Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2500475
Decision Date:	2/21/2025	Hearing Date:	02/04/2025
Hearing Officer:	Sharon Dehmand		

Appearance for Appellant: Pro se Appearance for MassHealth: Pamela Thomas, Springfield 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:	Community Eligibility – under 65
Decision Date:	2/21/2025	Hearing Date:	02/04/2025
MassHealth's Rep.:	Pamela Thomas	Appellant's Rep.:	Pro se
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 December 25, 2024, MassHealth notified the appellant that his coverage will end on January 8, 2025, because he did not submit a job update form to MassHealth within the allowed time frame. See 130 CMR 502.007 and Exhibit 1. The appellant filed this appeal in a timely manner on January 8, 2025. See 130 CMR 610.015(B) and Exhibit 2. Aid pending protection was put in place to protect the appellant's MassHealth benefits. Any action to suspend, reduce, terminate, or restrict a member's assistance is a valid ground for appeal to the Board of Hearings. See 130 CMR 610.032(A)(3).

Action Taken by MassHealth

MassHealth terminated the appellant's coverage effective on January 8, 2025, because he did not submit a job update form to MassHealth within the allowed time frame.

lssue

Whether MassHealth was correct in terminating the appellant's coverage for failure to submit a job update form to MassHealth within the allowed time frame. See 130 CMR 502.007.

Summary of Evidence

All parties appeared telephonically. MassHealth was represented by a worker from the Springfield MassHealth Enrollment Center. The appellant appeared pro se and verified his identity. The following is a summary of the testimonies and evidence provided at the hearing:

The MassHealth representative testified that the appellant has been on MassHealth CarePlus since March 22, 2024. The appellant had no reported income; however, a data match revealed unreported employment income. On November 20, 2024, a job update form was mailed out to the appellant's address on file, with a submission deadline of December 20, 2024. The appellant did not return the completed form. On December 25, 2024, MassHealth notified the appellant that his MassHealth coverage will end on January 8, 2025, because he did not submit the job update form within the allowed time frame. Aid pending protection was put in place to protect the appellant's MassHealth benefits. As of the hearing date, MassHealth had not received the completed job update form from the appellant.

The appellant stated that he did not receive the job update form because he had not lived at his previous address since September 2024. He acknowledged that he did not report his address change to MassHealth but had updated it with the post office. He added that he was unaware of the requirement to notify MassHealth directly. He stated that he only received the termination notice at his new address because it was forwarded by the post office.

The MassHealth representative advised the appellant to update his information with MassHealth by calling them, and the appellant agreed to do so.

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. (Testimony and Exhibit 4).
- 2. The appellant has been on MassHealth CarePlus since March 22, 2024. (Testimony and Exhibit 4).
- 3. On November 20, 2024, a job update form was mailed out to the appellant's address on file with the submission deadline of December 20, 2024. (Testimony).
- 4. MassHealth did not receive the job update form as requested. (Testimony).

- 5. On December 25, 2024, MassHealth notified the appellant that his MassHealth coverage will end on January 8, 2025, because he did not submit the job update form within the allowed time frame. (Testimony and Exhibit 1)
- 6. The appellant filed this appeal in a timely manner on January 8, 2025. (Exhibit 2).
- 7. Aid pending protection was put in place to protect the appellant's MassHealth benefits. (Testimony and Exhibit 4).
- 8. As of the hearing date, MassHealth had not received the requested job update form. (Testimony).

Analysis and Conclusions of Law

In order to determine eligibility, applicants have certain responsibilities as set forth in 130 CMR 501.010.

....(A) <u>Responsibility to Cooperate</u>. 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.

The MassHealth agency requires verification of eligibility factors including income, residency, citizenship, immigration status, and identity as described in 130 CMR 503.000. See 130 CMR 502.003. The MassHealth agency may initiate information matches with other agencies and

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information sources when an application is received, at annual renewal, and periodically, in order to update or verify eligibility. See 130 CMR 502.004. If the electronic data match indicates a change in circumstances that would result in potential reduction or termination of benefits, the MassHealth agency will notify the member of the information that was received through the data match and require the member to respond within 30 days of the date of the notice. See 130 CMR 502.007(C)(3)(a). If the member does not respond within 30 days and information necessary for eligibility determination is not available from electronic data sources, MassHealth coverage will be terminated. See 130 CMR 502.007(C)(3)(a)(3).

In the instant case, MassHealth notified the appellant on November 20, 2024, that he must submit a job update form, in order for MassHealth to determine his continued eligibility for benefits. See <u>Id</u>.; also see 130 CMR 501.010(A). The appellant admitted that he had not submitted the job update form as of the date of the hearing because he had not received it.¹ The appellant stated that he will update his information as required by calling MassHealth forthwith.²

Since the appellant admitted not submitting the required information in the allowed time frame, MassHealth appropriately notified the appellant that his coverage will end on January 8, 2025, for his failure to submit the required form. See 130 CMR 502.007(C)(3)(a)(3).

For the foregoing reasons, this appeal is DENIED.

Order for MassHealth

Remove aid pending protection.

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 The appellant's explanation for not submitting the form due to his change of address is unpersuasive, as he admitted that he failed to report his address change to MassHealth as required. See 130 CMR 501.010(B).

² If MassHealth receives the appellant's job update form, determination of benefit will be made by MassHealth, and the appellant will have separate right of appeal based on the new determination.

Sharon Dehmand, Esq. Hearing Officer Board of Hearings

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186