

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied in part; Dismissed in part	Appeal Number:	2517784
Decision Date:	02/06/2026	Hearing Date:	01/02/2026
Hearing Officer:	Casey Groff		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Jose Berrios, Springfield 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 in part; Dismissed in part	Issue:	Eligibility; Under 65; Coverage Start Date
Decision Date:	02/06/2026	Hearing Date:	01/02/2026
MassHealth's Rep.:	Jose Berrios	Appellant's Rep.:	<i>Pro se</i>
Hearing Location:	Board of Hearings (Remote)	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 11/25/25, MassHealth notified Appellant that she had been approved for MassHealth Standard benefits effective 11/1/25. *See* Exhibit 1. Appellant filed a timely appeal on 12/2/25 to challenge the coverage start date. *See* 130 CMR 610.015(B) and Exhibit 2. An action to limit or reduce the scope of assistance is a valid ground for appeal under 130 CMR 610.032.

Action Taken by MassHealth

MassHealth approved Appellant for MassHealth Standard benefits effective 11/1/25.

Issue

The issue on appeal is whether MassHealth correctly reinstated Appellant's MassHealth Standard coverage effective 11/1/25, and whether Appellant is entitled to an earlier coverage start date.

Summary of Evidence

A MassHealth eligibility representative appeared at the hearing and testified as follows: Appellant is a MassHealth member under the age of 65. On 5/28/25, MassHealth notified Appellant that her Standard benefit would end on 6/11/25 because MassHealth received information that she was receiving benefits in another state.

On 11/21/25, Appellant contacted MassHealth to seek reinstatement of her coverage. At that time, she was advised to submit proof of residency in order to have the closure removed from her case. Appellant submitted a utility bill as proof of address. On 11/25/25, MassHealth issued a notice informing Appellant that she had been approved for MassHealth Standard effective 11/1/25. See Exh. 1. Both the 5/28/25 and 11/25/25 notices were sent to the same address. For all relevant times, Appellant has been financially eligible for MassHealth, receiving approximately \$1,600 in Social Security income per month.

Appellant appeared at the hearing and testified that although the address listed on both notices is her correct address, she never received the 5/28/25 termination notice and was unaware her benefit ended. Appellant appealed the 11/25/25 approval notice seeking to have coverage backdated to 6/11/25 to close the gap in coverage.

When asked if she incurred medical expenses during this period, Appellant testified that she had a \$35 copay for a neurology appointment in [REDACTED] however, she did not attend the appointment after being told by the provider that her coverage was not active and that she would be responsible for the copay. In addition, Appellant received a \$100 bill for a hospital visit in November 2024.

Appellant testified that she is primarily concerned that her MassHealth coverage is “not working” and that she experiences frequent interruptions in coverage. She stated that her providers have informed her that claims submitted to MassHealth are not being paid. She further testified that MassHealth records continue to indicate that she is receiving benefits in another state, which she disputed. Appellant testified that she has lived in Massachusetts for years, is not receiving out-of-state benefits, and that she has attempted on multiple occasions to correct this information with MassHealth.

In response, the MassHealth representative testified that Appellant had active MassHealth Standard coverage during the full months of May 2025 and November 2024, and that her providers should be able to bill MassHealth for covered services rendered during those periods.

Findings of Fact

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

1. Appellant is a MassHealth member under the age of 65.
2. On 5/28/25, MassHealth notified Appellant that her Standard benefit would end on 6/11/25 because MassHealth received information that Appellant was receiving benefits in another state.
3. On 11/21/25, Appellant submitted proof of residency to MassHealth.
4. On 11/25/25, MassHealth issued a notice informing Appellant that she had been approved for MassHealth Standard effective 11/1/25.
5. Both the 5/28/25 and 11/25/25 notices were sent to Appellant's correct address.
6. Appellant did not incur out of pocket medical expenses for covered MassHealth services during the gap in coverage between 6/11/25 and 11/1/25.

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 502.006 describe the protocols for determining an applicant or member's coverage start date. In conjunction with the regulations, MassHealth *Eligibility Operations Memo (EOM) 25-14* (Aug. 2025) implemented updates to its start date policy in accordance with federal requirements at 42 CFR § 435.915. Under the updated policy, all MassHealth approvals or upgrades are made retroactive to the first day of the month of the date of application or eligibility determination date. See *EOM 25-14*. In addition, MassHealth grants "all eligible applicants with retroactive coverage for up to three calendar months prior to the month of application" if the applicant (1) had covered medical services during the retroactive period; and (2) would have been eligible for MassHealth during that time. *Id.*

By filing this appeal, Appellant is requesting that her MassHealth Standard coverage be backdated to 6/11/25 to close a gap in coverage and to address billing concerns with her providers.

The evidence in the record demonstrates that Appellant would have met both the residency and financial eligibility requirements to qualify for MassHealth during the period between 6/11/25 and 11/1/25. However, Appellant did not receive any covered medical services during the gap in coverage. Appellant identified two dates of service: (1) a neurology appointment in May 2025, which she did not attend after being informed by the provider that her MassHealth coverage was not active, and (2) a hospital visit in November 2024. The MassHealth representative confirmed that Appellant had active MassHealth Standard coverage on both dates in question.

Because Appellant did not incur any out-of-pocket expenses for MassHealth covered services between 6/11/24 and 11/1/25, she does not meet the criteria for extended retroactive coverage for that period under 42 CFR § 435.915 and EOM 25-14. Accordingly, MassHealth correctly established Appellant's coverage start date as 11/1/25 – the first day of the month of the date of application or eligibility determination date. *See* EOM 25-14. The appeal is therefore DENIED with respect to the start date.

Additionally, the appeal is DISMISSED with respect to Appellant's concern that her providers are unable to verify her coverage and that MassHealth records continue to indicate that she is receiving benefits in another state. These concerns related to administrative and billing matters that are outside the authority of the Board of Hearings to resolve in a fair hearing. *See* 130 CMR §§ 610.003, 610.032, 610.035(A)(4). To the extent that Appellant sought to appeal the 5/28/25 termination notice, the appeal is DISMISSED as untimely. *See* 130 CMR 610.015, 610.035(A)(1)

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

Casey Groff
Hearing Officer
Board of Hearings

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 243 Cottage Street, Springfield, MA 01104