

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2504807
<b>Decision Date:</b>	6/16/2025	<b>Hearing Date:</b>	05/08/2025
<b>Hearing Officer:</b>	Christine Therrien		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Sheri Paiva, Taunton



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility – under 65
<b>Decision Date:</b>	6/16/2025	<b>Hearing Date:</b>	05/08/2025
<b>MassHealth’s Rep.:</b>	Sheri Paiva	<b>Appellant’s Rep.:</b>	Pro se
<b>Hearing Location:</b>	Taunton MassHealth Enrollment Center Telephonic		

## Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

## Jurisdiction

The appellant received a notice dated 3/18/25 stating: MassHealth has approved the person listed for MassHealth CarePlus with a start date of 3/8/25. (Exhibit 1). The appellant filed this appeal timely on 3/25/25. (130 CMR 610.015(B) and Exhibit 2). The start date for assistance is a valid ground for appeal. (130 CMR 610.032).

## Action Taken by MassHealth

MassHealth approved benefits beginning on 3/8/25.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002, in determining that the appellant was eligible for MassHealth CarePlus starting on 3/8/25.

## Summary of Evidence

The appellant is under 65. The MassHealth representative testified that on 1/9/25, MassHealth sent the appellant a job update form that was due back to MassHealth by 2/8/25. The MassHealth representative testified that MassHealth did not receive the requested job update form. The MassHealth representative testified that on 2/14/25, the MassHealth system did an automatic data match and determined the appellant was not eligible for MassHealth, but she was eligible for a Health Connector plan. The MassHealth representative testified that the appellant's MassHealth eligibility terminated on 2/28/25, 14 days after the new determination. The MassHealth representative testified that on 3/18/25, the appellant provided a job update over the phone. The MassHealth representative testified that the appellant was determined eligible for MassHealth CarePlus on 3/18/25 with a retroactive start date of 3/8/25.

The appellant testified that she never received the job update request, although she received all the other notifications sent by MassHealth. The appellant testified that she had a procedure on [REDACTED] 25, and the hospital did not notify her that she was no longer enrolled in MassHealth. The appellant testified that she was receiving Unemployment Insurance (UI) during the month of December 2024.

The MassHealth representative testified that on 11/25/24, the appellant was determined eligible for MassHealth, but there was no UI listed as income. The MassHealth representative testified that the job update request was likely triggered by the appellant's additional income in December from UI.

## **Findings of Fact**

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

1. The appellant is under 65.
2. On 1/9/25, MassHealth sent the appellant a job update form that was due back to MassHealth by 2/8/25. MassHealth did not receive the job update form.
3. On 2/14/25, the MassHealth system did an automatic data match and determined the appellant was not eligible for MassHealth, but she was eligible for a Health Connector plan.
4. The appellant's MassHealth eligibility terminated on 2/28/25, 14 days after the new determination.
5. On 3/18/25, the appellant provided a job update over the phone.
6. The appellant was determined to be eligible for MassHealth CarePlus on 3/18/25 with a

retroactive start date of 3/8/25.

7. On 11/25/24, the appellant was determined eligible for MassHealth.
8. The appellant was receiving UI during the month of December 2024.
9. The appellant had a procedure on [REDACTED] 25, and the hospital did not notify her that she was no longer enrolled in MassHealth.

## Analysis and Conclusions of Law

MassHealth requires verification of eligibility factors, including income, residency, citizenship, immigration status, and identity. MassHealth initiates information matches with other agencies and information sources when an application is received to verify eligibility. (130 CMR 502.003). When MassHealth did not receive the requested job update form from the appellant, a data match was automatically run, and the appellant was determined not eligible for MassHealth, but she was eligible for a Health Connector plan.

If MassHealth receives all the required information after a denial of eligibility, MassHealth reactivates the application and considers it submitted as of the date the information is received, and the medical coverage date is established according to 130 CMR 502.006. (130 CMR 502.002). The appellant provided the requested job update over the phone on 3/18/25, which makes her eligibility start date subject to the provisions of 130 CMR 502.006.

### 130 CMR 502.006: Coverage Dates

(A) Start Date of Coverage for Applicants. For individuals applying for coverage, the date of coverage for MassHealth is determined by the coverage type for which the applicant may be eligible. 130 CMR 505.000: *Health Care Reform: MassHealth: Coverage Types* describes the rules for establishing this date, except as specified in 130 CMR 502.003(E)(1), (F)(2), and (H)(2).<sup>1</sup>

(1) The start date of coverage for individuals approved for benefits under provisional eligibility is described at 130 CMR 502.003(E)(1).

(2) The start date of coverage for individuals who do not meet the requirements for provisional eligibility, as described at 130 CMR 502.003(E)(2)(a), is described at 130 CMR 502.006(A)(2)(a) through (d), except individuals described at 130 CMR 502.006(C).

(a) The start date for individuals who are pregnant or younger than 19 years of age who submit all required verifications within the 90-day time frame is described in 130 CMR 502.006(A)(2)(a)1. and 2.

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<sup>1</sup> None of the referenced exceptions apply. 130 CMR 502.003(E) Provisional Eligibility; 130 CMR 502.003(F) Reasonable Opportunity to Verify Citizenship and Identity or Immigration Status; 130 CMR 502.003(H) Hospital-determined Presumptive Eligibility.

1. If covered medical services were received during such period, and the individual would have been eligible at the time services were provided, the start date of coverage is determined upon receipt of the requested verifications and may be retroactive to the first day of the third calendar month before the month of application except as specified in 130 CMR 502.006(C).

**(b) For individuals not described in 130 CMR 502.006(A)(2)(a) who submit all required verifications within the 90-day time frame, the start date of coverage is determined upon receipt of the requested verifications and coverage begins ten days prior to the date of application, except as specified in 130 CMR 502.006(C).<sup>2</sup>**

(emphasis added)

MassHealth promptly approved the appellant for MassHealth CarePlus when the job update was completed on 3/18/25, with a retroactive start date 10 days prior on 3/8/25. As MassHealth made no errors in this process and the eligibility date complies with 502.006(A)(2)(b).

For this reason, the appeal is **denied**.

## **Order for MassHealth**

None.

## **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

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<sup>2</sup> 130 CMR 502.006(C) Limitations. MassHealth coverage start dates are subject to the following limitations. (1) The start date for Medicare premium payments for individuals determined eligible for MassHealth Standard, MassHealth CommonHealth, and MassHealth Medicare Savings Programs is described at 130 CMR 505.002(O), 505.004(L), and 505.007. (2) The start date for Premium Assistance Payments for individuals eligible for MassHealth Standard, MassHealth CommonHealth, MassHealth Family Assistance, and MassHealth CarePlus is described at 130 CMR 506.012(F)(1)(d).

Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

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Christine Therrien  
Hearing Officer  
Board of Hearings

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center