

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Numbers:	2506078 and 2506079 (consolidated)
Decision Date:	07/08/2025	Hearing Date:	5/19/2025
Hearing Officer:	Cynthia Kopka		

Appearance for Appellant:



Appearance for MassHealth:

Kay Omokoya, Charlestown 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, renewal
Decision Date:	07/08/2025	Hearing Date:	5/19/2025
MassHealth's Rep.:	Kay Omokoya	Appellant's Rep.:	██████
Hearing Location:	Charlestown (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

By notice dated April 4, 2025, MassHealth terminated Appellants' benefit effective April 18, 2025 for failure to renew. Exhibit 1. Appellants filed requests for hearing in a timely manner on April 16, 2025, and were eligible to retain the benefits pending the outcome of the appeal. Exhibit 2. 130 CMR 610.015(B), 130 CMR 610.036. Termination of assistance is a valid basis for appeal. 130 CMR 610.032.

Action Taken by MassHealth

MassHealth terminated Appellants' benefit effective April 18, 2025, for failure to renew.

Issue

The appeal issue is whether MassHealth was correct in terminating Appellants' benefit for failure to renew.

Summary of Evidence

The MassHealth representative appeared by phone and testified as follows: At the time the appealed notice issued, Appellants were in a household of 3 consisting of a parent, adult child, and minor child. The household was receiving MassHealth Standard. Appellants did not submit an annual renewal for coverage to continue. On April 4, 2025, MassHealth notified Appellants that the benefit would end on April 18, 2025 for failure to submit the renewal application.

Appellant parent appeared by phone on the household's behalf (with permission from the adult child to represent her interest). Appellants had not received the renewal application in the mail. The MassHealth representative confirmed that MassHealth had an incorrect address on file and updated the system. The MassHealth representative agreed to mail a new renewal application to Appellants, and also went over other options for submission, including online, by phone, or in person at an enrollment center. Appellant parent confirmed that the household size would remain the same. Appellant parent acknowledged understanding that aid pending would protect the MassHealth Standard until the appeal decision issued.

Findings of Fact

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

1. Appellants are in a household of three and are all under the age of 65.
2. On April 4, 2025, MassHealth notified Appellants that it would terminate Appellants' MassHealth Standard coverage on April 18, 2025 for failure to submit the annual eligibility renewal. Exhibit 1.
3. Appellants filed requests for hearing on April 16, 2025 and were eligible to keep the prior benefit level during the appeal. Exhibit 2.
4. Appellants had not yet submitted a renewal application as of the date of hearing.

Analysis and Conclusions of Law

Pursuant to 130 CMR 501.010(A), an "applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility...". As part of the enrollment and renewal process, MassHealth sets forth the following requirements for individuals who have already been enrolled in MassHealth:

502.007: Continuing Eligibility

- (A) Annual Renewals. The MassHealth agency reviews eligibility once every 12

months. Eligibility may also be reviewed as a result of a member's change in circumstances, or a change in MassHealth eligibility rules, or as a result of a member's failure to provide verification within requested time frames. The MassHealth agency updates eligibility based on information received as a result of such review. The MassHealth agency reviews eligibility

- (1) by information matching with other agencies, health insurance carriers, and information sources;
- (2) through a written update of the member's circumstances on a prescribed form;
- (3) through an update of the member's circumstances in person, by telephone, or on the MAHealthConnector.org account; or
- (4) based on information in the member's case file.

(B) Eligibility Determinations. The MassHealth agency determines, as a result of this review, if

- (1) the member continues to be eligible for the current coverage type;
- (2) the member's current circumstances require a change in coverage type, premium payment, or premium assistance payment; or
- (3) the member is no longer eligible for MassHealth.

130 CMR 502.007.

When MassHealth either cannot determine a member's continued eligibility through electronic data matches or when information is obtained but would change the member's eligibility to a less comprehensive benefit, MassHealth outlines the following renewal process in 130 CMR 502.007(C)(2), set forth in pertinent part:

- (a) The MassHealth agency will notify the head of the household of the need to complete the renewal application.
- (b) The head of the household will be given 45 days from the date of the request to return the ... renewal application, ...
 1. If the renewal application is completed within 45 days, eligibility will be determined using the information provided by the individual with verification confirmed through electronic data matches if available. ...
 2. If the renewal application is not completed within 45 days, the MassHealth agency will
 - a. use information received from electronic sources, if available, and redetermine eligibility; or
 - b. if information is not available from electronic sources, terminate MassHealth coverage as described at 130 CMR 502.006(B).

Here, it is undisputed that Appellants did not submit a renewal application as of the date of

hearing. As there was no error in MassHealth's April 4, 2025 notice, 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.

Cynthia Kopka
Hearing Officer
Board of Hearings

MassHealth Representative: Thelma Lizano, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129