

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Dismissed	<b>Appeal Number:</b>	2202739
<b>Decision Date:</b>	6/2/2022	<b>Hearing Date:</b>	05/11/2022
<b>Hearing Officer:</b>	Alexandra Shube	<b>Record Open to:</b>	05/25/2022

**Appearance for Appellant:**

*Via telephone:*



**Appearance for MassHealth:**

*Via telephone:*

Michael Rooney, Tewksbury 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

<b>Appeal Decision:</b>	Dismissed	<b>Issue:</b>	LTC Eligibility – Verifications
<b>Decision Date:</b>	6/2/2022	<b>Hearing Date:</b>	05/11/2022
<b>MassHealth's Rep.:</b>	Michael Rooney	<b>Appellant's Rep.:</b>	Daughter/POA [REDACTED]
<b>Hearing Location:</b>	Tewksbury MassHealth Enrollment Center	<b>Aid Pending:</b>	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 11, 2022, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant failed to submit verifications in a timely manner (see 130 CMR 516.001 and Exhibit 1). The appellant filed this appeal in a timely manner on April 12, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

The record in this appeal was held open until May 20, 2022 for MassHealth to review documents submitted by the appellant and until May 27, 2022 for the appellant to respond. The record closed on May 25, 2022 with MassHealth's final response confirming receipt of all verifications.

### Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits for failure to submit requested verifications in a timely manner.

## **Issue**

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.001, in determining that the appellant failed to submit requested verifications in a timely manner.

## **Summary of Evidence**

The MassHealth representative appeared at hearing via telephone and testified as follows: on January 31, 2022, MassHealth received a Senior Application on behalf of the appellant, who is over the age of 65. It was unclear whether it was an intake case for long-term care or if the applicant was in the community, as both options were checked “yes.” On February 2, 2022, MassHealth issued an initial information request. On March 11, 2022, MassHealth issued a denial notice for failure to provide all requested verifications. As of hearing, there were numerous documents still outstanding.

The appellant was represented at hearing via telephone by his daughter and a representative from Steward Healthcare. They clarified that the appellant is in the community and not looking for long-term care coverage. They testified that they faxed the requested documentation to MassHealth the day of hearing.

The MassHealth representative had not yet received the verifications. The record was left open until May 20, 2022 for MassHealth to review documents submitted by the appellant and until May 27, 2022 for the appellant to respond with any additional verifications that MassHealth determined to still be outstanding.

On May 13, 2022, MassHealth emailed parties stating that he had still not received any documentation via fax. Based on documentation faxed to the Board of Hearings by the appellant on May 11, 2022, but not received by the hearing officer until May 13, 2022, it appeared that the appellant sent the verifications to the Board of Hearings, not MassHealth. This hearing officer forwarded the documentations to the MassHealth representative. On May 20, 2022, MassHealth informed the appellant that after a review of the appellant’s submission, he was still missing three verifications. On May 25, 2022, MassHealth stated that it had received all verifications and issued a new, appealable determination on that date.

## **Findings of Fact**

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

1. The appellant is over the age of 65 and living in the community (Testimony and Exhibit 4).
2. On January 31, 2022, MassHealth received a Senior Application on behalf of the appellant (Testimony and Exhibit 5).
3. On February 2, 2022, MassHealth issued a request for information, but did not receive all

requested verifications and issued a denial notice on March 11, 2022 (Testimony and Exhibits 1 and 5).

4. The appellant timely appealed the denial notice on April 12, 2022 (Exhibit 2).
5. As of hearing, there were multiple outstanding verifications (Testimony).
6. The record was held open until May 20, 2022 for MassHealth to review documents submitted by the appellant and until May 27, 2022 for the appellant to respond with any additional verifications still outstanding after MassHealth's review (Exhibit 6).
7. On May 25, 2022, the record closed after MassHealth confirmed that it had received all requested verifications and issued a new, appealable determination on that date (Exhibit 8).

## **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)).

MassHealth denied the appellant's application for failure to submit all requested information within the required time frame. At the close of the record open period, MassHealth received the missing verifications and issued a new determination.

As the issue in this appeal is verifications and all verifications have been received, this appeal is dismissed.

## **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.

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Alexandra Shube  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957

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