

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2301619
Decision Date:	4/25/2023	Hearing Date:	3/28/2023
Hearing Officer:	Cynthia Kopka	Record Open to:	4/14/2023

Appearance for Appellant:



Appearance for MassHealth:

Teisha Christie, Taunton



*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:	Dismissed	Issue:	Long term care eligibility – assets
Decision Date:	4/25/2023	Hearing Date:	3/28/2023
MassHealth’s Rep.:	Teisha Christie	Appellant’s Rep.:	██████████
Hearing Location:	Taunton (remote)	Aid Pending:	No

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. The issue on appeal involved the November 9, 2022 denial of long term care benefits because Appellant’s assets exceeded MassHealth’s limit by \$2,326.42. Exhibit 1. Appellant filed this appeal on March 1, 2023. Exhibit 2.

At hearing, Appellant’s representative requested additional time to verify Appellant’s spend down of assets and establish eligibility. The hearing record was held open through April 14, 2023. Exhibit 4. On April 14, 2023, MassHealth reported that Appellant had appropriately reduced her assets and a new notice would generate informing Appellant that her long term care eligibility would begin on September 1, 2022 with a patient paid amount of \$2,032.75 effective January 1, 2023. Exhibit 6. Appellant’s representative was not available to authorize withdrawal of the appeal, having ended her employment at the nursing facility. Exhibit 7.

Appellant will be able to appeal the approval letter if there is any further issue in dispute. As the over asset issue in dispute at this appeal has been resolved, this appeal is dismissed. 130 CMR 610.035(A)(8), 130 CMR 610.051(B), 130 CMR 610.083(C).

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this

decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page 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

