Maran Yi	Appellant's Rep.:	██████████
Hearing Location:	Remote	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 ██████████ MassHealth notified Appellant that MassHealth coverage would terminate on ██████████ because Appellant would turn 65 years of age and a new application for people over 65 years of age must be completed; a second notice dated December 26, 2024 informed Appellant that MassHealth coverage was denied for failure to return an annual eligibility renewal (130 CMR 501.002(B), 502.007(C)(2), 515.001 and Exhibit 1). Appellant filed appeal requests in a timely manner on December 27, 2024 and January 3, 2025 (130 CMR 610.015(B) and Exhibit 2). Denial and termination of assistance are valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

Through a notice dated ██████████ MassHealth notified Appellant that MassHealth coverage would terminate on ██████████ because Appellant would turn 65 years of age and a new application for people over 65 years of age must be completed; a second notice dated December 26, 2024 informed Appellant that MassHealth coverage was denied for failure to return an annual eligibility renewal.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 502.007(C), 515.001 in determining that Appellant did not complete an annual renewal and did not submit to MassHealth a completed Senior application for individuals age 65 years of age and older.

Summary of Evidence

The MassHealth representative testified that Appellant is receiving MassHealth Standard coverage with Buy-In. On December 26, 2024, Appellant was notified that coverage was denied because she did not complete an annual renewal. A Senior Application was sent to Appellant in [REDACTED] because Appellant would turn 65 years of age in [REDACTED] 4. Appellant did not return the Senior Application to MassHealth, and did not complete the Senior Application by telephone. MassHealth informed Appellant that coverage would terminate on January 2, 2025 if she did not return the Senior Application; however, coverage is still in effect because the Board of Hearings protected coverage pending the outcome of the appeal. The MassHealth representative testified that she would connect Appellant to the application line that would help her complete the application by telephone and would check to confirm that the application was completed. The hearing record remained open until January 31, 2025 to allow Appellant to complete the Senior Application by telephone. On February 4, 2025, the MassHealth representative notified the Hearing Officer that the application had not been completed (Exhibit 4).

Appellant testified that she is enrolled in Commonwealth Care Alliance (CCA) and updated her eligibility information to CCA including her new address. She stated that she needs MassHealth coverage for medications and therapy. Appellant stated that she did not receive the annual eligibility review form because she moved, and received only the notice that her coverage was ending. She stated that she always returns information requested from MassHealth.

Findings of Fact

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

1. Appellant is receiving MassHealth Standard coverage with Buy-In.
2. On December 26, 2024, Appellant was notified that coverage was denied because she did not complete an annual renewal, which was not returned to MassHealth.
3. A Senior Application was sent to Appellant in [REDACTED] because Appellant was turning 65 years of age in [REDACTED]

4. During the pendency of this appeal, Appellant did not return the Senior Application to MassHealth, and did not complete the Senior Application by telephone.

Analysis and Conclusions of Law

Pursuant to 130 CMR 515.008: Responsibilities of Applicants and Members (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 other health insurance.

Pursuant to 130 CMR 515.001: Senior Application or Application is the request for health benefits for an individual who is 65 years of age and older, or not living in the community, that is received by the MassHealth agency and includes all required information and a signature by the applicant or his or her authorized representative.

Because Appellant is 65 years of age or older, the following regulations apply and describe the application process for individuals 65 years of age and over.

130 CMR 516.001: Application for Benefits

(A) Filing an Application.

(1) Application. To apply for MassHealth

- (a) for an individual living in the community, an individual or his or her authorized representative **must file a complete paper Senior Application and all required Supplements or apply in person at a MassHealth Enrollment Center (MEC); or**
- (b) for an individual in need of long-term-care services in a nursing facility, a person or his or her authorized representative must file a complete paper Senior Application and Supplements or apply in person at a MassHealth Enrollment Center (MEC).

130 CMR 519.005: Community Residents 65 Years of Age and Older

(A) Eligibility Requirements. Except as provided in 130 CMR 519.005(C), noninstitutionalized individuals 65 years of age and older may establish eligibility for MassHealth Standard coverage provided they meet the following requirements:

- (1) the countable-income amount, as defined in 130 CMR 520.009: **Countable-income Amount, of the individual or couple is less than or equal to 100% of the federal poverty level; and**
- (2) **the countable assets of an individual are \$2,000 or less, and those of a married**

couple living together are \$3,000 or less.

(B) Financial Standards Not Met. Except as provided in 130 CMR 519.005(C), individuals whose income, assets, or both exceed the standards set forth in 130 CMR 519.005(A) may establish eligibility for MassHealth Standard by reducing their assets in accordance with 130 CMR 520.004: *Asset Reduction*, meeting a deductible as described at 130 CMR 520.028: *Eligibility for a Deductible* through 520.035: *Conclusion of the Deductible Process*, or both.

(emphasis in **bold**)

By notice dated December 26, 2024, Appellant was notified that MassHealth was unable to renew coverage based on available federal and state data sources and an annual eligibility renewal was required to be completed within 90 days.¹ Appellant did not submit the annual renewal to MassHealth. By notice dated December 19, 2024, Appellant was informed that because she is 65 years of age or older, she must submit a new application for people 65 years of age or older for MassHealth to determine whether benefits would continue, or her coverage would end on January 2, 2025. Despite additional time to do so during a hearing record open period, Appellant did not complete the Senior Application. Appellant can contact MassHealth to complete the Senior Application by calling 1-800-841-2900.

The appeal is DENIED subject to the order below.

Order for MassHealth

Continue aid pending protection for 30 days from the date of this decision. If a completed Senior Application is submitted within 30 days, issue new notice of eligibility. If a completed Senior Application is not submitted within 30 days from the date of this hearing decision, remove aid pending protection and terminate coverage.

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.

¹ 130 CMR 502.007(C) cited in the December 26, 2024 notice addresses the eligibility process for members under 65 years of age; however, as Appellant is over 65 years of age, the over-65 rules apply.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Thomas J. Goode
Hearing Officer
Board of Hearings

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957