

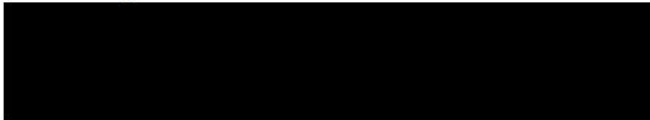
# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2302470
Decision Date:	09/06/2023	Hearing Date:	06/22/2023
Hearing Officer:	Kimberly Scanlon	Record Open to:	08/25/2023

Appearance for Appellant:  
*Via telephone*




Appearance for MassHealth:  
*Via telephone*  
Evelyn Daniel



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility; Long-term Care; Verifications
<b>Decision Date:</b>	09/06/2023	<b>Hearing Date:</b>	06/22/2023
<b>MassHealth's Rep.:</b>	Evelyn Daniel	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Springfield MassHealth Enrollment Center Room 1 (Remote)	<b>Aid Pending:</b>	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 January 26, 2023, MassHealth notified the Appellant that she was not eligible for MassHealth long-term care benefits that were filed on December 13, 2022, because she did not submit the information it needed to decide her eligibility within the required timeframe. (See, 130 CMR 515.008; Exhibit 1). The Appellant filed this appeal in a timely manner on May 18, 2023. (See, 130 CMR 610.015(B); Exhibit 2). Denial of assistance is valid grounds for appeal. (See, 130 CMR 610.032). At the conclusion of the hearing, the record was left open until July 13, 2023<sup>1</sup> for the Appellant to submit additional evidence.

### Action Taken by MassHealth

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

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<sup>1</sup> A subsequent request was received to further extend the record open period, which was granted. (See, Exhibit 10).

## Issue

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 December 13, 2023<sup>2</sup>, MassHealth received a long-term care application on behalf of the Appellant. On January 26, 2023, MassHealth denied the request for failure to receive all verifications. (See, Exhibit 1). As of the hearing date, the following verifications were still missing:

- A copy of the Appellant's last two (2) years of tax returns;
- Current pension showing gross and deduction information;
- Health insurance medical (card) information;
- Checking account bank statements showing activity and balances from February 1, 2022 through present, verifying and explaining transactions of \$ 1000 or more, other than income direct deposits;
- Checking account bank statements showing activity and balances from June 21, 2022 through present, verifying and explaining transactions of \$ 1000 or more, other than income direct deposits;
- Savings account bank statements showing activity and balances from February 1, 2022 through present, verifying and explaining transactions of \$ 1000 or more, other than income direct deposits;
- Personal Needs Allowance Account information (from the nursing facility) including running balances; private payment statement and information regarding what each payment covered;
- Completed Long-term care supplement;
- Notification of admission to facility (SC-1); and
- Nursing Facility Screening Notification.

(See, Exhibit 1, p. 3).

The Appellant's representative appeared at the hearing via telephone and testified as follows: the Appellant did not file taxes in the past two (2) years and therefore she cannot provide this information to MassHealth. With respect to the Appellant's pension benefits, the Appellant's representative explained that the Appellant's private pension is from the federal government. She further explained that the entity as issue will not provide her any information surrounding the Appellant's private pension until she is appointed as permanent conservator for the Appellant. The

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<sup>2</sup> The application date, in accordance with the January 26, 2023 notice, is December 13, 2022. (See, Exhibit 1, p. 1).

Appellant's representative will not be appointed as such until August 10, 2023. As to the outstanding bank statements, the Appellant's representative testified that she has them in her possession and can provide them to MassHealth.<sup>3</sup>

In response to inquiry made to the MassHealth representative at the hearing, she (the MassHealth representative) explained that in lieu of tax return submittals, a letter stating that the Appellant did not file tax returns for the past two (2) years would suffice. The MassHealth representative further explained that she would still need the Appellant's current pension (gross and deductions) information though.

The Appellant's representative testified that she could provide documentation showing the pension deposit, however, she reiterated that she will not be able to obtain any (gross) pension information until she is made permanent conservator of the Appellant. Moreover, the Appellant is not capable of obtaining this information on her own. The Appellant's representative inquired whether there is alternative documentation that she could provide to MassHealth regarding the Appellant's pension information. The MassHealth representative inquired whether the deposits were net or gross. In response, the Appellant's representative testified that it would be net pension deposit information that she could provide. The MassHealth representative explained that she would need the gross amounts so MassHealth can give the Appellant health insurance deductions.

The Appellant's representative then inquired as to whether MassHealth could approve the Appellant's appeal and forego the health insurance deductions. She reiterated that temporary guardianships are not recognized by the entity at issue. In response, the MassHealth representative offered to wait until the Appellant's representative has been appointed as the Appellant's permanent conservator. In response, the Appellant's representative explained that while she will be appointed on August 10, 2023, she does not have a specific timeline as to when she will receive the pertinent documentation from the federal government.

The Appellant's representative testified that the Appellant is very confused and it is unclear what happened to with previous correspondence that the Appellant may have received via mail. Further, the Appellant's representative was recently appointed, and the Appellant's apartment was cleaned out prior to her appointment. She testified that she would be willing to reach out to the facility to see whether it received any additional information surrounding the Appellant's pension.

The record was left open until July 13, 2023 for the Appellant to submit the outstanding verifications to MassHealth. The record was also left open until July 20, 2023 for the MassHealth representative to respond to any submissions. (See, Exhibit 8). The Appellant requested to extend the record open period until July 26, 2023, which was granted. (See, Exhibit 9, p. 1). The record

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<sup>3</sup> The Appellant's representative explained that the Appellant's savings bank merged with another bank.

open period was further extended until August 25, 2023 for the MassHealth representative to respond. (See, Exhibit 10, pp. 1-2). On August 30, 2023, upon inquiry, the MassHealth representative indicated that she was still missing the Appellant's pension information, insurance premium information, some banking statements and nursing facility information. (See, Exhibit 10, p. 1).<sup>4</sup>

## Findings of Fact

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

1. On December 13, 2022, MassHealth received a long-term care application on behalf of the Appellant. (Testimony; Exhibit 1).
2. On January 26, 2023, MassHealth denied the request because it had not received the outstanding verifications within the requested timeframe. (Testimony; Exhibit 1).
3. The Appellant timely appealed on May 18, 2023. (Exhibit 2).
4. As of the hearing date, the following verifications were still outstanding: tax return documentation; current pension information (showing gross and deductions); health insurance medical information; checking account bank statements (for two (2) separate checking accounts; savings account bank statements; nursing facility information; (completed) long-term care supplement; notification of admission to facility (SC-1) and nursing facility screening information. (Testimony; Exhibit 1, p. 3).
5. Following the hearing, the record was left open until July 13, 2023 for the Appellant to submit the outstanding verifications to MassHealth. (Exhibit 8).
6. The record was also left open until July 20, 2023 for MassHealth to respond to any submissions. (Exhibit 8).
7. The record open period was extended to July 26, 2023 for the Appellant to submit the outstanding verifications. (Exhibit 9, p. 1).
8. The record open period was extended until August 25, 2023 for the MassHealth representative to respond to any submissions. (Exhibit 10, pp. 1-2).

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<sup>4</sup> It is noted that the Appellant's representative provided the following verifications to all parties within the record open period: a letter indicating that the Appellant has not filed taxes for the past two (2) years; a completed long-term care supplement; and checking account banking statements for one of the Appellant's checking accounts. (See, Exhibit 9, pp. 4-43).

9. On August 30, 2023, the MassHealth representative indicated that she was still missing information. (Exhibit 10, p. 1).

## 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 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(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 applicant 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 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 was granted a post-hearing record open period to produce the outstanding information pertaining to the application that was received by MassHealth. The Appellant submitted some, but not all of the outstanding information. Unfortunately, without all requested information, MassHealth is unable to make a determination regarding the Appellant's financial 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.

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Kimberly Scanlon  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186

Appellant's Representative: [REDACTED]