

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2202057
Decision Date:	6/9/2022	Hearing Date:	04/21/2022
Hearing Officer:	Thomas J. Goode	Record Open to:	5/26/2022

Appearance for Appellant:



Appearance for MassHealth:
Ieasha Pittman, Taunton MEC



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

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Verifications
Decision Date:	6/9/2022	Hearing Date:	04/21/2022
MassHealth's Rep.:	Ieasha Pittman	Appellant's Rep.:	[REDACTED]
Hearing Location:	Remote	Aid Pending:	No

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 March 14, 2022, MassHealth denied Appellant's application for MassHealth long-term care benefits for failure to verify eligibility (130 CMR 516.001 and Exhibit 1). Appellant filed this appeal in a timely manner on March 18, 2022 (130 CMR 610.015(B) and Exhibit 2). Denial of assistance is a valid ground for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied Appellant's application for long-term care benefits for failure to verify eligibility.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.001, in denying Appellant's application for long-term care benefits for failing to verify eligibility.

Summary of Evidence

The MassHealth representative testified that a conversion application for long-term care benefits was submitted to MassHealth on January 31, 2022. On February 7, 2022, MassHealth issued a request for verifications. On March 14, 2022, MassHealth denied the application for failure to provide verification of eligibility including bank accounts and a burial contract (Exhibit 1).

Appellant was represented by a business office manager who testified that the burial contract would be submitted to MassHealth, but additional time was needed to request bank statements. At Appellant's request, the hearing record remained open until May 5, 2022 to allow Appellant to submit bank statements (Exhibit 4). On May 4, 2022, Appellant requested a two-week extension of the record open period to obtain bank statements, which was allowed (Exhibit 5). MassHealth submitted a response stating that bank statements were not submitted to MassHealth during the record open period (Exhibit 5).

Findings of Fact

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

1. A conversion application for long-term care benefits was submitted to MassHealth on January 31, 2022.
2. On February 7, 2022, MassHealth issued a request for verifications.
3. On March 14, 2022, MassHealth denied the application for failure to provide verification of eligibility including bank accounts and a burial contract.
4. The hearing record remained open until May 5, 2022 to allow Appellant to submit bank statements. On May 4, 2022, Appellant requested a two-week extension of the record open period to obtain bank statements, which was allowed.
5. Bank statements were not submitted to MassHealth during the record open period.

Analysis and Conclusions of Law

Regulation 515.008 states that a MassHealth applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all the rules and regulations of MassHealth. Regulation 130 CMR 516.001(B) provides that MassHealth may request additional information or documentation, if necessary, to determine eligibility. The request is generally sent to the applicant within 5 days of receipt of the application and provides 30 days to return the needed documents. If the verifications are not submitted within 30 days of the date of the request, MassHealth benefits may be denied (130 CMR 516.001(C)). Thereafter, if one or more of the documents are submitted within 30 days of the denial, the date of receipt shall be the reapplication date (130 CMR 516.002).

Pursuant to 130 CMR 610.071(A)(2) The hearing officer may not exclude evidence at the hearing for the reason that it had not been previously submitted to the acting entity, provided that the hearing officer may permit the acting entity representative reasonable time to respond to newly submitted evidence. The effective date of any adjustments to the appellant's eligibility status is the date on which all eligibility conditions were met, regardless of when the supporting evidence

was submitted.

A conversion application for long-term care benefits was submitted to MassHealth on January 31, 2022. On February 7, 2022, MassHealth issued a request for verifications. On March 14, 2022, MassHealth denied the application for failure to provide verification of eligibility including bank accounts and a burial contract. The hearing record remained open until May 5, 2022 to allow Appellant to submit bank statements. On May 4, 2022, Appellant requested a two-week extension of the record open period to obtain bank statements, which was allowed. Bank statements were not submitted to MassHealth during the record open period. Therefore, MassHealth correctly denied the application.

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.

Thomas J. Goode
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780