

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Approved	Appeal Number:	2511102
Decision Date:	11/18/2025	Hearing Date:	August 26, 2025
Hearing Officer:	Mariah Burns		

Appearance for Appellant:



Appearance for MassHealth:

Carmen Rivera, Quincy MassHealth Enrollment Center



*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; Start Date
Decision Date:	11/18/2025	Hearing Date:	August 26, 2025
MassHealth's Rep.:	Carmen Rivera	Appellant's Rep.:	██████
Hearing Location:	Telephone (Quincy)	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 June 3, 2025, MassHealth approved the appellant's newborn child for MassHealth Standard benefits with an effective date of May 12, 2025. *See* Exhibit 1. The appellant filed this appeal in a timely manner on July 29, 2025. *See* 130 CMR 610.015(B) and Exhibit 2. Challenging a benefit start date is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth approved the appellant's newborn child for MassHealth Standard benefits with an effective date of May 12, 2025.

Issue

The appeal issue is whether the appellant's newborn child can receive benefits retroactive to the child's date of birth.

Summary of Evidence

The appellant is a MassHealth Standard member who resides in a household of at least two with

her newborn child. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. All parties appeared at the hearing by telephone. The following is a summary of the testimony and the evidence given at the hearing.

The appellant's child was born on [REDACTED]. The appellant applied for MassHealth benefits for her child¹, and MassHealth approved the child for MassHealth Standard benefits with a start date of May 12, 2025. MassHealth issued a notice to that effect on June 3, 2025. At the hearing, the MassHealth representative reported that she backdated the approval date for the child's MassHealth Standard to the child's date of birth. However, the appellant reported that the plan she enrolled her child in gave her a start date of [REDACTED], and that the coverage was not backdated. She testified that the hospital assisted her with applying for MassHealth on her child's behalf. She further stated that she received bills from the hospital for services the child received at birth, and the appellant also received a bill from the child's pediatrician for her first visit after discharge from the hospital. The MassHealth representative was unable to discern why the appellant could not enroll her child for an earlier date, but agreed that the child should be covered as of her date of birth.

The MassHealth representative provided documents that showed that the appellant's child is enrolled in the Revere Health Choice Accountable Care Organization (ACO) with an effective date of [REDACTED].

Findings of Fact

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

1. The appellant is a MassHealth Standard member who gave birth on [REDACTED]. Exhibit 4, Testimony.
2. On June 3, 2025, MassHealth issued a notice approving the appellant's newborn child for MassHealth Standard with an effective date of [REDACTED]. Exhibit 1.
3. The appellant filed a timely request for fair hearing on July 29, 2025. Exhibit 2.
4. The appellant and her child categorically and financially qualify for MassHealth Standard. Testimony.

¹ The exact date of application was not clear from the testimony. The appellant reported that the MassHealth paperwork was mailed from the hospital. The benefit start date of May 12 would imply that MassHealth received the application on May 22, or ten days after the start date.

5. At the hearing, the MassHealth representative stated that the child's effective approval date has been backdated to her date of birth. Testimony.

6. The appellant was unable to enroll her child in the Revere Health Choice ACO plan until [REDACTED] and that plan could not be backdated for reasons unknown to the MassHealth representative. Testimony, Exhibit 5.

7. The appellant incurred multiple medical bills for the child between the child's birth and the date she was allowed to enroll in a MassHealth plan. Testimony.

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 505.000 *et seq.* explain the categorical requirements and financial standards that must be met to qualify for a particular MassHealth coverage type. The rules of financial responsibility and calculation of financial eligibility for individuals who are under age 65 are detailed in 130 CMR 506.000: *Health Care Reform: MassHealth: Financial Requirements*. The MassHealth coverage types are:

- (1) *MassHealth Standard* - for pregnant women, children, parents and caretaker relatives, young adults, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health (DMH) members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) *MassHealth CommonHealth* - for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) *MassHealth CarePlus* - for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) *Family Assistance* - for children, young adults, certain noncitizens, and persons who are HIV positive who are not eligible for MassHealth Standard, CommonHealth, or CarePlus;
- (5) *Limited* - for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs, and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (6) *MassHealth Medicare Savings Programs (MSP, also called Senior Buy-In and Buy-In)* - for certain Medicare beneficiaries.

130 CMR 505.001(A) (emphasis added).

A child born to "an individual who was receiving MassHealth on the date of the child's birth is automatically eligible for one year..." 130 CMR 505.002(B)(1)(b). Furthermore, MassHealth allows the coverage for children under 19 who received covered medical services prior to the date of an

application for MassHealth benefits to be “retroactive to the first day of the third calendar month before the month of application.” 130 CMR 502.003(F)(2).

In this case, the appellant and MassHealth agree that the appellant’s child should be eligible to receive MassHealth Standard benefits on the day of her birth. She received medical services on that date and applied for benefits well within the time frame contemplated by 130 CMR 502.003(F)(2). Furthermore, it was inexplicable to the MassHealth representative as to why the appellant was unable to enroll her child in a plan retroactive to her date of birth. Finally, MassHealth determined that the appellant’s child is eligible for MassHealth Standard as of that date. The fair hearing rules allow “the effective date of any adjustment to the appellant’s eligibility status [to be] the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted.” 130 CMR 610.071(A)(2). The record evidence and the relevant regulations demonstrate that the appellant’s child was categorically and financially eligible for MassHealth Standard as [REDACTED] (the date of her birth), and she should have been permitted to enroll in a MassHealth Standard plan as of that date. As such, I find 1) that the June 3, 2025, notice approving the appellant’s child for MassHealth Standard effective May 12, 2025, was issued in error and 2) the appellant’s child should be allowed to enroll in a plan effective [REDACTED] to cover the cost of medical services received in the days following her birth.

For the foregoing reasons, the appeal is hereby APPROVED.

Order for MassHealth

Approve the appellant’s child for MassHealth Standard effective [REDACTED], and allow her to enroll in a plan effective that date, or otherwise facilitate a fee-for-service payment for medical expenses incurred as a result of the child’s birth.

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.

Mariah Burns
Hearing Officer
Board of Hearings

MassHealth Representative: Quincy MEC, Attn: Cassandra Moura, Appeals Coordinator

cc: Timothy Sullivan, MassHealth Contract Manager, Revere Health Choice ACO