# **Information about Your Hearing**

Appeal Representative: You may appoint another person to help you during the hearing or appoint another person with written permission to represent you.

Legal: You have the right to the following.

* A lawyer or other expert at your own expense. To ask about free legal services, call MassHealth Customer Service at (800) 841-2900, TDD/TTY: 711.
* A witness to testify for you.
* An interpreter at our expense.
* A reasonable accommodation.
* A new hearing date. If you have good cause of a serious nature for not being able to attend the hearing, you must contact the Board of Hearings at least one day before the hearing date. If you fail to reschedule or appear at the hearing without documented good cause, your appeal may be dismissed.

Access to MassHealth Case File: You and your appeal representative have the right to examine your MassHealth case file for eligibility or other information before or during the hearing. To request your case file, contact MassHealth Customer Service at (800) 841-2900. For orthodontic hearings, BeneCare will send you a copy of the packet via email before the hearing date. If you do not receive it two business days before your hearing, call BeneCare at 844-MH-DENTL (844-643-3685). For PCA, Home Health Service, or DME matters, please contact Optum at (844) 368-5184.

What to Have Ready on the Hearing Date: For your appeal, you should have ready any papers, evidence, or other related information that you want the Hearing Officer and other parties to consider. If there is time before the hearing, send your documents to the Board of Hearings via fax or to the mailing address above. You can also e-mail your documents to: **BOH-FairHearingSubmissions@mass.gov.** Otherwise, you will need to ask the Hearing Officer for more time to submit the information.

During the Hearing: The Hearing Officer will administer an oath to everyone who will testify. The Officer will also record the hearing to keep an official record. MassHealth will explain its action, then you or your representative will explain why you disagree. You may question the MassHealth representative and witnesses.

After the Hearing: If your appeal is not resolved, the Hearing Officer will issue a written decision. If you disagree with that decision, you may appeal it to court.

Withdrawing a Request: To withdraw your request for a fair hearing at any time, you may call us at our number listed above, send a written letter to the Board of Hearings via fax or to the address listed above, or send an e-mail to **BOH-Withdrawals@mass.gov**. Some appeals can be resolved before the hearing date.

## MassHealth Enrollment Centers

You can go to the following MassHealth Enrollment Centers to attend an in-person hearing or to address your questions.

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| --- | --- | --- | --- |
| 45 Spruce Street  Chelsea, MA 02150 | 529 Main Street  Charlestown, MA 02129 | 100 Hancock Street, 1st Fl  Quincy, MA 02171 | 88 Industry Ave, Suite D  Springfield, MA 01104 |
| 21 Spring Street, Suite 4  Taunton, MA 02780 | 367 East Street  Tewksbury, MA 01876 | 50 SW Cutoff, Suite 1A  Worcester, MA 01604 |  |