

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2414645
<b>Decision Date:</b>	2/3/2025	<b>Hearing Date:</b>	10/21/2024
<b>Hearing Officer:</b>	Patrick Grogan	<b>Record Open to:</b>	12/20/25

**Appearance for Appellant:**



**Appearance for MassHealth:**

Gina Ciaramella-Burbank, Taunton MEC

**Interpreter:**

N/A



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Verifications, Eligibility for Long Term Care, Eligibility over 65
<b>Decision Date:</b>	2/3/2025	<b>Hearing Date:</b>	10/21/2024
<b>MassHealth's Rep.:</b>	Gina Ciaramella- Burbank	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Remote (Tel)	<b>Aid Pending:</b>	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 Long-Term-Care Services in a Nursing Facility because MassHealth determined that the Appellant did not provide necessary information MassHealth requires to decide the Appellant's eligibility within the required time frame (see 130 CMR 515.008 and Exhibit 1). The Appellant filed this appeal in a timely manner on September 24, 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 MassHealth Long-Term-Care Services in a Nursing Facility because MassHealth determined that the Appellant did not provide necessary information MassHealth requires to decide the Appellant's eligibility within the required time frame (see 130 CMR 515.008 and Exhibit 1).

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 515.008, in determining that the Appellant did not provide necessary information MassHealth requires to decide the Appellant's eligibility for MassHealth Long-Term-Care Services in a Nursing Facility within the required time frame (see 130 CMR 515.008 and Exhibit 1).

## Summary of Evidence

The Appellant, an individual over the age of [REDACTED] filed an application for MassHealth Long-Term-Care Services in a Nursing Facility. A denial, dated August 5, 2024, which is the subject of this appeal, was sent to the Appellant. (Exhibit 1) The Appellant was represented by an Appeal Representative, and MassHealth was represented by a member of the Taunton Enrollment Center.

The Appellant filed an appeal, and a hearing was held on October 21, 2024. (Exhibit 2, Exhibit 3, Testimony) At the Hearing, MassHealth listed two items outstanding for MassHealth to make a determination regarding eligibility. (Exhibit 5, Testimony). Specifically, MassHealth required submission of updated statements, within the prior 45 days, regarding a named life insurance policy as well as a named retirement account. (Exhibit 5) The Record was left open until December 6, 2024 for the Appellant to provide the required information and until December 20, 2024 for MassHealth to review. (Exhibit 6).

On November 19, 2024, various documents were submitted to the Board of Hearings and forwarded to MassHealth. (Exhibit 6). On November 26, 2024, MassHealth confirmed receipt and indicated that information submitted was not the information requested by MassHealth. (Exhibit 7). MassHealth indicated that MassHealth spoke with the Appeal Representative after receipt of the non-responsive submission and that the Appeal Representative indicated she would make additional phone calls. (Exhibit 7) Upon the expiration of the Record Open period for the Appellant, no additional submissions were received. On December 19, 2024, prior to the expiration of the Record Open period for MassHealth, MassHealth confirmed no further documentation had been received. (Exhibit 8)

On December 20, 2024, a submission was received on behalf of the Appellant and included screenshots of receipts for purchases of clothing. Although the Record had closed for the Appellant on December 6, 2024, in an abundance of fairness to the Appellant, the information was forwarded to MassHealth. (Exhibit 9) On December 23, 2024, MassHealth responded that the submission was not responsive to the Record Open, and the initial request for updated information related to the life insurance policy and IRA remained outstanding. (Exhibit 10)

## Findings of Fact

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

1. The Appellant, an individual over the age of [REDACTED] filed an application for MassHealth Long-Term-Care Services in a Nursing Facility.
2. A denial, dated August 5, 2024, which is the subject of this appeal, was sent to the Appellant. (Exhibit 1)
3. The Appellant filed an appeal, and a hearing was held on October 21, 2024. (Exhibit 2, Exhibit 3, Testimony)
4. MassHealth required submission of updated statements, within the prior 45 days, regarding a named life insurance policy as well as a named retirement account. (Testimony, Exhibit 5)
5. The Record was left open until December 6, 2024 for the Appellant to provide the required information and until December 20, 2024 for MassHealth to review. (Exhibit 5).
6. On November 19, 2024, various documents were submitted to the Board of Hearings and forwarded to MassHealth. (Exhibit 6).
7. On November 26, 2024, MassHealth confirmed receipt and indicated that information submitted was not the information requested by MassHealth. (Exhibit 7). MassHealth indicated that MassHealth spoke with the Appeal Representative after receipt of the non-responsive submission and that the Appeal Representative indicated she would make additional phone calls. (Exhibit 7)
8. Upon the expiration of the Record Open period for the Appellant, no additional submissions were received. On December 19, 2024, prior to the expiration of the Record Open period for MassHealth, MassHealth confirmed no further documentation had been received. (Exhibit 8)
9. On December 20, 2024, a submission was received on behalf of the Appellant and included screenshots of receipts for purchases of clothing. Although the Record had closed for the Appellant on December 6, 2024, the information was forwarded to MassHealth. (Exhibit 9)
10. On December 23, 2024, MassHealth responded that the submission was not responsive to the Record Open, and the initial request for updated information related to the life insurance policy and IRA remained outstanding. (Exhibit 10)

## Analysis and Conclusions of Law

The Appellant has the burden "to demonstrate the invalidity of the administrative determination." [REDACTED]

MassHealth administers and is responsible for the delivery of health-care services to MassHealth members. (130 CMR 515.002). The regulations governing MassHealth at 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for noninstitutionalized persons aged [REDACTED] or older, institutionalized persons of any age, persons who would be institutionalized without community-based services, as defined by Title XIX of the Social Security Act and authorized by M.G.L. c. 118E, and certain Medicare beneficiaries. (130 CMR 515.002). The Appellant in this case is a noninstitutionalized person over the age of [REDACTED]. Therefore, the regulations at 130 CMR 515.000 through 522.000 apply to this case. (130 CMR 515.002).

MassHealth may provide coverage for low- and moderate-income individuals and couples:

515.002: Introduction to MassHealth

(A) The MassHealth agency is responsible for the administration and delivery of health-care services to low- and moderate-income individuals and couples.

(B) 130 CMR 515.000 through 522.000: Other Division Programs provide the MassHealth requirements for persons who are institutionalized, [REDACTED] years of age or older, or who would be institutionalized without community-based services in accordance with all applicable laws, including Title XIX of the Social Security Act.

As a threshold to coverage, MassHealth must determine eligibility of an Appellant. In order to determine an Appellant's eligibility, it is incumbent upon an applicant to cooperate with MassHealth and provide necessary information for a determination:

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.

Here, MassHealth required additional information to determine eligibility, and despite requests for additional information, ultimately did not receive the information required for the determination. (Testimony, 130 CMR 516.001(B)) A Notice of denial was sent to the Appellant in accordance with the Regulations. (Exhibit 1, 130 CMR 516.001 (C)).

516.001: Application for Benefits

(B) Corroborative Information. 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.

(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.

The Appellant chose to appeal, and at the October 21, 2024 Hearing, additional time was granted to provide MassHealth the information necessary to determine the Appellant's eligibility. (Exhibit 5) Upon expiration of the Record Open period for the Appellant, although documents had been received, the documents were not the outstanding information requested by MassHealth. (Exhibit 6, Exhibit 7) MassHealth contacted the Appeal Representative, and clarified what was outstanding. (Exhibit 7) On December 19, 2024, MassHealth confirmed additional documentation was not received. (Exhibit 8)

On December 20, 2024, additional documentation was received on behalf of the Appellant and forwarded to MassHealth, despite the Record closing for the Appellant on December 6, 2024. (Exhibit 9) On December 23, 2024, MassHealth responded that the submission was not responsive to the Record Open, and the initial request for updated information related to the life insurance policy and IRA remained outstanding. (Exhibit 10)

Here, the Appellant has not cooperated with MassHealth to provide the necessary initial information and corroborative information for MassHealth to make a determination regarding eligibility for MassHealth benefits, despite multiple opportunities to do so. Accordingly, the Appellant has not met the burden to show that MassHealth's denial due to its inability to determine eligibility is invalid. Accordingly, 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.

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Patrick Grogan  
Hearing Officer  
Board of Hearings

cc: [REDACTED]  
[REDACTED]

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