

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2209003
Decision Date:	2/27/2023	Hearing Date:	1/4/2023
Hearing Officer:	Thomas J. Goode		

Appearance for Appellant:




Appearance for MassHealth:
Gabe Gillis, 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

Appeal Decision:	Denied	Issue:	Verification
Decision Date:	2/27/2023	Hearing Date:	01/04/2023
MassHealth's Rep.:	Gabe Gillis	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 July 22, 2022, MassHealth denied Appellant's application for MassHealth long-term care benefits for failure to verify eligibility (130 CMR 516.001 and Exhibit 1). Appellant filed this appeal in a timely manner on October 31, 2022 (130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (130 CMR 610.032). The hearing record remained open until January 18, 2023 to allow Appellant's representatives to obtain outstanding verifications (Exhibit 5). No documentation was submitted to the Board of Hearings or MassHealth (Exhibit 6).

Action Taken by MassHealth

MassHealth denied Appellant's application for long-term care benefits for failure to verify eligibility.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.001, in denying Appellant's application for long-term care benefits for failing to verify eligibility.

Summary of Evidence

The MassHealth representative testified that Appellant was admitted to a skilled nursing facility on December 3, 2021. On May 11, 2022, a long-term care application was submitted to MassHealth. On June 7, 2022, MassHealth issued a verification check list for outstanding eligibility verifications (Exhibit 4). No documentation was received by MassHealth; and the application was denied on July 22, 2022. Appellant appointed business office personnel from the nursing facility where she resides to represent her at hearing (Exhibit 2). Appellant's representatives testified that Appellant is her own person and has been uncooperative with the MassHealth application process. The representatives requested additional time to submit verifications and testified that a conservatorship filing was pending. The hearing record remained open until January 25, 2023 to allow Appellant's representatives to obtain outstanding verifications (Exhibit 5). No documentation was submitted to the Board of Hearings or MassHealth (Exhibit 6). The Board of Hearings contacted Appellant's representatives to allow evidence that a conservatorship petition was pending. No documentation was submitted to the Board of Hearings (Exhibit 7).

Findings of Fact

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

1. Appellant was admitted to a skilled nursing facility on December 3, 2021.
2. On May 11, 2022, a long-term care application was submitted to MassHealth.
3. On June 7, 2022, MassHealth issued a verification check list for outstanding verifications. No documentation was received by MassHealth; and the application was denied on July 22, 2022.
4. The hearing record remained open until January 25, 2023 to allow Appellant's representatives to obtain outstanding verifications. No documentation was submitted to the Board of Hearings or MassHealth.
5. The Board of Hearings contacted Appellant's representatives to allow evidence that a conservatorship petition was pending. No documentation was submitted to the Board of Hearings.

Analysis and Conclusions of Law

An applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining other health insurance (130 CMR 515.008(A)). Regulation 130 CMR 516.001(B) provides that MassHealth may request additional information or documentation, if necessary to determine eligibility. The request is

generally sent to the applicant within 5 days of receipt of the application and provides 30 days to return the needed documents. Pursuant to 130 CMR 516.001(C), if the verifications are not submitted within 30 days of the date of the request, MassHealth benefits may be denied. Thereafter, if one or more of the documents are submitted within 30 days of the denial, the date of receipt shall be the reapplication date. Appellant was admitted to a skilled nursing facility on December 3, 2021. On May 11, 2022, a long-term care application was submitted to MassHealth. On June 7, 2022, MassHealth issued a verification check list for outstanding eligibility verifications. No documentation was received by MassHealth, and the application was denied on July 22, 2022. The hearing record remained open until January 25, 2023 to again allow Appellant's representatives to obtain outstanding verifications. No documentation was submitted to the Board of Hearings or MassHealth. The Board of Hearings also contacted Appellant's representatives to submit evidence that a conservatorship petition was pending. No documentation was submitted to the Board of Hearings.

For the foregoing reasons, 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.

Thomas J. Goode
Hearing Officer
Board of Hearings

cc:

Appeals Coordinator, Tewksbury MassHealth Enrollment Center

