

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2300715
Decision Date:	3/27/2024	Hearing Date:	02/21/2024
Hearing Officer:	Kenneth Brodzinski	Record Open to:	0/15/2024

Appearance for Appellant:



Appearance for MassHealth:

Ana Costa



*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 - Failure to Verify
Decision Date:	3/27/2024	Hearing Date:	02/21/2024
MassHealth's Rep.:	Ana Costa	Appellant's Rep.:	
Hearing Location:	Taunton MEC		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through notice dated October 3, 2022, MassHealth determined that Appellant is not eligible for MassHealth Long Term Care benefits for failure to provide MassHealth with requested documentation needed to decide eligibility (Exhibit A). Appellant filed this appeal in a timely manner on January 27, 2023 seeking to preserve an application date (see 130 CMR 610.015(B) and Exhibit A).¹ Denial of MassHealth benefits constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied Appellant's application for MassHealth Long Term Care benefits because he failed to provide requested financial documentation that MassHealth needs to make an eligibility determination.

¹ Appellant's representatives made multiple postponement requests pending their efforts to secure a Guardian. This delayed the scheduling of a hearing until February 21, 2024.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied Appellant's application for MassHealth Long Term Care benefits because he failed to provide requested financial documentation that MassHealth needs to make an eligibility determination.

Summary of Evidence

The MassHealth representative testified that Appellant entered a long term care facility in April 2022 and filed an application for MassHealth Long Term Care benefits seeking an eligibility start date of June 22, 2022. MassHealth issued a written request for financial verifications on August 29, 2022. Verifications were due by October 3, 2022. Appellant failed to file any of the requested verifications and MassHealth denied the application through the subject notice of October 3, 2022. The MassHealth representative testified that after the denial, some verifications were filed, but others were still missing. Additionally, the verifications that were filed raised additional questions concerning Appellant's finances and assets requiring additional verifications. By the time of the hearing, the requested verifications were still missing, including, but not limited to, documentation relative to two financial accounts and a Family Trust.

Appellant was represented by a member of the offices of his Guardian. Appellant's representative testified that efforts to obtain the verification have been made, but for a number of reasons, various entities have not been cooperative.

The hearing officer asked Appellant to produce documentation, or any other evidence, to identify and verify the efforts that have been taken to date to secure each of the outstanding verifications. To this end, the record was held open until March 8, 2024 to allow Appellant to gather and file such evidence. MassHealth was given until March 15, 2024 to review Appellant's post-hearing submission and file a written response. By the record close date and the date of this decision, Appellant has not made any post-hearing filing and has not requested additional time to make such a filing.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant entered a long term care facility in April 2022 and filed an application for MassHealth Long Term Care benefits seeking an eligibility start date of June 22, 2022.
2. MassHealth issued a written request for financial verifications on August 29, 2022.

3. Verifications were due by October 3, 2022.
4. Appellant failed to file any of the requested verifications by October 3, 2022 and MassHealth denied the application through the subject notice of October 3, 2022.
5. After the denial issued, some verifications were filed, but others were still missing.
6. The verifications that were filed raised additional questions concerning Appellant's finances and assets requiring MassHealth to ask for additional verifications.
7. By the time of the hearing, the requested verifications were still missing, including, but not limited to, documentation relative to two financial accounts and a Family Trust.
8. At hearing, Appellant was given the opportunity through a post-hearing, record-open period, to produce documentation, or any other evidence, to identify and verify the efforts that have been taken to date to secure each of the outstanding verifications.
9. By the record close date and the date of this decision, Appellant has not made any post-hearing filing and has not requested additional time to make such a filing.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)).

130 CMR 516.001 (B) Corroborative Information.

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 515.008: Responsibilities of Applicants and Members (A) Responsibility to Cooperate.

The 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.

This record establishes that through written correspondence issued in 2022, MassHealth has properly requested financial verifications from Appellant which Appellant has, as of the date of this decision, still failed to produce. Appellant did not dispute that verifications had been properly requested, that they are needed by MassHealth to make an eligibility determination on his application for MassHealth Long Term Care benefits, and/or that he has failed to produce all of the requested verifications. Additionally, Appellant failed to take advantage of the record-open period that was granted to him to make a post-hearing submission to evidence his past efforts to request and secure the subject verifications.

On this record, Appellant has failed to meet his burden. There is no basis in fact or law to find that MassHealth has made any error or that the subject denial of October 3, 2022 is in any way improper.

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.

Kenneth Brodzinski
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]