

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2401806
Decision Date:	04/19/2024	Hearing Date:	03/04/2024
Hearing Officer:	Mariah Burns	Record Open to:	04/16/2024

Appearance for Appellant:



Appearance for MassHealth:

Joanne Weldon, Taunton 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	Issue:	Eligibility; Long-Term Care; Verifications
Decision Date:	04/19/2024	Hearing Date:	03/04/2024
MassHealth's Rep.:	Joanne Weldon	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 December 11, 2023, MassHealth denied the appellant's application for MassHealth long-term care benefits because MassHealth determined that the appellant did not provide the required information to determine his eligibility. *See* 130 CMR 515.008 and Exhibit 1. The appellant filed this appeal in a timely manner on February 5, 2024. *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 long-term care benefits.

Issue

The appeal issue is whether MassHealth acted within its discretion in denying the appellant's application for long-term care benefits.

Summary of Evidence

The appellant is an adult who currently resides in a skilled nursing facility. He was represented at

hearing by the Medicaid Eligibility Supervisor from the facility. MassHealth was represented by a worker from the Taunton MassHealth Enrollment Center. The following is a summary of the testimony and evidence provided at hearing.

The appellant submitted an application for MassHealth long-term care benefits on August 3, 2023, requesting a start date of June 11, 2023. MassHealth sent a request for information on August 31, 2023, with a due date of November 29, 2023. When the appellant did not comply with the request for information, MassHealth denied his application on December 11, 2023. As of the date of hearing, the following information was still outstanding:

- Proof of income through civil service pension,
- Proof of health insurance premium through [REDACTED],
- Bank Statements from [REDACTED] account from 1/1/2023 to present,
- Bank statements from [REDACTED] account from 1/1/2023 to present,
- Bank Statements from [REDACTED] from 1/1/2023 to present.

The appellant's representative agreed that the verifications reported by the MassHealth representative were still outstanding. She reported having difficulty getting the information from the appellant's family and requested that the record be kept open to afford one more opportunity for them to provide the requested information. The record was therefore kept open until April 16, 2024.

As of the closing of the record, the appellant submitted a single [REDACTED] statement that is effectively illegible, and a Personal Health Summary from the [REDACTED] that is difficult to read and does not appear to include the premium amount. The appellant's representative reported receiving no additional documents from the appellant's family and suggested that a decision issue in this case.

Findings of Fact

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

1. The appellant is an adult who currently resides in a skilled nursing facility. Testimony.
2. On August 3, 2023, the appellant submitted an application for MassHealth long-term care benefits, requesting a start date of June 11, 2023. Testimony
3. On August 31, 2023, MassHealth sent a request for information for certain information needed to determine the appellant's eligibility for benefits. Testimony.
4. When MassHealth did not receive all requested information, a denial notice was sent on December 11, 2023. Testimony, Exhibit 1.

5. The appellant filed a timely request for fair hearing on February 5, 2023. Exhibit 2.
6. As of the date of hearing, the following requested information is still outstanding:
 - Proof of income through civil service pension,
 - Proof of health insurance premium through [REDACTED]
 - Bank Statements from [REDACTED] from 1/1/2023 to present,
 - Bank statements from [REDACTED] account from 1/1/2023 to present,
 - Bank Statements from [REDACTED] from 1/1/2023 to present.

Testimony, Exhibit 1.

7. As of the closing of the record open period on April 14, 2024, the appellant has provided no documents or information that satisfy any of the outstanding verifications. Exhibit 5 at 1-2, 11, 14.

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). Such assets include “deposits in a bank, savings, and loan institution, checking, or trust accounts, term certificates, or other types of accounts.” 130 CMR 520.007(B)(1). Members are further expected to contribute a certain amount of their income towards the cost of their care. See 130 CMR 519.006(A)(3).

The MassHealth representative testified that MassHealth did not receive any requested information regarding the appellant's pension stub, statements from the appellant's [REDACTED], and statements from his [REDACTED] account. The documents provided from [REDACTED] were reported to be blurry and did not seem to include statements from January 1, 2023 to present, as requested. Finally, the document relating to the appellant's health insurance did not reflect a premium, as requested. The appellant's representative agreed at hearing that the referenced documents were still outstanding and did not argue that the verifications were properly satisfied. Thus, I find that the appellant did not meet his burden of proof in demonstrating that he complied with MassHealth's requests for information related to his application for long-term care benefits. I further find no error in MassHealth's issuance of the December 11, 2023, notice denying the appellant's application.

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: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616