

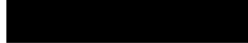
Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address



Appeal Decision:	Denied	Appeal Number:	2176201
Decision Date:	9/28/2021	Hearing Date:	09/20/2021
Hearing Officer:	Samantha Kurkijy	Record Open:	09/22/2021

Appearance for Appellant:



Appearance for MassHealth:

Gabe Gillis—Chelsea MEC



*Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street
Quincy, MA 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Verifications
Decision Date:	9/28/2021	Hearing Date:	09/20/2021
MassHealth Rep.:	Gabe Gillis	Appellant Rep.:	██████
Hearing Location:	Remote		

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 July 27, 2021, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant failed to submit verifications in a timely manner. (130 CMR 516.001; Exhibit 1; Exhibit 5.) The appellant filed an appeal in a timely manner on August 16, 2021. (130 CMR 610.015(B); Exhibit 2.) Denial of assistance is a valid ground for appeal. (130 CMR 610.032.) A hearing was held on September 20, 2021. (Exhibit 3.) The record was left open for the appellant to submit additional information by September 20, 2021 at 5:00 PM and MassHealth was given until September 22, 2021 to respond. (Exhibit 6.)

Action Taken by MassHealth

MassHealth notified the appellant that he is not eligible for MassHealth benefits because he did not submit the requested verifications.

Issue

Whether MassHealth was correct in notifying the appellant that he is not eligible for MassHealth benefits.

Summary of Evidence

The MassHealth representative testified that the appellant, who is a resident of a nursing facility, submitted a MassHealth long-term care application on April 1, 2021. MassHealth issued a Request for Information on April 9, 2021. This Request for Information was reissued on April 14, 2021 to include information on life estates that were not reported on the appellant's application. The requested information was due to MassHealth on May 9, 2021. On May 24, 2021, MassHealth denied the appellant's application for failure to submit verifications. The appellant's reapplication date is June 15, 2021, which is the application date at issue in this case. On June 16, 2021, MassHealth issued a second Request for Information with a due date of July 16, 2021. On July 27, 2021, MassHealth denied the appellant's application for failure to submit verifications. The appellant appealed this determination on August 16, 2021.

The MassHealth representative testified that the missing verifications consist of the following: SC-1; nursing facility screen; personal-needs account ("PNA"); private pay letter; and proof that real property ("RP1" and "RP2") are listed at fair market value ("FMV") or that the appellant's equity interested was liquidated and will be spent on his medical care. After discussion at hearing, the MassHealth representative agreed that the verifications pertaining to RP1 and RP2 concerned the issue of assets and not verifications.

The appellant was represented by his Health Care Proxy. The appellant's representative testified that he did not request the SC-1, screen, PNA, or private pay letter from the nursing facility because the request he received from MassHealth had a heading that indicated the nursing facility was responsible for submitting those items. He testified that he thought the nursing facility would receive the request from MassHealth and send in the information.¹

The record was held open for the appellant to submit the nursing facility documents by 5:00 PM on September 20, 2021. MassHealth was given until September 22, 2021 to respond. The appellant submitted additional information during the record open period, and on September 20, 2021, the MassHealth representative reported that because the appellant had not submitted the nursing home screen, MassHealth could only make a determination as to the appellant's eligibility for community coverage. The appellant was reminded that he had until 5:00 PM to submit the screen. On September 23, 2021, the MassHealth representative reported that the appellant still had not submitted the nursing facility screen.² The nursing facility screen was requested on both the April 14, 2021 and June 16, 2021 Requests for Information.

¹ The appellant's representative also offered testimony on RP1 and RP2, but the issue on appeal is verifications and not assets.

² This comment is accepted into the record.

Findings of Fact

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

1. The appellant is a resident of a nursing facility.
2. The appellant submitted a MassHealth long-term care application on April 1, 2021.
3. MassHealth issued a Request for Information on April 9, 2021. This Request for Information was reissued on April 14, 2021 to include information on life estates that were not reported on the appellant's application. The requested information was due to MassHealth on May 9, 2021.
4. On May 24, 2021, MassHealth denied the appellant's application for failure to submit verifications.
5. The appellant's reapplication date is June 15, 2021, which is the application date at issue in this case.
6. On June 16, 2021, MassHealth issued a second Request for Information with a due date of July 16, 2021.
7. On July 27, 2021, MassHealth denied the appellant's application for failure to submit verifications.
8. The appellant filed a timely appeal on August 16, 2021.
9. The missing verifications consist of the following: SC-1; nursing facility screen; PNA, and private pay letter.
10. The record was held open for the appellant to submit the nursing facility documents by 5:00 PM on September 20, 2021. MassHealth was given until September 22, 2021 to respond.
11. The appellant submitted additional information during the record open period, and on September 20, 2021, the MassHealth representative reported that because the appellant had not submitted the nursing home screen, MassHealth could only make a determination as to the appellant's eligibility for community coverage.
12. The appellant was reminded that he had until 5:00 PM to submit the screen.
13. On September 23, 2021, the MassHealth representative reported that the appellant still had not submitted the nursing facility screen.

14. The nursing facility screen was requested on both the April 14, 2021 and June 16, 2021 Requests for Information.

15. The appellant did not submit all of the requested verifications.

Analysis and Conclusions of Law

Pursuant to 130 CMR 515.008(A), an “applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility...” After receiving an application for MassHealth benefits, MassHealth proceeds as follows:

The MassHealth agency requests all corroborative information necessary to determine eligibility.

(1) The MassHealth agency sends the applicant written notification requesting the corroborative information generally within five days of receipt of the application.

(2) The notice advises the applicant that the requested information must be received within 30 days of the date of the request, and of the consequences of failure to provide the information.

(130 CMR 516.001(B).) “If the requested information...is received [by MassHealth] within 30 days of the date of the request, the application is considered complete....If such information is not received within 30 days of the date of the request, MassHealth benefits may be denied.” (130 CMR 516.001(C).)

The MassHealth representative testified as to the verifications that were still outstanding at the time of the hearing. The appellant’s representative contends that he did not understand that he was supposed to provide that information on behalf of the appellant because a heading on a MassHealth notice indicated the nursing facility was to provide that information. It is not clear to which MassHealth notice the appellant’s representative is referring. However, the June 16, 2021 Request for Information clearly states the following: “We need verification of the following information from: [the appellant’s name][.]” (Exhibit 6.) The nursing facility screen is listed underneath that language. The screen is also listed under the appellant’s name on the June 27, 2021 MassHealth denial notice.

Regardless of whether the appellant misunderstood a heading on a notice, the nursing facility is not applying for MassHealth coverage, the appellant is. It is the appellant’s responsibility to provide the verifications MassHealth requires in order to process an application for benefits, whether he provides those verifications directly or asks another entity to provide them. The appellant was afforded additional time through a record open period to provide the missing information and did not provide the nursing home screen. This verification has been outstanding for approximately five-and-a-half months, since the April 14, 2021 Request for Information, and

the appellant has had ample time to provide it.

For the foregoing reasons, the appeal is denied.

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.

Samantha Kurkjian
Hearing Officer
Board of Hearings

cc: Nancy Hazlett, MEC at Chelsea

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