

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2500209
Decision Date:	3/17/2025	Hearing Date:	01/29/2025
Hearing Officer:	Susan Burgess-Cox	Record Open to:	03/06/2025

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Amanda Rebello

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:	Approved	Issue:	Community Eligibility- Under 65 – Coverage Start Date
Decision Date:	3/17/2025	Hearing Date:	01/29/2025
MassHealth's Rep.:	Amanda Rebello	Appellant's Rep.:	Pro se
Hearing Location:	All Parties Appeared by 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 6, 2024, MassHealth notified the appellant that they do not qualify for MassHealth as they did not provide proof in the time allowed. (130 CMR 502.003). The appellant filed a timely appeal on January 3, 2025. (130 CMR 610.015; Exhibit 2). The Board of Hearings scheduled a hearing for January 29, 2025. (Exhibit 3). The record was held open to provide the appellant with the opportunity to present additional evidence and MassHealth to respond. (Exhibit 4; Exhibit 5). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth determined that the appellant does not qualify for MassHealth as they did not provide proof in the time allowed. (130 CMR 502.003(D)).

Issue

Whether MassHealth was correct in determining that the appellant does not qualify for MassHealth as they did not provide proof in the time allowed.

Summary of Evidence

All parties appeared by telephone and the hearing officer administered the oath or affirmation to parties providing testimony at hearing.

In July 2024, the appellant provided MassHealth with updated information. MassHealth sent the appellant a request for information. The appellant did not provide the information listed in the request. MassHealth terminated coverage as of November 28, 2024. In December 2024, the appellant provided some information. MassHealth reinstated coverage and issued a second request for information. The agency was seeking proof of residency and a completed non-custodial parent form. The appellant sent MassHealth a lease agreement but no rent receipt. The agency did not accept the lease agreement alone as proof of residency.

The MassHealth representative testified that the noncustodial parent form was not filled out completely as it did not have information about the non-custodial parent, only the appellant. The MassHealth representative stated that the agency needs proof of a rental payment and a completed noncustodial parent form in order to determine eligibility.

At hearing, the appellant testified that she is a resident of Massachusetts. At hearing, the appellant provided the name of the noncustodial parents and stated that one lives in New York. And the other in the Dominican Republic.

At hearing, the MassHealth representative was asked if she would accept the testimony presented at hearing regarding the appellant's residency and information regarding the non-custodial parents. The MassHealth representative responded that the agency needs to have documents signed and sent to them. The MassHealth representative stated that the agency requires paper forms, not verbal attestations. The MassHealth representative stated that these are standards set by the agency. The MassHealth representative stated that once received, the agency could provide coverage 10 days prior to the receipt of the documents. The appellant testified that she incurred medical bills during the course of the termination and appeal process.

The record was held open for the MassHealth representative to send the forms requested by the agency, the appellant the opportunity to complete the forms and then the agency to provide a response to the appellant's submission. During the record open period, the MassHealth representative informed the Board of Hearings that the agency received the necessary information

and could provide coverage 10 days prior to the receipt of the documents which would be January 27, 2025. The MassHealth representative stated that the information submitted during the record open period was provided on February 5, 2025 and verified on February 6, 2025. The MassHealth representative stated that the appellant would have a gap in coverage from December 12, 2024 through January 26, 2025.

Findings of Fact

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

1. In July 2024, the appellant provided MassHealth with updated information.
2. MassHealth sent the appellant a request for information.
3. The appellant did not provide the information listed in the request.
4. MassHealth terminated coverage as of November 28, 2024.
5. In December 2024, the appellant provided information.
6. In December 2024, MassHealth issued a second request for information seeking proof of residency and a completed non-custodial parent form.
7. The appellant sent MassHealth a lease agreement but no rent receipt.
8. The agency did not accept the lease agreement alone as proof of residency.
9. At hearing, the appellant testified that she is a resident of Massachusetts.
10. At hearing, the appellant provided the name and information regarding the residency of two noncustodial parents.
11. During a record open period, MassHealth received the necessary information on February 5, 2025 and verified the information on February 6, 2025.
12. MassHealth determined that the appellant was eligible as of January 27, 2025.
13. MassHealth determined that the appellant has a gap in coverage from December 12, 2024 to January 27, 2025.

Analysis and Conclusions of Law

Pursuant to 130 CMR 502.003, MassHealth requires verification of eligibility factors including income, residency, citizenship, immigration status, and identity.

Pursuant to 503.002, as a condition of eligibility, an applicant or member must be a resident of the Commonwealth of Massachusetts. Unless otherwise specified

- (1) individuals 21 years of age and older are residents of the Commonwealth if they are living in the Commonwealth and either
 - (a) intend to reside in the Commonwealth, with or without a fixed address; or
 - (b) have entered the Commonwealth with a job commitment or are seeking employment, whether or not they are currently employed; or
- (2) individuals 21 years of age and older who are not capable of stating intent as defined in 42 CFR 435.403(c) are residents of the Commonwealth if they are living in the Commonwealth.
- (3) For any other non-institutionalized individuals 21 years of age and older not subject to 130 CMR 503.002(A)(1) or (2), their residence is determined in accordance with 45 CFR 233.40, the rules governing residence under the Transitional Assistance to Families with Dependent Children (TAFDC) program. (130 CMR 503.002(A)).

Pursuant to 130 CMR 503.002(E)(1), an individual's residency is considered verified if the individual has attested to Massachusetts residency and the residency has been confirmed by electronic data matching with federal or state agencies or information services. If residency cannot be verified through electronic data matching or there is conflicting information, MassHealth may require documentation to validate residency. (130 CMR 503.002(E)(2)).

Acceptable proof of Massachusetts residency includes the following, as well as any other verification allowed as determined by MassHealth:

- (1) copy of deed and record of most recent mortgage payment (if mortgage is paid in full, provide a copy of property tax bill from the most recent year);
- (2) current utility bill or work order dated within the past 60 days;
- (3) statement from a homeless shelter or homeless service provider;
- (4) school records (if school is private, additional documentation may be requested);
- (5) nursery school or daycare records (if school is private, additional documentation may be requested);

- (6) Section 8 agreement;
- (7) homeowner's insurance agreement;
- (8) proof of enrollment of custodial dependent in public school;
- (9) copy of lease and record of most recent rent payment; or
- (10) affidavit supporting residency signed under pains and penalties of perjury that states the individual is not visiting Massachusetts for personal pleasure or to receive medical care in a setting other than a nursing facility. (130 CMR 503.002(F)).

The regulatory list of proof of Massachusetts residency is not exclusive. (130 CMR 503.002(F)). Testimony at hearing regarding residency is comparable to an individual providing an affidavit signed under pains and penalties of perjury as the individual at hearing is sworn under oath or affirmation regarding the truthfulness of their testimony. (130 CMR 610.065(A)(1)). The appellant appeared at hearing, was sworn under oath and provided testimony regarding their current address in Massachusetts. The address testified to at hearing is the same as the address listed on the notice issued by MassHealth, the request for hearing form and the notice from the Board of Hearings. The appellant's testimony along with the documentation of the agency and the Board of Hearings provides acceptable proof of residency. The appellant also provided information that MassHealth accepted as proof of residency and other required information during the record open period. The MassHealth representative acknowledged receipt of this information but only reinstated coverage as of the date of the receipt by the agency during the hearing process.

The regulations governing the fair hearing process state that the effective date of any adjustments to a member's eligibility is the date on which all eligibility conditions are met, regardless of when the supporting evidence was submitted. (130 CMR 610.071(A)(2)). As the appellant presented the necessary documents during the course of the appeal, the effective date of the adjustment is the date in which the information was due in December 2024. Therefore, MassHealth should rescind the notice on appeal and approve coverage back to the date of termination, December 12, 2024 rather than the date in January noted by the MassHealth representative during the record open period.

This appeal is approved.

Order for MassHealth

Rescind the notice on appeal and determine the appellant eligible for MassHealth as of December 12, 2024.

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.

Susan Burgess-Cox
Hearing Officer
Board of Hearings

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616