

**STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES (EOHHS)**

Docket: 26-2038

v.

Department of Human Services

DECISION

I. INTRODUCTION

On November 13, 2025, the Department of Human Services (“DHS”) issued [REDACTED] (“Appellant”) a BENEFITS DECISION NOTICE (“BDN”) that informed the Appellant that Long Term Services and Supports (“LTSS”) benefits were changing and Medicare Premium Payments (“MPP”) benefits were ending. On April 1, 2026, the Appellant submitted APPEAL REQUEST [REDACTED] in RI Bridges case [REDACTED] to the Executive Hearing Office (“EHO”) to dispute DHS’s decisions.

An administrative pre-hearing telephone conference was held in accordance with the Administrative Procedures Act as set forth by the R.I. Gen. Laws §42-35-1 on August 18, 2026, via Microsoft Teams, as the Appellant declined the video option. For reasons discussed in this decision, the Appellant’s appeal is untimely and therefore the appeal is denied.

II. JURISDICTION

Per R.I. Gen. Laws §42-7.2 EOHHS is to serve as the principal agency for managing the departments of children, youth and families; health; human services; behavioral healthcare; developmental disabilities and hospitals. As such, EOHHS is responsible for legal services



including applying and interpreting the law, hearings and appeals, administrative adjudication duties and related functions of said state agencies.

III. ISSUES

The preliminary issue to be decided was whether the appeal was filed timely in order to allow this hearing to go forward and rule on the merits, and if timely, were the actions taken by DHS in compliance with applicable regulations.

IV. STANDARD OF PROOF

It is well settled that in formal or informal adjudications modeled on the Federal Administrative Procedures Act, unless otherwise specified, a preponderance of the evidence is generally required to prevail. (2 Richard J. Pierce, Administrative Law Treaties § 10.7 (2002) & see Lyons v. Rhode Island Pub. Employees Council 94, 559 A.2d 130, 134 (R.I. 1989) (preponderance standard is the “normal” standard in civil cases). This means that for each element to be proven, the factfinder must believe that the facts asserted by the proponent are more probably true than false. When there is no direct evidence on a particular issue, a fair preponderance of the evidence may be supported by circumstantial evidence. (Narragansett Electric Co. vs. Carbone, 898 A.2d 87 (R.I. 2006)).

V. PARTIES

Jennifer Ramos, Eligibility Technician III represented DHS. The Appellant did not appear. [REDACTED], the Appellant’s Durable Power of Attorney and Authorized Representative [REDACTED], were present; [REDACTED] represented the Appellant. The administrative record contained the BDN, the Appellant’s appeal request and correspondence between the EHO and the Appellant.

VI. RELEVANT LAW/REGULATIONS

Per the Rhode Island Code of Regulations (“RICR”) it is the responsibility of the EHO to review appeal requests it receives; to determine that the request has been submitted in accordance with applicable procedures, filing requirements and regulations. For appeal requests that are incomplete, the EHO is to notify the affected party. The notification includes, why the request has not been accepted, the reason for determining the request is incomplete and if there is any cure for the defects, and if so the timeline in which the appellant may submit an amended request. (210-RICR-10-05.2.2.1(A)(8)).

Medicaid has many pathways, two of which are LTSS and MPP. Medicaid appeals must be filed within 30 days of the contested agency action. The 30 days begin five days after the mailing date of the notice of an intended agency action. (210-RICR-10-05.2.2.1(A)(9)).

VII. FINDINGS OF FACTS

1. The BDN issued on November 13, 2025, informed the Appellant of intended adverse actions.

2. The Notice was mailed to the Appellant’s confirmed address of [REDACTED].

3. The BDN informed the Appellant of their right to appeal and applicable time limits to do so.

4. The Appellant requested an appeal on April 1, 2026.

5. The Appellant’s appeal explanation was, “in need of LTSS Medicaid.”

VIII. DISCUSSION

DHS maintains the Appellant was notified at their address of intended actions and appeal rights were included in the BDN. Their position is that the appeal was requested outside of

timeliness guidelines. The appeal was requested late by the Appellant as they were awaiting documents to prove the Appellant's situation. [REDACTED] also confirmed the Appellant's address is correct.

Regulations are clear, in that an action must be contested within 35 days of the notice. The notice was sent on November 13, 2025; therefore, an appeal request would have had to be received by the EHO on or before December 18, 2025. The Appellant did not submit this request until April 1, 2026, some 104 days after the deadline for it to be timely, according to regulations.

For this tribunal to conduct a hearing on a matter, an appeal request must be filed in a timely manner. There was no information presented that warrants the circumstances to allow for this untimely appeal to go forward to hearing. The Appellant was noticed of actions taken by the Agency, the notice was properly served and there was no violation of due process rights.

This decision serves as written notification that this appeal is incomplete and fails to meet timeliness requirements. As such, the appeal request cannot be accepted. The matter has been discussed with the parties and there is no cure for the defects in the appeal request, nor can there be an extension in which the Appellant may submit an amended appeal. (210-RICR-10-05.2.2.1(A)(8)).

IX. CONCLUSION OF LAW

After review, I conclude that this appeal request was not submitted in accordance with Medicaid requirements as set forth in 210-RICR-10-05.2.2.1(A)(9)).

X. DECISION

This appeal request is denied, and as such, there will not be a hearing to address the merits of the appeal.

/s/Holly Young | Appeals Officer | Executive Office of Health and Human Services

NOTICE OF APPELLATE RIGHTS

This decision is a final order under R.I.G.L. § 42-35-12. Under R.I.G.L. § 42-35-15, this Order may be appealed to court within thirty (30) days of the mailing of this decision. Such appeal, if taken, must be completed by filing a complaint in court. The filing of the complaint does not itself stay enforcement of this order. The agency may grant, or the reviewing court may order, a stay upon the appropriate terms.

Appeals are generally filed in the Providence County Superior Court. However, appeals affecting or concerning children under the age of eighteen (18) and/or appeals of a DCYF action may need to be filed in Providence Family Court. If you have any questions about which court a complaint for appeal should be made, you should seek the advice of an attorney, Rhode Island Legal Services, or the clerk of the court where you wish to file your appeal. The courts' contact information can be found on the judiciary's website (<https://www.courts.ri.gov>). Copies of the appeal must be served upon all parties in your case within ten (10) days of the filing of your appeal.

If you exercise any of these appellate rights, please inform the EOHHS appeals office of this so we can prepare a copy of the record for the court. You can contact the Appeals Office at OHHS.AppealsOffice@ohhs.ri.gov, 401.462.2132 (Phone), 401.462.0458 (Fax), or at 3 West Road, Virks Building, Cranston, RI 02908.

CERTIFICATION

I hereby certify that I mailed, via regular mail, postage prepaid, a true copy of the foregoing to [REDACTED];
[REDACTED] and via email at [REDACTED];
[REDACTED] and via email at [REDACTED]; and to [REDACTED]
[REDACTED] and via email at [REDACTED]; Copies were sent electronically to DHS representatives of the DHS Policy Office, Kirsten Cornford, Rebecca Cahoon, Rose Leandre, Jacqueline Neirinckx, Kimberly Martinous, Denise Hines, Michael Pangman, and Jennifer Ramos, on this 19th day of August, 2020.

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