

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2413628
Decision Date:	04/01/2025	Hearing Date:	02/06/2025
Hearing Officer:	Christopher Jones	Record Open to:	03/14/2025

Appearance for Appellant:




Appearance for MassHealth:

Lori VanZile – Quincy 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

Appeal Decision:	Denied	Issue:	Long term care; Verifications
Decision Date:	04/01/2025	Hearing Date:	02/06/2025
MassHealth's Rep.:	Lori VanZile	Appellant's Rep.:	
Hearing Location:	Telephonic	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 August 5, 2024, MassHealth denied the appellant's application for MassHealth benefits because the appellant did not provide all verifications needed to determine eligibility. (Exhibit 1; 130 CMR 515.008.) The appellant's conservator filed this timely appeal on September 3, 2024. (Exhibit 2; Exhibit 3; 130 CMR 610.015(B).) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

This matter was originally scheduled for hearing on September 30, 2024. (Exhibit 4.) The applicant died prior to the hearing, and this matter was placed on hold until a personal representative of the applicant's estate could be appointed. (See Exhibits 7 – 8.) The Board of Hearings then dismissed the appeal until the appellant's conservator verified that probate proceedings had been filed. (See Exhibits 9 – 15.) The appellant's conservator was appointed personal representative of the estate, and, after receipt of the court appointment, BOH scheduled the matter for a second hearing. (Exhibit 16.) Following that hearing, the record was left open until March 14, 2025, for the appellant's estate's representative to submit requested verifications, and for MassHealth to review them.

Action Taken by MassHealth

MassHealth denied the appellant's long-term-care application because the appellant did not provide documentation needed to verify all eligibility conditions.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 515.008 and 516.001, in determining that the appellant is ineligible for coverage for failing to cooperate and verify resources.

Summary of Evidence

MassHealth's representative testified that an application for long-term-care benefits was filed in April 2024. A request for information was mailed on May 1, 2024, due back July 30, 2024. Many of the requested verifications were still missing, so MassHealth denied the application on August 5, 2024.

The appellant's estate's representative requested an extension to the hearing record until March 6, 2025, to submit verifications, including income verifications, the nursing facility screen, and the nursing facility admission document. MassHealth had until March 14, 2025, to review any submitted documentation. The appellant submitted nothing further.

Findings of Fact

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

- 1) An application for long-term-care benefits was filed on the appellant's behalf in April 2024. (Testimony by MassHealth's representative; Exhibit 5.)
- 2) MassHealth sent the appellant a list of documents the agency needed in order to process the application. Not all documentation was received, and MassHealth denied the application on August 5, 2024. (Testimony by MassHealth's representative; Exhibit 1.)
- 3) The record was left open for the appellant until March 6, 2025, to submit requested income verifications and nursing facility documents. Nothing was submitted. (Exhibit 17.)

Analysis and Conclusions of Law

MassHealth applicants must establish financial eligibility, which includes showing that their countable assets are below a threshold and that they reduced their assets in accordance with state and federal law. (See 130 CMR 520.000.) To qualify for long-term-care benefits, an applicant must

complete an application and cooperate with the MassHealth agency by submitting corroborative information. (See 130 CMR 516.001.) “If the requested information is received within 30 days of the date of denial, the date of receipt of one or more of the verifications is considered the date of reapplication.” (130 CMR 516.002(A).) If a MassHealth member fails to cooperate with MassHealth and submit the documentation requested, MassHealth will deny the member’s application. (See 130 CMR 515.008(C).)

The appellant failed to submit all requested information and cooperate with MassHealth during the processing of their application. The appellant further failed to submit requested verifications despite the extension afforded through the fair hearing process. For this reason, this 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.

Christopher Jones
Hearing Officer
Board of Hearings

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