

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2178721
Decision Date:	3/08/2022	Hearing Date:	01/12/2022
Hearing Officer:	Rebecca Brochstein	Record Open Date:	02/22/2022

Appearance for Appellant:



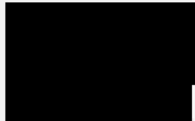
Appearances for MassHealth:

Yous Khieu, 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:	Long-term care eligibility
Decision Date:	3/08/2022	Hearing Date:	01/12/2022
MassHealth's Rep.:	Yous Khieu, Chelsea MEC	Appellant's Reps.:	
Hearing Location:	Board of Hearings (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 October 21, 2021, MassHealth denied the appellant's application for long-term care services for failure to provide requested verifications (Exhibit 1). The appellant filed this appeal in a timely manner on November 17, 2021 (130 CMR 610.015(B); Exhibit 2). On November 18, 2021, the Board of Hearings dismissed the appeal for lack of proper authorization (Exhibit 3). The appellant's representatives subsequently provided the necessary authorization, and the dismissal was vacated (Exhibits 3-5). After hearing on January 12, 2022, the record was held open for the appellant's representatives to submit the missing verifications (Exhibits 7-9). Denial of benefits is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's long-term care application for failure to provide requested verifications.

Issue

The appeal issue is whether MassHealth was correct in denying the appellant's MassHealth application.

Summary of Evidence

The MassHealth representative testified that the appellant is a resident of a long-term care facility. On September 3, 2021, a MassHealth long-term care application was submitted on the appellant's behalf. MassHealth sent a request for information on September 15, 2021. On October 21, 2021, MassHealth denied the application for failure to submit the requested information. The missing information listed on the denial letter is as follows:

- Annuity statement showing gross amount and verification of where it is deposited
- Health insurance premium bill
- Savings account statements from 8/16/20 to present, and “verify where withdrawals of \$1000 and over went and any source of deposits except SSA. If account closed, show closeout and verify where funds went.”
- Checking account statements from 8/16/20 to present, and “verify where withdrawals of \$1000 and over went and any source of deposits except SSA. If account closed, show closeout and verify where funds went.”
- Verify what happened to certain real estate owned by appellant; if sold within 5 years of application, send in HUD paperwork or closing disclosure and verify where the proceeds of sale went.
- Funeral contract
- SC-1

See Exhibit 1.

The MassHealth representative testified that the appellant submitted a packet of information the day before the hearing, but that some of the information was still missing. The outstanding information includes bank statements (with verification of any large transactions) and the SC-1 from the nursing facility.

The appellant was represented by her spouse and two individuals employed by the nursing facility. The nursing facility representatives testified that following the sale of the appellant's former home there was a large deposit into the bank. However, some funds were withheld and then periodically deposited into the appellant's bank accounts to pay her bills. The nursing facility representatives stated that they would obtain the missing bank statements to verify these transactions.

The record was held open until January 31, 2022, for the appellant's representatives to submit the remaining verifications. On January 28, 2022, Denise Keller, a different representative from the nursing facility¹ submitted via email a packet of information containing the SC-1 and private pay statement, an annuity statement, a December 2021 bank statement from the savings account, copies of checks drawn on the checking account from December 2021, and bank statements from 2016.

¹ Ms. Keller wrote in her email that the original lead contact from the nursing facility (who had appeared at the hearing) is no longer employed by the facility. She asked that any questions about the case be directed to her instead. See Exhibit 9.

See Exhibit 8. After reviewing this submission, the MassHealth representative responded as follows:

After reviewing the 01/28/22, Here the unverified information:

Show deposited \$10,000.00-03/04/20, \$51,460.60-11/06/20, \$3,000.00-02/06/21, all to Bank of America's Acct#9151 Need Bank of America statements 12/17/21 to Present on both Acct#0633 & Acct#9151 (Exhibit 9)

On February 15, 2022, the day of the MassHealth representative's response, the hearing officer wrote to Ms. Keller (with a copy to the MassHealth case worker as well as the other facility representative who had appeared at hearing) to ask if she had the missing information identified by the MassHealth worker. See Exhibit 9. No response was received thereafter.

Findings of Fact

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

1. The appellant is a resident of a long-term care facility.
2. On September 3, 2021, a MassHealth long-term care application was submitted on the appellant's behalf.
3. On September 15, 2021, MassHealth sent an information request to the appellant.
4. On October 21, 2021, MassHealth denied the application for missing verifications.
5. On November 17, 2021, the appellant filed a timely appeal of the denial notice.
6. Verifications remained outstanding as of the hearing on January 12, 2022.
7. The record was held open after hearing for the appellant's representative to provide the missing information.
8. The outstanding documentation included savings and checking account statements from August 16, 2020, to present, as well as verification of withdrawals over \$1,000 and the source of any deposits.
9. The appellant did not provide all of the missing information during the record-open period.

Analysis and Conclusions of Law

Under 130 CMR 515.008(A), an applicant or member must cooperate with MassHealth in providing information necessary to establish and maintain eligibility. After receiving an

application, MassHealth requests all corroborative information necessary to determine eligibility. 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. If the requested information is received within 30 days of the date of the request, the application is considered complete. If it is not received within that time frame, MassHealth benefits may be denied. 130 CMR 516.001(C) and (D).

There is no dispute in this case that the appellant did not provide all of the requested information within the regulatory time frame. Substantial information remained outstanding as of the date of the hearing. During the record-open period, the appellant's representatives submitted some of the missing documentation, but did not provide all of the needed bank statements or verify the source of certain deposits. The appellant's representatives also did not respond to further correspondence seeking this information. As it now stands, the appellant has not provided all of the verifications needed to determine her eligibility for benefits.

This appeal is therefore 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.

Rebecca Brochstein
Hearing Officer
Board of Hearings

cc: Chelsea MEC

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