

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied.	Appeal Number:	2414259
Decision Date:	01/17/2025	Hearing Date:	10/29/2024
Hearing Officer:	Emily Sabo	Record Open to:	11/26/2024

Appearances for Appellant:



Appearance for MassHealth:

Jonathan Gonzalez, Charlestown MEC

Interpreter:



*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:	Community Eligibility—Over 65; Assets; Verifications
Decision Date:	01/17/2025	Hearing Date:	10/29/2024
MassHealth's Rep.:	Jonathan Gonzalez	Appellant's Reps.:	
Hearing Location:	Charlestown MassHealth Enrollment Center (Telephone)	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 29, 2024, MassHealth approved the Appellant for Senior Buy-In, effective September 1, 2024. Exhibit 1 and *see* 130 CMR 520.003(A)(1). The Appellant filed this appeal in a timely manner on September 16, 2024. 130 CMR 610.015(B) and Exhibit 2. Denial of assistance is valid grounds for appeal. 130 CMR 610.032.

Action Taken by MassHealth

MassHealth approved the Appellant for Senior Buy-in effective September 1, 2024.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 515.008 and 130 CMR 520.003(A)(1), in determining that the Appellant did not provide MassHealth with the information necessary for MassHealth to determine whether she was eligible for more comprehensive

MassHealth coverage.

Summary of Evidence

The hearing was held by telephone. The MassHealth representative testified that the Appellant is over the age of 65, and has a household of one. The MassHealth representative testified that MassHealth received a senior application from the Appellant on July 5, 2024. The MassHealth representative testified that MassHealth sent a request for information about the Appellant's checking and savings accounts on July 8, 2024. The MassHealth representative testified that MassHealth received the Appellant's checking account statements on August 26, 2024. However, copies of the Appellant's savings account statements were still missing, and so MassHealth could not make a determination about the Appellant's eligibility for more comprehensive MassHealth benefits, based on the Appellant's assets.

The Appellant testified through an interpreter and verified her identity. The Appellant testified that her clinic submitted everything that MassHealth requested.

The record was held open until November 12, 2024 for the Appellant to submit the missing savings account statements, and until November 26, 2024 for MassHealth to review and respond. Exhibit 5. During the record open period the Appellant did not submit any materials to the Board of Hearings. On November 22, 2024, the MassHealth representative responded that the Appellant had also not submitted any information to MassHealth. Exhibit 6.

Findings of Fact

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

1. The Appellant submitted a MassHealth senior application on July 5, 2024 (Testimony).
2. The Appellant is over the age of 65 and has a household of one (Testimony, Exhibit 4).
3. On August 29, 2024, MassHealth notified the Appellant that she was eligible for Senior Buy-in, effective September 1, 2024 (Exhibit 1).
4. On September 16, 2024, the Appellant filed an appeal with the Board of Hearings (Exhibit 2).
5. The Appellant has not provided sufficient asset information for MassHealth to determine whether the Appellant is eligible for a more comprehensive MassHealth benefit (Testimony, Exhibits 6).

Analysis and Conclusions of Law

The MassHealth regulations at 130 CMR 515.008 provide that:

515.008: Responsibilities of Applicants and Members

(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.

(B) Responsibility to Report Changes. The applicant or member must report to the MassHealth agency, within ten days or as soon as possible, changes that may affect eligibility. Such changes include, but are not limited to, income, assets, inheritances, gifts, transfers of and proceeds from the sale of real or personal property, distributions from or transfers into trusts, address, availability of health insurance, immigration status, and third-party liability.

(C) Cooperation with Quality Control. The Quality Control Division periodically conducts an independent review of eligibility factors in a sampling of case files. When a case file is selected for review, the member must cooperate with the representative of Quality Control. Cooperation includes, but is not limited to, a personal interview and the furnishing of requested information. If the member does not cooperate, MassHealth benefits may be terminated.

130 CMR 515.008.

In evaluating financial eligibility for MassHealth, 130 CMR 520.003 provides that, “The total value of countable assets owned by or available to individuals applying for or receiving MassHealth Standard, Family Assistance, or Limited may not exceed” \$2,000 for an individual. 130 CMR 520.003(A)(1).

Here, the Appellant has not provided MassHealth with sufficient information, specifically her saving account statements, to allow MassHealth to determine whether she is eligible for MassHealth Standard, CommonHealth, Family Assistance, or Limited, in addition to Senior Buy-in. Accordingly, MassHealth did not err in issuing the August 29, 2024 notice and the appeal is denied.

Order for MassHealth

None, except to continue the appellant’s Senior Buy-In (also called Medicare Savings Program) benefits.

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.

Emily Sabo
Hearing Officer
Board of Hearings

MassHealth Representative: Thelma Lizano, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129