

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2313468
<b>Decision Date:</b>	6/13/2024	<b>Hearing Date:</b>	01/30/2024
<b>Hearing Officer:</b>	Scott Bernard	<b>Record Open to:</b>	06/10/2024

**Appearance for Appellant:**




**Appearance for MassHealth:**

James Lockwood, Taunton MassHealth  
Enrollment Center (MEC)



*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>	Verifications
<b>Decision Date:</b>	6/13/2024	<b>Hearing Date:</b>	01/30/2024
<b>MassHealth's Rep.:</b>	James Lockwood, Taunton MassHealth MEC	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Quincy Harbor South (remote)		

### 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 October 17, 2023, MassHealth denied the appellant's application for MassHealth Standard benefits for long term care residents because MassHealth determined that the appellant failed to submit requested verifications within the required time frame. (see 130 CMR 516.001 and Exhibit 1). The appellant filed this appeal in a timely manner on December 21, 2023. (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth Standard for long term care residents.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.001, in determining that the appellant failed to submit requested verifications within the required time

frame.

## Summary of Evidence

The appellant was represented telephonically at the hearing by his authorized representative. (Exhibit 3). MassHealth was represented telephonically by a worker from the MassHealth Enrollment Center (MEC) in Quincy. The MassHealth representative stated that the appellant submitted an application for MassHealth long term care benefits on June 12, 2023. (Exhibit 5, p. 1). The MassHealth representative testified that the appellant is a single individual, over age [REDACTED] who was admitted to the nursing facility on [REDACTED] and is seeking an April 7, 2023 MassHealth start date. (Exhibit 5, p. 1). MassHealth sent the appellant an Information Request dated July 13, 2023, requesting a number of verifications. (Testimony, exhibit 5, pp. 1-6). The appellant did not submit all of the requested verifications by the October 11, 2023 due date and MassHealth denied the application by notice dated October 17, 2023. (Exhibit 5, p. 2; exhibit 1). The appellant failed to submit the requested verification of citizenship (SSN was not matching), verification of identity, verification of income, verification of bank accounts, life insurance, and burial plans (bank account section, life insurance section, and burial plan section were all left blank on the application), the premium bill for private health insurance, copies of the deeds to two pieces of real estate and the real estate tax bills for these properties, and the registration and excise tax bill for the appellant's automobile. (Exhibit 5, p. 10).

The MassHealth representative stated that as of the date of the hearing, the income information, the bank account information, life insurance information, burial information, and real estate deeds and real estate tax bills were all still outstanding.

The appellant's representative stated that the facility is working with the appellant's niece but she is not cooperative. The appellant had retained a law firm, but the law firm stated that the niece is not cooperative. (Testimony). The appellant's representative stated that the appellant is also not cooperative and states that he is leaving the facility. The appellant's representative stated that the nursing facility filed the application to get the necessary start date. The appellant's representative requested that the record be kept open to give her the opportunity to submit the requested information.

The record was left open until May 1, 2024 for the appellant to submit the following:

1. Verification of citizenship (SSN was not matching), verification of identity
2. Complete the bank accounts, life insurance policies, and burial sections of application
3. Premium bill for private health insurance
4. Copies of the deeds to two real estate properties and the real estate tax bills for these properties
5. Complete a statement of intent to return home
6. Registration and excise tax bill for the appellant's automobile showing assessed value and

amount still owed on vehicle.

(Exhibit 6).

On April 26, 2024, the appellant's representative requested that the record open period be extended. (Exhibit 7, p. 2). The hearing officer extended the record open period to June 10, 2024. (Exhibit 7, p. 1). Nothing was received during the record open period and the record closed on June 10, 2024.

## Findings of Fact

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

1. The appellant submitted an application for MassHealth long term care benefits on June 12, 2023.
2. The appellant is a single individual, over age [REDACTED] who was admitted to the nursing facility on [REDACTED] and is seeking an April 7, 2023 MassHealth start date.
3. MassHealth sent the appellant an Information Request dated July 13, 2023, requesting a number of verifications.
4. The appellant did not submit all of the requested verifications by the October 11, 2023 due date and MassHealth denied the application by notice dated October 17, 2023.
5. The appellant failed to submit the requested verification of citizenship (SSN was not matching), verification of identity, verification of income, verification of bank accounts, life insurance, and burial plans (bank account section, life insurance section, and burial plan section were all left blank on the application), the premium bill for private health insurance, copies of the deeds to two pieces of real estate and the real estate tax bills for these properties, and the registration and excise tax bill for the appellant's automobile.
6. As of the date of hearing, these verifications remained outstanding.
7. The record was left open until May 1, 2024 for the appellant to submit the following: Verification of citizenship (SSN was not matching), verification of identity; Complete the bank accounts, life insurance policies, and burial sections of application; Premium bill for private health insurance; Copies of the deeds to two real estate properties and the real estate tax bills for these properties; Complete a statement of intent to return home; Registration and excise tax bill for the appellant's automobile showing assessed value and amount still owed on vehicle.

8. On April 26, 2024, the appellant's representative requested that the record open period be extended.
9. The hearing officer extended the record open period to June 10, 2024.
10. Nothing was received during the record open period and the record closed on June 10, 2024.

## Analysis and Conclusions of Law

### Application for Benefits

#### (A) Filing an Application.

##### (1) Application. To apply for MassHealth

(a) for an individual living in the community, an individual or his or her authorized representative must file a complete paper Senior Application and all required Supplements or apply in person at a MassHealth Enrollment Center (MEC); or

(b) for an individual in need of long-term-care services in a nursing facility, a person or his or her authorized representative must file a complete paper Senior Application and Supplements or apply in person at a MassHealth Enrollment Center (MEC).

##### (2) Date of Application.

(a) The date of application is the date the application is received by the MassHealth agency.

(b) An application is considered complete as provided in 130 CMR 516.001(C).

(c) If an applicant described in 130 CMR 519.002(A)(1) has been denied SSI in the 30-day period before the date of application for MassHealth, the date of application for MassHealth is the date the person applied for SSI.

##### (3) Paper Applications or In-person Applications at the MassHealth Enrollment Center (MEC) — Missing or Inconsistent Information.

(a) If an application is received at a MassHealth Enrollment Center or MassHealth outreach site and the applicant did not answer all required questions on the Senior Application or if the Senior Application is unsigned, the MassHealth agency is unable to determine the applicant's eligibility for MassHealth.

(b) The MassHealth agency requests responses to all of the unanswered questions necessary to determine eligibility. The MassHealth agency must receive such information within 15 days of the date of the request for the information.

(c) If responses to all unanswered questions necessary to determine eligibility are received within 15 days of the date of the notice, referenced in 130 CMR 516.001(A)(3)(b), the MassHealth agency will request any corroborative information necessary to determine eligibility, as provided in 130 CMR 516.001(B) and (C).

(d) If responses to all unanswered questions necessary for determining eligibility are not received within the 15-day period referenced in 130 CMR 516.001(A)(4)(b), the

MassHealth agency notifies the applicant that it is unable to determine eligibility. The date that the incomplete application was received will not be used in any subsequent eligibility determinations. If the required response is received after the 15-day period, the eligibility process commences and the application is considered submitted on the date the response is received, provided that if the required response is submitted more than one year after the initial incomplete application, a new application must be completed.

(e) Inconsistent answers are treated as unanswered.

(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<sup>1</sup> of the date of the request, and of the consequences of failure to provide the information.

(C) Receipt of Corroborative Information. 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 516.001).

The hearing officer may not exclude evidence at the hearing for the reason that it had not been previously submitted to the acting entity, provided that the hearing officer may permit the acting entity representative reasonable time to respond to newly submitted evidence. The effective date of any adjustments to the appellant's eligibility status is the date on which all eligibility conditions were met, regardless of when the supporting evidence was submitted. (130 CMR 610.071(A)(2)).

As of the date of hearing in January, 2024, the appellant still had not submitted verifications requested by MassHealth in July, 2023. The appellant has been in the nursing facility for almost a year at the time of the hearing, and knew he'd need MassHealth coverage at least as of June 12, 2023. The appellant failed to complete full sections of the long term care application with regard to assets, and such sections remained incomplete as of the hearing date. The record was left open for over 3 months and none of the requested information was

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<sup>1</sup> MassHealth now allows 90 days for submission of verifications and the July 13, 2023 Request for Information gave the appellant 90 days to submit requested verifications by October 11, 2023.

submitted. The record open was extended for over another month and still nothing was received. The appellant has been a resident of the nursing facility for a [REDACTED] and has had ample time to complete the application and submit the requested verifications.

MassHealth's action in denying the appellant's application for failure to submit requested verifications in a timely manner is upheld and 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.

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Scott Bernard  
Hearing Officer  
Board of Hearings

cc:

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

[REDACTED]