Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2400635
Decision Date:	09/27/2024	Hearing Date:	08/19/2024
Hearing Officer:	Marc Tonaszuck	Record Open to:	09/23/2024

Appearance for Appellant:

Appearance for MassHealth: Jamie Lapa



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	lssue:	Long Term Care – Verifications
Decision Date:	09/27/2024	Hearing Date:	08/19/2024
MassHealth's Rep.:	Jamie Lapa	Appellant's Rep.:	
Hearing Location:	Springfield MassHealth Enrollment Center	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 12/11/2023, MassHealth informed the appellant that it reviewed her application for MassHealth and that she is not eligible because she failed to submit verifications (130 CMR 515.008; Exhibit 1). On 01/11/2024, a timely appeal was filed on the appellant's behalf (130 CMR 610.015(B); Exhibits 2 and 4). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

A fair hearing was scheduled to take place before the Board of Hearings (Board) on 07/23/2024 (Exhibit 3A); however, at that time, the Board was informed the appellant died on 2022 and that no personal representative of the estate had been appointed. The appeal was held until verification of a personal representative was received (Exhibit 4). The fair hearing was rescheduled for 08/19/2024 (Exhibit 3B).

Action Taken by MassHealth

MassHealth denied the appellant's application for Long Term Care (LTC) benefits for failure to submit requested verifications.

Issue

The issue is whether or not the requested verifications were submitted to MassHealth.

Summary of Evidence

The MassHealth representative testified telephonically that the appellant submitted an application for MassHealth long term care (LTC) benefits on 05/30/2023, seeking a MassHealth benefit start date of 05/01/2023. As part of the eligibility process, MassHealth sent to the appellant a request for information (VC-1), seeking verifications. As of the date of the fair hearing, not all of the requested verifications have been received by MassHealth. The missing verifications are the following:

- Real Estate Submit copy of HUD settlement statement and verify where funds received were deposited;
- Bank Source of \$150001.22 deposit 5/4/18 and \$12000 deposit; 6/25/19, disposition of these withdrawals: \$75000 11/19/19, \$83662.37 11/20/19, \$10000 11/20/19;
- Bank Source of \$21000 deposit 7/15/20, copy of check 5311 for \$20000, source of \$4000 deposit 7/24/20, source of \$159092.48 deposit 9/4/20, disposition of \$100000 withdrawn 9/9/20, source of \$16032 deposit 1/15/21, disposition of \$6875 withdrawn 2/16/21, \$30000 deposit 8/9/21 source, verify \$30364.38 purchase 8/25/21, verify \$9931.56 purchase 8/31/21, \$6461.34 deposit 12/14/21 source, \$5000 deposit 2/22/22 source, \$9559.13 deposit 4/18/22 source, disposition of \$10000 withdrawal 4/18/22, \$3072.39 deposit 6/24/22 source, \$3755.80 8/4/22 deposit source;
- Bank disposition of \$140000 withdrawn 5/4/18; and
- Titles or registration for all vehicles owned by applicant and/or spouse.

(Exhibit 5.)

The appellant's conservator appeared at the fair hearing and testified telephonically. She testified that some of the verifications would be sent in to MassHealth, but she requested additional time to submit them. Her request was granted and the record remained open for the appellant's submission until 09/09/2024 and for MassHealth's response until 09/23/2024 (Exhibit 6.)

The appellant made no submission during the record open period.

Findings of Fact

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

Page 2 of Appeal No.: 2400635

- 1. The appellant applied for MassHealth long term care benefits on 05/30/2023.
- 2. MassHealth sent to the appellant a request for information (VC-1), seeking information necessary to make an eligibility determination.
- 3. On 12/11/2023, MassHealth denied the appellant's application for benefits because it did not receive the requested verifications.
- 4. The appellant submitted a request for a fair hearing on 01/11/2024.
- 5. The appellant died on /2024.
- 6. A fair hearing was scheduled to take place on 07/23/2024; however, it was rescheduled to take place on 08/19/2024 so that a personal representative of the appellant's estate could be appointed.
- 7. As of the date of the fair hearing, the appellant did not provide the following verifications:
 - Real Estate Submit copy of HUD settlement statement and verify where funds received were deposited;
 - Bank Source of \$150001.22 deposit 5/4/18 and \$12000 deposit; 6/25/19, disposition of these withdrawals: \$75000 11/19/19, \$83662.37 11/20/19, \$10000 11/20/19;
 - Bank Source of \$21000 deposit 7/15/20, copy of check 5311 for \$20000, source of \$4000 deposit 7/24/20, source of \$159092.48 deposit 9/4/20, disposition of \$100000 withdrawn 9/9/20, source of \$16032 deposit 1/15/21, disposition of \$6875 withdrawn 2/16/21, \$30000 deposit 8/9/21 source, verify \$30364.38 purchase 8/25/21, verify \$9931.56 purchase 8/31/21, \$6461.34 deposit 12/14/21 source, \$5000 deposit 2/22/22 source, \$9559.13 deposit 4/18/22 source, disposition of \$10000 withdrawal 4/18/22, \$3072.39 deposit 6/24/22 source, \$3755.80 8/4/22 deposit source;
 - Bank disposition of \$140000 withdrawn 5/4/18; and
 - Titles or registration for all vehicles owned by applicant and/or spouse.
- 8. At the fair hearing, the appellant's conservator requested additional time to provide the missing verifications. Her request was granted and the record remained open in this matter until 09/9/2024 for the appellant's submission and until 09/23/2024 for MassHealth's' response.
- 9. The appellant made no submission to the hearing record during the record open period.

Analysis and Conclusions of Law

Page 3 of Appeal No.: 2400635

MassHealth regulations at 130 CMR 515.008 address responsibilities of applicants and members as follows:

(A) Responsibility to Cooperate. The applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility, and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining other health insurance.

Regulations at 130 CMR 516.001(B) address corroborative information 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.

This appeal involves a denial of MassHealth LTC benefits based on the appellant's failure to provide requested verifications within the regulatory time frame. MassHealth sent a request for verifications to the appellant, requesting certain documents and information to establish eligibility for LTC benefits. The appellant failed to provide all of the requested information, and on 12/11/2024, MassHealth denied the appellant's application for failure to provide verifications.

At the fair hearing, the appellant's conservator requested additional time to provide the missing verifications. Her request was granted; however, the appellant provided nothing during the record open period.

The requested verifications were not received by MassHealth. As a result, pursuant to the above regulations, I conclude that MassHealth's denial of the appellant's application is supported by the facts in the record. This appeal is therefore 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.

Marc Tonaszuck Hearing Officer Board of Hearings



MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

Page 5 of Appeal No.: 2400635