

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2501693
Decision Date:	4/28/2025	Hearing Date:	03/07/2025
Hearing Officer:	Kimberly Scanlon	Record Open to:	03/10/2025

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Milagro Behnk



*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; Residency
Decision Date:	4/28/2025	Hearing Date:	03/07/2025
MassHealth's Rep.:	Milagro Behnk	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center Room 1 (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 January 16, 2025, MassHealth notified the appellant that her coverage was terminating on January 30, 2025, because MassHealth determined that she receives Medicaid in another state (130 CMR 501.007; Exhibit 1). The appellant filed this appeal in a timely manner on or about January 27, 2025 (130 CMR 610.015(B); Exhibit 2). Termination and/or reduction of assistance is valid grounds for appeal (130 CMR 610.032). At the conclusion of the hearing, the record was left open for a brief period for the appellant to submit additional documentation (Exhibit 6).

Action Taken by MassHealth

MassHealth notified the appellant that her coverage was being terminated because it determined that she receives Medicaid in another state.

Issue

The appeal issue is whether MassHealth was correct in notifying the appellant that her coverage was being terminated because she receives Medicaid in another state.

Summary of Evidence

The MassHealth representative appeared at the hearing telephonically and testified as follows: the appellant is under the age of 65 and resides in a household of 1. On August 23, 2024, MassHealth received the appellant's application, which was processed. On or about August 23, 2024, MassHealth notified the appellant that she was eligible for MassHealth Standard coverage with Senior Buy-in benefits, effective August 12, 2024. On or about December 16, 2024, the appellant updated her address with MassHealth, which generated a notice requesting the appellant to provide proof of residency. MassHealth did not receive the appellant's proof of residency. On January 16, 2025, MassHealth's computer system performed an electronic data match with the appellant's address and subsequently determined that the appellant is receiving benefits in another state. On January 19, 2025, MassHealth notified the appellant that her coverage was terminating on January 30, 2025, because MassHealth determined that she receives Medicaid in another state (Exhibit 1). MassHealth contacted the appellant prior to the hearing and requested that she submit a self-attestation of proof of residency to MassHealth. As of the date of the hearing, MassHealth did not receive the appellant's self-attestation of proof of residency.

The appellant appeared at the hearing telephonically. She testified that MassHealth informed her that she could fax her self-attestation to MassHealth, attesting that she no longer lives in New York. The appellant stated that she faxed her self-attestation to MassHealth sometime last week. She explained that she requires MassHealth coverage to continue to receive care from the treatment facility. The appellant stated that it was frustrating to learn there is an issue with her MassHealth coverage.

The MassHealth representative stated that she has not received the appellant's submission. She inquired about the date that the appellant faxed the documentation to MassHealth. The appellant was not sure about the exact date; however, she confirmed the MassHealth fax number that she received was accurate. The MassHealth representative performed additional research and located a document that the appellant faxed to MassHealth on February 25, 2025. The document that the appellant faxed to MassHealth included her typed name, date of birth, social security number, and MassHealth Member ID number and was titled "Affidavit to MassHealth." The MassHealth representative explained that the document did not include the appellant's self-attestation of her current address though and therefore MassHealth cannot accept her submission. She explained that the appellant can submit a handwritten letter stating that she lives at her current address in Massachusetts, which she must sign and date.

The appellant stated that she would try to submit her self-attestation to MassHealth by the end of the business day, however, her case manager was not available that day to assist her. She stated that the address that MassHealth has on file is not correct because she was recently transferred to a building located across the street. Following the hearing, the record was left open for a brief period for the appellant to submit her self-attestation of residency (including her updated address) to MassHealth (Exhibit 5). MassHealth subsequently responded that it did not receive any further documentation from the appellant (Exhibit 6).

Findings of Fact

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

1. The appellant is under the age of 65 and resides in a household of 1.
2. On August 23, 2024, MassHealth received the appellant's application.
3. On or about August 23, 2024, MassHealth notified the appellant that she was eligible for MassHealth Standard coverage with Senior Buy-in benefits, effective August 12, 2024.
4. On or about December 16, 2024, the appellant updated her address with MassHealth, which generated a notice requesting the appellant to provide proof of residency. MassHealth did not receive the appellant's proof of residency.
5. On January 16, 2025, MassHealth's computer system performed an electronic data match with the appellant's address. MassHealth determined that the appellant is receiving benefits in another state.
6. On January 19, 2025, MassHealth notified the appellant that her coverage was terminating on January 30, 2025, because MassHealth determined that she receives Medicaid in another state.
7. The appellant timely appealed the MassHealth action.
8. The record was left open for the appellant to submit additional information to MassHealth.
9. MassHealth did not receive any further documentation from the appellant.

Analysis and Conclusions of Law

Pursuant to 130 CMR 501.010, applicants or members 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 request. If the member does not cooperate, MassHealth benefits may be terminated.

As a condition of eligibility, an applicant or member must be a resident of the Commonwealth of Massachusetts. 130 CMR 503.002. The individual's residency is considered verified if the individual has attested to the Massachusetts residency and the residency has been confirmed by electronic data matching with federal or state agencies or information services. 130 CMR 502.003(E)(1). If residency cannot be verified through electronic data matching or there is conflicting information, the MassHealth agency 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 the MassHealth agency:

- (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)).

In the present case, the issue is whether MassHealth was correct in notifying the appellant that her coverage was being terminated because she receives Medicaid in another state. Per 130 CMR 501.007, persons who are receiving public assistance from another state are not eligible for MassHealth. MassHealth asserts that the appellant can submit a self-attestation verifying her

residency; the appellant agreed to do so. Additionally, the appellant was granted a post-hearing record-open period to submit verification of her residency. Despite the additional time granted, however, the appellant did not submit any documentation to MassHealth that verified her residency. Without the requested information, the appellant has not fulfilled her obligations under 130 CMR 501.010. This appeal is 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.

Kimberly Scanlon
Hearing Officer
Board of Hearings

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