

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Approved in part; Denied in part.	<b>Appeal Number:</b>	2515731
<b>Decision Date:</b>	1/8/2026	<b>Hearing Date:</b>	11/25/2025
<b>Hearing Officer:</b>	Radha Tilva	<b>Record Open to:</b>	n/a

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Sherianne Paiva, Taunton MEC Rep.



*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>	Approved in part; Denied in part	<b>Issue:</b>	Eligibility – under 65
<b>Decision Date:</b>	1/8/2026	<b>Hearing Date:</b>	11/25/2025
<b>MassHealth’s Rep.:</b>	Sherianne Paiva	<b>Appellant’s Rep.:</b>	Pro se
<b>Hearing Location:</b>	Taunton (telephonic)	<b>Aid Pending:</b>	No

## Authority

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

## Jurisdiction

Through notice(s) dated October 22, 2025, MassHealth approved MassHealth Standard benefits effective October 1, 2025 (Exhibit 1).<sup>1</sup> The appellant filed this appeal in a timely manner on October 24, 2025 (see 130 CMR 610.015(B) and Exhibit 2). Challenging the scope of assistance is valid grounds for appeal (see 130 CMR 610.032).

## Action Taken by MassHealth

MassHealth determined appellant is approved for MassHealth Standard benefits effective October 1, 2025.

## Issue

The appeal issue is whether MassHealth was correct in determining that eligibility start date for MassHealth benefits.

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<sup>1</sup> Only 4 hearing notices were provided and in the hearing file, 1 for appellant and 3 for her children. It was explained at hearing that the approval notices were issued for all the children thus the appeal pertains to appellant and her 5 children.

## Summary of Evidence

The MassHealth representative appeared by telephone and testified that appellant has a household size of 7 (consisting of husband, wife and 5 children). The appellant's tax status is married, but filing separately with zero reported income. Thus, appellant and all her children are eligible for MassHealth Standard. The MassHealth representative explained that on August 25, 2025 the immigration status was updated to QLP as the appellant met the 5-year immigration bar. On October 17, 2025 the Health Connector agent reported a change. The appellant and husband were determined Health Connector eligible and MassHealth decision pending. The children were determined eligible for MassHealth Standard. On October 22, 2025 it was reported that appellant was no longer working; thus all members were determined eligible for MassHealth Standard benefits. The next day the appellant called to report that she had medical bills that needed to be paid and that she was looking for retroactive coverage.

The MassHealth representative explained that three-month retroactive coverage is only given to new applicants and this was not a new application. The first application was in 2016, then in 2017, then 2018, and last in 2023. The MassHealth representative explained that MassHealth and the Health Connector use the same application. The MassHealth representative stated that the appellant got coverage until October 1, 2025 (the start of the month), because MassHealth now gives coverage going back to the first of the month.

The MassHealth representative also explained that appellant had to pay a premium for her Health Connector coverage because it was reported that she was married, but filing separately. The MassHealth representative explained that in order to qualify for a subsidy you have to be married and filing jointly.

The appellant appeared by telephone and testified that she called Health Connector on October 17, 2025 to ask for financial assistance because she had a large amount due and the representative asked if she had an income change. The appellant stated that she told the representative that the income change happened in 2014, but that she didn't report it to MassHealth because she was still able to pay the premium. The appellant stated that she thought that she began the application with the representative for the first time then. The appellant testified that she filed jointly in 2023, 2024, and 2025. The appellant was not under the impression that because she utilized Health Connector benefits that she had an application pending with MassHealth. The appellant testified that she thought that she wrote in the application that she did not want any subsidies. The appellant further testified that she was never asked if she had any medical bills or wanted 3-month retroactive coverage. The appellant testified that her Health Connector ended on July 31, 2025, because she could not pay the premium. The appellant stated that she only had one sick child (N.L.) who she wants the retroactive coverage for back to August 2025. For the other children, she was fine with coverage going retroactive to a month prior.

## Findings of Fact

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

1. The appellant has a household size of 7 consisting of herself, husband and 5 minor children.
2. The appellant and her family were previously on a plan through the Health Connector which terminated on or around July 31, 2025.
3. On October 17, 2025 the appellant spoke with a Health Connector agent who reported a change and determined that appellant's children were eligible for MassHealth Standard and appellant and her husband were Health Connector eligible with MassHealth decision pending proof of verifications.
4. The appellant called again and reported on October 22, 2025 that she was no longer working and thus MassHealth determined all of the members eligible for MassHealth Standard benefits effective October 1, 2025.
5. The appellant called the next day to report that she had medical bills that needed to be paid and that she was requesting retroactive coverage.
6. Appellant's income changed in 2014, but she did not report it until October 17, 2025.
7. The appellant had one child who was sick for whom she wanted retroactive coverage to pay his medical bills from August 2025. She was fine with coverage going back for the other children to just one month prior.

## Analysis and Conclusions of Law

130 CMR 502.006 states the following:

**(B) Coverage Dates for Existing Members Who Have a Change in Benefits.** The date of coverage for existing members whose MassHealth coverage type changes due to a change in circumstances are described in 130 CMR 502.006(B)(1) through (4).

**(1) For existing members who are pregnant or younger than [REDACTED], when an eligibility determination results in a more comprehensive benefit,** except as described in 502.006(C)

**(a) 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 the new coverage may be retroactive to the first day of the third calendar month prior to**

1. the receipt of the requested verifications;

2. the receipt date of the annual renewal;
- 3. the date of the eligibility determination for reported changes that do not result in request for verification; or**
4. the date of the MassHealth agency's eligibility determination due to information in the member's case file;

(130 CMR 502.006(B) Emphasis added). Based on the above regulation, the start date for the children that received medical services should be retroactive to the first day of the third calendar month prior to the date of MassHealth's eligibility determination, which was October 22, 2025. Three months retroactive to that date is July 1, 2025. While the appellant's testimony reflects that she only needed three months retroactive coverage for one of her children (N.L.) and one month retroactive coverage for the other children, the regulation supports that if covered services were provided during the period and the individual would have been eligible at the time the services were provided then coverage should go retroactive to the first day of the third calendar month prior to the eligibility determination. Thus, all children should receive retroactive coverage to July 1, 2025. The appeal as to the children is APPROVED.

With respect to the appellant, as she is not under the age of [REDACTED] or pregnant, the relevant regulation only supports ten days retroactive coverage (see 130 CMR 502.006(B)(2). EOM 25-14 (dated August 2025), however, updated the start date rules and now provides retroactive coverage to the first day of the month of the date of application or date of eligibility determination which in this case would be October 1, 2025. While EOM 25-14 does allow for 3 months' retroactive coverage for all MassHealth applicants, the applicants must meet certain conditions which consist of a) having a covered service, and b) would have been eligible for MassHealth when those services were received. The record does not reflect that the appellant, herself, had any covered services during that time. For these reasons MassHealth did not err in determining the eligibility start date of October 1, 2025. The issue of whether appellant is a new applicant or not does not need to be determined as even if she was considered an applicant she fails to meet the requisite conditions. The appeal as to appellant is DENIED.

## **Order for MassHealth**

Modify approval notices for children and update their MassHealth Standard coverage to begin July 1, 2025.

## **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.

## **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.

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Radha Tilva  
Hearing Officer  
Board of Hearings

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780