

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2300405
Decision Date:	3/20/2023	Hearing Date:	03/09/2023
Hearing Officer:	Kimberly Scanlon		

Appearance for Appellant:
Via telephone




Appearance for MassHealth:
Via telephone
Karen Ryan, 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:	Verifications
Decision Date:	3/20/2023	Hearing Date:	03/09/2023
MassHealth's Rep.:	Karen Ryan, Tewksbury MEC	Appellant's Rep.:	
Hearing Location:	Tewksbury MassHealth Enrollment Center Room 2 (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 December 15, 2022, MassHealth notified the Appellant that he was not eligible for MassHealth long-term care benefits because he did not submit the information it needed to decide his eligibility within the required timeframe. (See, 130 CMR 515.008; Exhibit 1). The Appellant filed this appeal in a timely manner on January 18, 2023 (See, 130 CMR 610.015(B); Exhibit 2¹). Denial of assistance is valid grounds for appeal (See, 130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified the Appellant that he is not eligible for MassHealth benefits because he did not submit the information it needed to determine his eligibility within the required time frame.

Issue

¹ At the hearing, the Appellant's Authorized Representative explained that the Appellant actually signed the fair hearing request form in October of 2022 (not on January 18, 2023, as stated in Exhibit 2), when the representative first met the Appellant in the event that an appeal would need to be filed immediately.

The appeal issue is whether MassHealth was correct in denying the Appellant's application for long-term care benefits.

Summary of Evidence

A MassHealth representative appeared at the hearing via telephone and testified as follows: On October 25, 2022 MassHealth received a long-term care application on behalf of the Appellant². (See, Exhibit 7, p. 2). On November 10, 2022, MassHealth sent a request of information to the Appellant. (See, Exhibit 7, pp. 10-12). On December 15, 2022, MassHealth denied the application based on the appellant's failure to submit all requested verifications. (See, Exhibit 1; Exhibit 7, pp. 2-7). As of the hearing date, the following verifications were still missing:

- Nursing home information, including verification of the following: notification of admission to facility (SC-1), level of care screening form, private payments and dates of service, personal needs account; and
- Bank account information, including all accounts and assets listed on the application as the application was incomplete as initially submitted.

(See, Exhibit 1, p. 2; Exhibit 7, pp. 4-5).

The Appellant's representative appeared at the hearing via telephone and testified that since she met the Appellant and his spouse in October of 2022, both needed a conservator appointed. However, for reasons unbeknownst to the Appellant's representative, the nursing home proceeded with conservatorship for the Appellant's spouse only and failed to proceed with conservatorship for the Appellant. Further, the nursing facility is no longer cooperating with the Appellant's representative. Upon inquiry, the MassHealth representative confirmed that there is property held in the Appellant's name, including a trust, which would need to be addressed by MassHealth as well. In response, the Appellant's representative explained that the hearing on this matter was already re-scheduled once in hopes that additional information would be received from the nursing facility. Unfortunately, as of the hearing date, there has not been any information received from said facility on behalf of the Appellant.

Findings of Fact

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

1. On October 25, 2022 MassHealth received a long-term care application on behalf of the Appellant.

² MassHealth also received a long-term care application on behalf of the Appellant's spouse on October 25, 2022. (See, Exhibit 1, pp. 3-4). The Appellant's spouse also filed a request for a fair hearing, (See, Exhibit 2, p. 1). Conservatorship documentation was provided to the Board of Hearings on behalf of the Appellant's spouse. (See, Exhibit 4). At the hearing, it was confirmed by all parties that the appeal at issue pertained solely to the Appellant and not to both the Appellant and his spouse.

2. On November 10, 2022, MassHealth sent a request of information to the Appellant.
3. On December 15, 2022, MassHealth denied the request for failure to receive all verifications.
4. As of the hearing date, the following verifications were still missing: nursing home information, including verification of notification of admission to facility (SC-1), level of care screening form, private payments and dates of service, personal needs account, bank account information, including all accounts and assets listed on the application; the application was incomplete as initially submitted.
5. As of the hearing date, the nursing facility had not filed for conservatorship on the Appellant's behalf.

Analysis and Conclusions of Law

Applicants for MassHealth have an obligation to cooperate with the MassHealth agency, in providing information necessary to establish and maintain eligibility and must comply with all rules and regulations of MassHealth, including recovery or maintaining other health insurance. (See, 130 CMR 515.008).

Once an application for MassHealth long-term care benefits has been submitted, the MassHealth agency requests all corroborative information necessary to determine eligibility. (See, 130 CMR 516.001). 130 CMR 516.019(B) provides the following, with respect to corroborative information:

- (1) The MassHealth agency sends the applicant written notification requesting the corroborative information generally within five days of receipt of application.
- (2) The notice advised the appellant 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(C) sets forth the process regarding the receipt of corroborative information and provides as follows:

If the requested information, with the exception of verification of citizenship, identity, and immigration status is received within 30 days of the date of the request, the application is considered complete. The MassHealth agency will determine the coverage type providing the most comprehensive medical benefits for which the appellant is eligible. If such information is not received within 30 days of the date of the request, MassHealth benefits may be denied.

130 CMR 516.002 sets forth the process for reactivating an application after denial and provides as follows:

The MassHealth agency will reactivate the application after a denial of eligibility for failure to

provide the requested verifications.

- (A) If the requested information is received within 30 days of the date of the denial, the date of receipt of one or more of the verifications is considered the date of reapplication.
- (B) The date of reapplication replaces the date of the denied application. The applicant's earliest date of eligibility for MassHealth is based on the date of reapplication.
- (C) If a reapplication is subsequently denied and not appealed, the applicant must submit a new application to pursue eligibility for MassHealth. The earliest date of eligibility for MassHealth is based on the date of the new application.

In the present case, the Appellant requested (and was granted) another hearing date to produce the outstanding information regarding the incomplete application that MassHealth received. Despite the additional time, and for the reasons stated above, the Appellant did not submit all outstanding information. Without this information, MassHealth is unable to make a determination regarding the Appellant's eligibility. Therefore, the action taken by MassHealth was within the regulations. (See, 130 CMR 516.001). 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.

Kimberly Scanlon
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290

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