

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Dismissed	<b>Appeal Number:</b>	2205468
<b>Decision Date:</b>	11/28/2022	<b>Hearing Date:</b>	09/07/2022
<b>Hearing Officer:</b>	Alexandra Shube	<b>Record Open to:</b>	11/23/2022

**Appearance for Appellant:**



**Appearance for MassHealth:**

*Via telephone:*

Jamie Lapa, Springfield MEC

Jennifer Moreno, Springfield 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 – Verifications
<b>Decision Date:</b>	11/28/2022	<b>Hearing Date:</b>	09/07/2022
<b>MassHealth's Rep.:</b>	Jennifer Moreno Jamie Lapa	<b>Appellant's Rep.:</b>	Guardian
<b>Hearing Location:</b>	Springfield MassHealth Enrollment Center Remote	<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 June 1, 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 July 22, 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 October 28, 2022 for the appellant to submit documentation and until November 11, 2022, for MassHealth to review and respond. Ultimately, the record was held open until November 23, 2022 after MassHealth asked for additional time to review the appellant's submission.

## 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 April 5, 2022, MassHealth received a long-term care application requesting a start date of October 28, 2021 on behalf of the appellant, who is over the age of 65. On June 1, 2022, MassHealth issued a denial notice for missing verifications, which is the notice under appeal. At the time of hearing, MassHealth was still missing bank statements from two different bank accounts, the personal needs allowance (PNA) account and private pay statement from the facility, a discharge from the appellant's first long-term care facility, and a new SC-1 from his current facility.

The appellant was represented at hearing via telephone by his guardian who explained that she has been trying to get the facility to have a conservator appointed which would allow her greater access to his bank accounts and give her the ability to pay his bills. She was unsure whether the appellant actually had any bank accounts at one of the banks mentioned by MassHealth. She recently obtained an attorney to file petition for conservator since the facility did not do so.

At the request of the appellant, the record was held open until October 28, 2022 for her to submit the needed verifications. MassHealth was given until November 11, 2022 to review and respond. The Board of Hearings received documents from the appellant on October 3, 2022. MassHealth requested additional time to review the appellant's submission. The record closed on November 23, 2022, after MassHealth confirmed that it received all the missing verifications and honored the original application date when it issued a new determination which resulted in an over assets denial notice.

## **Findings of Fact**

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

1. The appellant is over 65 years old and a resident of a nursing facility (Testimony and Exhibit 4).
2. On April 5, 2022, MassHealth received an application for long-term care benefits on behalf of the appellant, requesting a start date of October 28, 2021 (Testimony and Exhibit 5).
3. On June 1, 2022, MassHealth issued a denial notice for missing verifications, which is the notice under appeal (Testimony and Exhibit 1).
4. On July 22, 2022, the appellant timely appealed the denial notice (Exhibit 2).

5. The record was originally held open until October 28, 2022 for the appellant to submit the requested verifications and until November 11, 2022 for MassHealth to review and respond (Exhibit 6).
6. MassHealth requested an extension to review the appellant's submission and the record closed on November 23, 2022 after MassHealth confirmed that it received all the missing verifications (Exhibit 8).
7. MassHealth honored the original application date when it issued its new determination (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 needed and issued a new determination honoring the original application date.

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: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

[REDACTED]