

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2207915
Decision Date:	4/4/2023	Hearing Date:	02/06/2023
Hearing Officer:	Mariah Burns	Record Open to:	3/24/2023

Appearance for Appellant:



Appearance for MassHealth:

K'eisha McMullen, 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

Appeal Decision:	Denied	Issue:	Long-Term Care - Verifications
Decision Date:	4/4/2023	Hearing Date:	02/06/2023
MassHealth's Rep.:	K'eisha McMullen	Appellant's Rep.:	
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 September 2, 2022, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant did not submit the necessary documentation for MassHealth to make an eligibility decision in a timely manner (see 130 CMR 516 and Exhibit 1). The appellant filed this appeal in a timely manner on October 21, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032). The appellant's case was originally set for hearing on November 21, 2022 and she failed to appear for that hearing. On January 9, 2023, the Board of Hearings received a call from someone purporting to be the appellant indicating that the Board of Hearings had the wrong phone number and requesting a reschedule, which was granted and set for February 6, 2023.

Action Taken by MassHealth

MassHealth denied the appellant's application for long-term care benefits because the appellant failed to provide the necessary information needed to determine her eligibility.

Issue

The appeal issue is whether MassHealth was correct to deny the appellant's application for long-term care benefits because she did not provide the proper verifications.

Summary of Evidence

The MassHealth representative appeared by telephone at hearing and testified to the following: the appellant submitted an application for MassHealth long-term care benefits on July 14, 2022. On July 29, 2022, a request for information was sent with a due date of August 8, 2022. MassHealth received none of the requested documents, and on September 2, 2022, issued a denial for long-term care benefits for failure to submit verifications. To date, the following information is still outstanding:

1. Six months of statements for appellant's [REDACTED] account and explanation for any transactions of \$1000.00 or more;
2. Personal Needs Account information from nursing facility along with a private payment statement and what it covered (if any);
3. Notification of admission to facility (SC-1);
4. Nursing Facility Screening Notification;
5. Original face value and current cash surrender value of Metlife life insurance policy;
6. Authorized Designation Representative Form and copy of Conservator paperwork.

The appellant's representative (hereinafter POA) was not listed on the request for fair hearing form but represented that she was the appellant's power of attorney. She was able to provide documentation to support that claim and was thereby permitted to represent the appellant at hearing. The POA testified to the following: the appellant lived with the POA until sometime last summer, when the appellant fell, resulting in an infection in her leg. The appellant was admitted to the hospital, and at some point, the hospital accused the POA of financial exploitation and elder abuse. A conservatorship was applied for and temporarily granted, which the POA was intending to challenge in court at the end of February. The POA has not seen or heard from the appellant since August and does not know where she is.

The MassHealth representative indicated that she had been in touch with an attorney purporting to be the appellant's conservator. The record was kept open for thirty days to allow the conservator process to resolve and to allow the conservator and/or the POA time to obtain the requested verifications. The record was then extended again due to the MassHealth representative being out of the office. To date, the Board of Hearings has received only the power of attorney documents and a Letter of Conservatorship for a Protected Person from the Hampden Probate and Family Court that expired on February 27, 2023 and makes no reference to the power of attorney documents.

Findings of Fact

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

1. The appellant applied for MassHealth long-term care benefits on July 14, 2022. Testimony, Exhibit 6.

2. A request for information was sent out by MassHealth on July 29, 2022 with a due date of August 28, 2022. Testimony, Exhibit 6.
3. MassHealth received none of the requested verifications and, on September 2, 2022, issued a denial notice failure to give MassHealth the necessary information it needs to determine eligibility within the required timeframe. Testimony, Exhibit 1.
4. After the hearing, the record was held open until March 24, 2022 for the submission of the requested verifications.
5. As of the close of the hearing record, the following verifications are still outstanding:
 - Six months of statements for appellant's [REDACTED] account and explanation for any transactions of \$1000.00 or more;
 - Personal Needs Account information from nursing facility along with a private payment statement and what it covered (if any);
 - Notification of admission to facility (SC-1);
 - Nursing Facility Screening Notification;
 - Original face value and current cash surrender value of Metlife life insurance policy;
 - Authorized Designation Representative Form.

Analysis and Conclusions of Law

Pursuant to 130 CMR 515.008 it is the responsibility of the applicant to cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility. The regulations allow for MassHealth to send the applicant a written request for all corroborative information necessary to determine eligibility (130 CMR 516.000(B)). The timeframe to return the requested verifications is 30 days from the date of the request (130 CMR 516.001(B)(2)). If the information is not received within 30 days, MassHealth benefits may be denied (130 CMR 516.001(C)).

In this case, the appellant's application was denied due to her failure to provide documents necessary to determine her eligibility. She was not only given proper notice of those documents, but was given an additional six weeks after the hearing to provide all of the necessary information or request more time. MassHealth has received nothing but a now-expired Letter of Conservatorship. As such, the appellant has not complied with the requirements of 130 CMR 516, and MassHealth is within its discretion to deny her application. Accordingly, 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.

Mariah Burns
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186