

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2301457
Decision Date:	4/28/2023	Hearing Date:	3/21/2023
Hearing Officer:	Cynthia Kopka	Record Open to:	4/28/2023

Appearance for Appellant:



Appearance for MassHealth:

Jamie Lapa, Springfield



*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:	4/28/2023	Hearing Date:	3/21/2023
MassHealth’s Rep.:	Jamie Lapa	Appellant’s Rep.:	
Hearing Location:	Springfield (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 January 24, 2023, 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 February 23, 2023. 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 April 28, 2023 for Appellant to submit additional evidence and for MassHealth to respond. Exhibit 5.

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 and testified as follows. MassHealth received Appellant’s application for long term care benefits on November 29, 2022. MassHealth

issued a request for information on December 5, 2022. Exhibit 4 at 2. On January 24, 2023, MassHealth denied Appellant's application for failing to submit the corroborative information requested. Exhibit 1. In order to process Appellant's application, MassHealth needed additional information including verification of a life insurance policy, an annuity contract to verify annuity income, and bank statements. Exhibit 4 at 4.

Appellant's representative appeared by phone and testified as follows. Appellant's representative faxed over a life insurance statement but was having difficulty obtaining the annuity contract. Appellant's representative requested additional time to produce the remaining outstanding verifications. The hearing record was held open through April 21, 2023, for Appellant to submit the necessary information, and through April 28, 2023 for MassHealth to review and respond. Exhibit 5.

On April 26, 2023, Appellant's representative emailed to state that Appellant discharged from the facility and is not cooperating with submitting the remaining verifications. Exhibit 6.

Findings of Fact

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

1. On November 29, 2022, MassHealth received Appellant's application for long term care benefits.
2. On December 5, 2022, MassHealth issued a request for information to Appellant which included requests for a life insurance statement, income from an annuity, and bank statements. Exhibit 4 at 4.
3. On January 24, 2023, MassHealth denied Appellant's application for failure to submit required information. Exhibit 1.
4. Appellant filed this appeal on February 23, 2023. Exhibit 2.
5. To date, MassHealth has not received bank statements or verification of the annuity income. Exhibit 6.

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 November 29, 2022 and requested information on December 5, 2022. Appellant’s representative was still unable to provide information requested in December by the April 21, 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: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186

[REDACTED]