

# Office of Medicaid BOARD OF HEARINGS


**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2202914
<b>Decision Date:</b>	6/29/2022	<b>Hearing Date:</b>	05/18/2022
<b>Hearing Officer:</b>	Alexandra Shube	<b>Record Open to:</b>	06/13/2022

**Appearance for Appellant:**

*Via telephone:*

 Financial Tracker, Briarwood  
Rehabilitation & Healthcare Center

**Appearance for MassHealth:**

*Via telephone:*

Gessica Brunot, Chelsea 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>	Denied	<b>Issue:</b>	LTC – Verifications
<b>Decision Date:</b>	6/29/2022	<b>Hearing Date:</b>	05/18/2022
<b>MassHealth's Rep.:</b>	Gessica Brunot	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Chelsea 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 February 22, 2022, MassHealth denied the appellant's application for MassHealth benefits because the appellant failed to submit all requested information needed to determine the appellant's eligibility within the required time frame (see 130 CMR 516.001 and Exhibit 1). The appellant filed this appeal in a timely manner on March 8, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

## 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: the appellant is over the age of 65 and was a resident of a nursing facility. On December 3, 2021, MassHealth received a long-term care application on behalf of the appellant. MassHealth sent out an information request on January 10, 2022. On February 22, 2022, MassHealth issued a denial notice for failure to submit all requested information needed to determine the appellant's eligibility within the required time frame. The notice listed the outstanding verifications which included proof of income, health insurance information, checking account statements, personal needs allowance (PNA) account statement, and the signature for the long-term care supplement. MassHealth received some verifications and re-logged the case on March 16, 2022, issuing a new information request on that date. On May 11, 2022, MassHealth again issued a denial notice for failure to submit all requested information needed to determine the appellant's eligibility within the required time frame. As the notice under appeal is the February 22, 2022 notice, MassHealth would be able to honor the original application date of December 3, 2021. As of hearing, only the signed signature page of the long-term care supplement was still outstanding.

The appellant was represented at hearing via telephone by the financial tracker from the nursing facility. She testified that the appellant's nephew was appointed as guardian and he is very difficult to track down and not cooperating. The day before hearing, the facility made contact with an attorney representing the appellant's nephew. The nephew discharged the appellant from the nursing facility against medical advice, but the facility hoped with additional time, it could get a signature to complete the long-term care supplement.

At the request of the appellant, the record was held open until June 10, 2022 for the appellant to submit the missing verification<sup>1</sup>. MassHealth was given until June 13, 2022 to review and respond to the appellant's submission. On June 15, 2022, the MassHealth representative stated via email that she never received the signature page from the appellant.

## Findings of Fact

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

1. The appellant is over the age of 65 and was a resident of a nursing facility, but was discharged by her guardian against medical advice (Testimony).
2. On December 3, 2021, MassHealth received a long-term care application on behalf of the appellant (Testimony and Exhibit 4).
3. MassHealth sent out an information request on January 10, 2022 (Testimony and Exhibit 4).

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<sup>1</sup> MassHealth disagreed with the length of the record open period because the only outstanding document was the signature page and the appellant had ample time to submit it. This hearing officer granted the record open period until June 10, 2022, which was less time than the appellant originally requested.

4. On February 22, 2022, MassHealth issued a denial notice for failure to submit all requested information needed to determine the appellant's eligibility within the required time frame (Testimony and Exhibit 1).
5. On March 8, 2022, the appellant timely appealed the February 22, 2022 denial notice (Exhibit 2).
6. As of hearing, the only outstanding document was the signed signature page of the long-term care application (Testimony and Exhibit 4).
7. At the request of the appellant, the record was held open until June 10, 2022 for the appellant to submit the missing signature page and until June 13, 2022 for MassHealth to review and respond (Testimony and Exhibit 5).
8. On June 15, 2022, MassHealth stated that the appellant did not submit the signature page (Testimony and Exhibit 6).

## Analysis and Conclusions of Law

Pursuant to 130 CMR 516.001(A)(1)(b), when filing an application to apply for MassHealth for an individual in need of long-term-care services, "a person or his or her authorized representative **must file a complete paper Senior Application and Supplements** or apply in person at a MassHealth Enrollment Center (MEC)." (Emphasis added).

Additionally, 130 CMR 516.001(A)(3) states the following regarding paper applications or in-person applications when there is missing or inconsistent information:

(a) If an application is received at a MassHealth Enrollment Center or MassHealth outreach site and the applicant did not answer all required questions on the Senior Application **or if the Senior Application is unsigned, the MassHealth agency is unable to determine the applicant's eligibility for MassHealth.**

(b) The MassHealth agency requests responses to all of the unanswered questions necessary to determine eligibility. The MassHealth agency must receive such information within 15 days of the date of the request for the information.

(c) If responses to all unanswered questions necessary to determine eligibility are received within 15 days of the date of the notice, referenced in 130 CMR 516.001(A)(3)(b), the MassHealth agency will request any corroborative information necessary to determine eligibility, as provided in 130 CMR 516.001(B) and (C).

(d) If responses to all unanswered questions necessary for determining eligibility are not received within the 15-day period referenced in 130 CMR 516.001(A)(4)(b), the MassHealth agency notifies the applicant that it is unable to determine eligibility. The date that the incomplete application was received will

not be used in any subsequent eligibility determinations. If the required response is received after the 15-day period, the eligibility process commences and the application is considered submitted on the date the response is received, provided that if the required response is submitted more than one year after the initial incomplete application, a new application must be completed.

(e) Inconsistent answers are treated as unanswered.

(Emphasis added).

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 needed to determine the appellant’s eligibility within the required time frame. At hearing, the MassHealth representative testified that the signed signature page of the long-term care supplement was still outstanding. The appellant was granted a record open period of over three weeks to provide the signature page, but did not do so. As the appellant has failed to submit all requested verifications and the long-term care supplement remains unsigned, this 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.

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Alexandra Shube  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Shelly-Ann Lewis, Chelsea MassHealth Enrollment Center, 80 Everett Avenue, Chelsea, MA 02150

A large black rectangular redaction box covers the bottom portion of the distribution list, obscuring several names and addresses.