# Office of Medicaid BOARD OF HEARINGS

#### **Appellant Name and Address**



**Appeal Decision:** Denied **Appeal Number:** 2176521

**Decision Date:** 9/29/2021 **Hearing Date:** 09/28/2021

Hearing Officer: Samantha Kurkjy

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:** 9/29/2021 **Hearing Date:** 09/28/2021

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 30, 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 4.) The appellant filed an appeal in a timely manner on August 25, 2021. (130 CMR 610.015(B); Exhibit 2.) Denial of assistance is a valid ground for appeal. (130 CMR 610.032.)

#### **Action Taken by MassHealth**

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

#### **Issue**

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

## **Summary of Evidence**

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The MassHealth representative testified that the appellant, who is a resident of a nursing facility, submitted a MassHealth long-term care application on June 11, 2021. On June 16, 2021, MassHealth issued a Request for Information with a due date of July 16, 2021. On July 30, 2021, MassHealth denied the appellant's application for failure to submit verifications. The appellant submitted an appeal on August 25, 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 verification of the appellant's gross pension, including deductions. The MassHealth representative testified that these items were requested both on the June 16, 2021 Request for Information and the July 30, 2021 denial notice.

The appellant was represented by a Medicaid consultant. The appellant's representative testified that the appellant was discharged from her nursing facility and is now in a second nursing facility. He testified that while he has the screen, PNA, SC-1, and private pay letter from the second facility, he still has not received the documents from the first facility. He also testified that he does not know where the appellant's pension is from and the appellant was not helpful with that information. He testified that the appellant's daughter is working on getting that information for him, but it has been difficult to get in touch with the daughter.

The appellant's representative requested a record open period of two to three weeks to provide the outstanding information. That request was denied.

# **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 was discharged from her first nursing facility and is now in a second nursing facility.
- 3. On June 11, 2021, the appellant submitted a MassHealth long-term care application.
- 4. On June 16, 2021, MassHealth issued a Request for Information with a due date of July 16, 2021.
- 5. On July 30, 2021, MassHealth denied the appellant's application for failure to submit verifications.
- 6. The appellant submitted a timely appeal on August 25, 2021.

- 7. The missing verifications consist of the following: SC-1; nursing facility screen; PNA; private pay letter; and verification of the appellant's gross pension, including deductions.
- 8. All of the outstanding items were requested both on the June 16, 2021 Request for Information and the July 30, 2021 denial notice.
- 9. The appellant's representative testified that while he has the screen, PNA, SC-1, and private pay letter from the second facility, he still has not received the documents from the first facility.
- 10. The appellant's daughter is working on getting the pension information, but it has been difficult for the appellant's representative to get in touch with the daughter.
- 11. At hearing, the appellant requested a record open period of two to three weeks to provide the outstanding information. That request was denied.
- 12. 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 verifications have been outstanding for approximately three-and-a-half months since the June 16, 2021 Request for Information. The appellant has had ample time to provide the outstanding verifications, and there is no compelling reason in the record to allow her

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additional time through a record open period.1

The appellant has not met her burden in this case. Accordingly, 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 Kurkjy Hearing Officer Board of Hearings

cc: Nancy Hazlett, MEC at Chelsea

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<sup>&</sup>lt;sup>1</sup> The appeal process is separate from, and not an extension of, the MassHealth eligibility process. Additionally, there is nothing in the regulations that states appellants are entitled to a record open period.