Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appellant Representative:

MassHealth Representative:





Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid Board of Hearings 100 Hancock Street, 6th floor Quincy, MA 02171

APPEAL DECISION

Appeal Decision:	Denied	lssue:	Long Term Care Verifications 130 CMR 516.001
Decision Date:	10/01/2024	Hearing Date:	July 18, 2024
MassHealth Rep.:	E. Daniel	Appellant Rep.:	Facility Business Office Manager
Hearing Location:	Springfield		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

The appellant received a MassHealth notice dated May 14, 2024, stating: MassHealth is ending your coverage as you did not give MassHealth the information needed to decide your eligibility within the required time limits. (Exhibit 1). The appellant appealed this notice timely on June 13, 2024. (130 CMR 610.015(B); Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's application for long term care benefits for failure to submit required verifications.

lssue

Did the appellant submit the requested verifications prior to the close of the record-open period following the fair hearing and should these verifications be considered by MassHealth?

Summary of Evidence

MassHealth testified that on January 31, 2024 the appellant was terminated from Senior Buy-In and applied for MassHealth long term care benefit. MassHealth stated on February 09, 2024 a request for verification was sent to the appellant with a return date of May 09, 2024. On May 14, 2024, the appellant was sent a denial notice indicating his application was missing verification of a private pension account, life Insurance policy, and a savings account. On June 13, 2024 the appellant's representative appealed the notice. On July 18, 2024 at an appeal hearing the appellant's representative requested and received an additional 30 days (until August 16, 2024) to provide MassHealth with the missing information. (Exhibit 4). The appellant's representative was able to provide verification of the life insurance and savings account within the required time limits; however on August 15, 2024 the representative requested an additional 30 days to obtain information regarding the appellant's pension. (Exhibit 5). To justify the request for more time the representative provide a letter dated August 02, 2024 to the appellant's bank requesting pension information. (Exhibit 6). The appellant's representative was given an additional 30 days (September 16, 2024) to provide the pension information. (Exhibit 7).

On September 16, 2024 the appellant's representative indicated that she had "been unsuccessful in obtaining information regarding [the] monthly pension." Asking if there was "any way [the appellant could] be penalized monthly for that amount?" She stated she had exhausted all avenues to obtain this information and if by chance she discovered where the pension is from she would send it to MassHealth. (Exhibit 8).

On September 17, 2024 the representative requested an additional two weeks stating, "I am going to sit with his social worker with him and call the bank again to see if we get anywhere." The representative also indicated she would try to contact the places where the appellant remembers he worked and ask whether he had a pension with them. (Exhibit 9).

The request was denied as the record open period closed on September 16, 2024. (Exhibit 10).

Findings of Fact

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

- 1. On January 31, 2024, the appellant applied for MassHealth long term care benefits. (Testimony).
- 2. On February 09, 2024, MassHealth requested information to determine the appellant's long term care eligibility. (Testimony).
- 3. On May 14, 2024, MassHealth denied the appellant MassHealth long term care services for

failing to submit verification of a private pension, life Insurance policy, and bank account. (Exhibit 1).

- 4. On June 13, 2024, the appellant's representative appealed the denial and at a hearing on July 18, 2024 the hearing record was extended until August 18, 2024 for the representative to submit the requested missing verifications. (Exhibit 4).
- 5. Prior to the close of the record open period the appellant's representative provided verification of the appellant's life insurance and savings account. (Testimony).
- 6. On August 02, 2024, the appellant's representative requested pension information from the appellant's bank. (Exhibit 6).
- 7. On August 15, 2024 the appellant's representative requested an additional 30 days to obtain information regarding the private pension. (Exhibit 5).
- 8. The representative was given an additional 30 days until September 16, 2024 to provide information regarding the appellant's pension. (Exhibit 7).
- 9. On September 16, 2024 the appellant's representative indicated that she had been unsuccessful in obtaining information regarding the appellant's monthly pension. (Exhibit 8).
- 10. On September 17, 2024 the representative requested an additional two weeks as she intended to sit with the appellant and his social worker and call the bank and places the appellant worked and ask whether he had a pension with them. (Exhibit 9).
- 11. The request for additional time was denied as the record open period had closed on September 16, 2024. (Exhibit 10).

Analysis and Conclusions of Law

On February 09, 2024, the appellant was informed by MassHealth that he was missing verification to determine his long term care eligibility. While the appeal record was extended to August 16, 2024 and then again to September 16, 2024 the appellant and/or his representative failed to submit the required verification of his pension to determine his eligibility for MassHealth long term care services. Although the appellant's representative on September 17, 2024 requested an additional two weeks as she intended to sit with the appellant and his social worker to determine where he worked and if he had a pension with them as well call the bank again, the request was

denied as the request for additional time was made after the appeal record had closed.¹

130 CMR 516.001: Application for Benefits

(A) Filing an Application.

(1) Application. To apply for MassHealth (b) for an individual in need of long-termcare 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).

(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. (*Emphasis added*).

Although the appellant received an initial request for information on February 09, 2024 and two extensions of the hearing record until August 19, 2024 and September 16, 2024, the appellant's representative was unable to provide the necessary verification of his private pension. The appellant has therefore not complied with the above-referenced regulations and as a consequence, MassHealth is within its discretion to deny the appellant's long term care application.

This appeal is DENIED

"REQUEST FOR ADDITIONAL TIME

¹ The Record Open form signed by the appellant's representative on July 18, 2024 states any request for additional time must be made prior to the close of the record open period.

If you need additional time to make your submission, you may request an extension <u>IN WRITING</u> to the Hearing Officer at the Board of Hearings address above. The request <u>MUST</u> be received prior to the original submission due date."

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.

Brook Padgett Hearing Officer Board of Hearings

cc: MassHealth representative: Springfield MEC