Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:DeniedAppeal Number:2308257Decision Date:12/12/2023Hearing Date:10/05/2023Hearing Officer:Mariah BurnsRecord Open to:12/1/2023				
	Appeal Decision:	Denied	Appeal Number:	2308257
Hearing Officer: Mariah Burns Record Open to: 12/1/2023	Decision Date:	12/12/2023	Hearing Date:	10/05/2023
	Hearing Officer:	Mariah Burns	Record Open to:	12/1/2023

Appearance for Appellant:

Appearance for MassHealth: Lori Van Zile, Quincy MassHealth Enrollment Center



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/Dismissed	lssue:	Eligibility; Long-Term Care, Verifications
Decision Date:	12/12/2023	Hearing Date:	10/05/2023
MassHealth's Rep.:	Lori Van Zile	Appellant's Rep.:	
Hearing Location:	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 July 11, 2023, MassHealth denied the appellant's application for MassHealth long-term benefits because MassHealth determined that the appellant did not submit the necessary documentation required to make an eligibility decision. *See* 130 CMR 515.008 and Exhibit 1. The appellant failed to file this appeal in a timely manner, having submitted a request for fair hearing on September 13, 2023. See 130 CMR 610.015(B) and Exhibit 2. On that basis alone, the appeal should be DISMISSED. However, as the Board of Hearings failed to notice the error prior to issuing this decision, a substantive decision will be made. Denial of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied the appellant's application for long-term care benefits.

lssue

The appeal issue is whether MassHealth was within its discretion to deny the appellant's application for long-term care benefits for failure to submit the necessary eligibility verifications.

Summary of Evidence

The appellant is an adult over the age of 65 who was represented at hearing by her conservator. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the testimony and evidence presented at hearing.

On February 28, 2023, an application for MassHealth Long-Term care benefits was filed on the appellant's behalf. MassHealth sent a request for information on March 8, 2023, with a due date for response of April 7, 2023. A second request was sent on April 1, 2023, with a due date of July 6, 2023. The request went largely unanswered, and a denial was issued on July 11, 2023. As of the date of hearing, the following items were still outstanding:

- Appellant's Social Security Number;
- Appellant's Verification of Citizenship;
- Appellant's Proof of Identity;
- Proof of Income;
- Information related to a nursing home Personal Needs Account;
- Bank Account Information;
- Notification of Admission to Nursing Facility (SC-1); and
- Nursing Facility Screening Notification.

The appellant's representative expressed difficulty with obtaining the appellant's information and requested that the record be kept open to allow her more time to make attempts. The record was kept open until November 3, 2023, for the appellant to provide the verifications and until November 11, 2023 for MassHealth to review anything submitted. On November 13, 2023, the appellant requested and was granted a two-week extension of the record open to December 1, 2023. As of the issuance of this decision, none of the outstanding verifications have been provided.

Findings of Fact

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

1. The appellant is an adult over the age of 65 who has been appointed a conservator by a justice of the Massachusetts Probate and Family Court. Exhibit 2.

2. On February 28, 2023, an application for MassHealth Long-Term care benefits was filed on the appellant's behalf. Testimony, Exhibit 4.

3. On July 11, 2023, the appellant's application was denied for failure to provide verification

information after multiple requests for information by MassHealth. Exhibit 1, Exhibit 4, Testimony.

4. The appellant's representative requested that the record be kept open until November 3, 2023, and then requested an extension to December 1, 2023, both of which were granted. Testimony, Exhibit 5.

- 5. As of the issuance of this decision, the following verifications are still outstanding:
 - Appellant's Social Security Number;
 - Appellant's Verification of Citizenship;
 - Appellant's Proof of Identity;
 - Proof of Income;
 - Information related to a nursing home Personal Needs Account;
 - Bank Account Information;
 - Notification of Admission to Nursing Facility (SC-1); and
 - Nursing Facility Screening Notification.

Analysis and Conclusions of Law

An applicant for any MassHealth benefits is required to "cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility..." 130 CMR 515.008(A). After receiving an application for 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 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 request, MassHealth benefit may be denied." 130 CMR 516.001(C).

MassHealth applicants must meet certain financial requirements to be eligible for long-term care services. Specifically, there is a \$2000 asset limit for an individual and a \$3000 limit for certain couples living together in the community. *See* 130 CMR 520.003(A).

In this case, the appellant has not provided MassHealth with any of the information it needs to make an eligibility determination for long-term care benefits. As a result, MassHealth was within its discretion to deny the appellant's application, which has been open since February 28, 2023.

For the foregoing reasons, the appeal is hereby 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.

Mariah Burns Hearing Officer Board of Hearings

cc:

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171