

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2208503
Decision Date:	4/18/2023	Hearing Date:	12/16/2022
Hearing Officer:	Cynthia Kopka	Record Open to:	1/31/2022

Appearance for Appellant:



Appearance for MassHealth:

Carmen Sola, Taunton
(for Ieasha Pittman)



*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:	LTC eligibility – verifications
Decision Date:	4/18/2023	Hearing Date:	12/16/2022
MassHealth’s Rep.:	Carmen Sola, for Ieasha Pittman	Appellant’s Rep.:	Pro se, with multiple participants
Hearing Location:	Taunton (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

By notice dated October 24, 2022, MassHealth denied Appellant's application for MassHealth because Appellant failed to submit required information. Exhibit 1. Appellant filed this appeal in a timely manner on November 15, 2022. Exhibit 2, 130 CMR 610.015(B). Denial of assistance is a valid basis for appeal. 130 CMR 610.032. The hearing record was held open through January 4, 2023 and extended to January 31, 2023 on Appellant’s request. Exhibits 5-7.

Action Taken by MassHealth

MassHealth denied Appellant's application for MassHealth benefits because Appellant failed to submit required verifications.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 515.008, in denying Appellant’s application for failure to provide requested verifications.

Summary of Evidence

A MassHealth eligibility representative appeared by phone on behalf of the assigned worker and

testified as follows. MassHealth received Appellant's application for long term care benefits on September 14, 2022. MassHealth issued a request for information on September 19, 2022. On October 24, 2022, MassHealth denied Appellant's application for failing to submit the corroborative information requested. Exhibit 1. In order to process Appellant's application, MassHealth needs to see bank statements dated September 1, 2021 to current from Appellant's Netspend prepaid account, where his social security income is deposited. MassHealth would also need to verify any transactions greater than \$1,500 reflected on the statements, if applicable.

Appellant appeared by phone with his representatives and offered the following testimony. Appellant confirmed that his social security income of \$764 per month is deposited into the Netspend account and nowhere else. Appellant's bank is located in Arkansas. Appellant believes he can only get 90 days' worth of statements at a time. The MassHealth representative recommended that Appellant contact the customer service number on the back of the bank card. The MassHealth representative advised that based on her experience, the statements can be retrieved online.

The hearing record was held open for three weeks, through January 6, 2023, for Appellant to submit the necessary information, and through January 20, 2023 for MassHealth to review and respond. Exhibit 5. Appellant requested the record open information be forwarded to his representative, who did not attend the hearing prior to its conclusion. During the record open period, Appellant's representative requested two extensions of Appellant's deadline. Exhibits 6 and 7. Though the extensions were granted, Appellant failed to provide either the requested verification or proof of having filed a complaint to the post office regarding a delay with mail, as requested by the hearing officer, by January 27, 2023. Exhibit 7. On January 31, 2023, the MassHealth representative had not received the necessary information. Exhibit 8. Appellant was not able to provide the missing information and did not request an additional extension upon inquiry. Exhibit 9.

Findings of Fact

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

1. On September 14, 2022, MassHealth received Appellant's application for long term care benefits.
2. On September 19, 2022, MassHealth issued a request for information to Appellant.
3. On October 24, 2022, MassHealth denied Appellant's application for failure to submit required information. Exhibit 1.
4. Appellant filed this appeal on November 15, 2022. Exhibit 2.
5. To date, MassHealth has not received bank statements from Appellant's Netspend account from September 1, 2021 to current. Exhibit 8.

Analysis and Conclusions of Law

An individual applying for MassHealth long term care benefits (or the individual's authorized representative) must submit a complete application and all required supplements. 130 CMR 516.001(A)(1). 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 the 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 received Appellant's application on September 14, 2022 and requested information on September 19, 2022. Appellant's representative was still unable to provide information requested in September 2022 by the January 27, 2023 record open deadline or by the date of this decision.

Appellant has not met the requirements of 130 CMR 515.008(A) and 130 CMR 516.001(C) by providing the corroborative information necessary for MassHealth to determine eligibility. 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.

Cynthia Kopka
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

[REDACTED]