

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Corrected Appeal Decision:	Approved	Appeal Number:	2416910
Corrected Decision Date:	02/07/2025	Hearing Date:	12/05/2024
Hearing Officer:	Marc Tonaszuck	Record Open to:	12/27/2024; 01/31/2025

Appearance for Appellant:




Appearance for MassHealth:

Douglas Thompson



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

CORRECTED APPEAL DECISION

Corrected Appeal Decision:	Approved	Issue:	Long Term Care – Verifications
Corrected Decision Date:	02/07/2025	Hearing Date:	12/05/2024
MassHealth's Rep.:	Douglas Thompson	Appellant's Rep.:	
Hearing Location:	Charlestown MassHealth Enrollment Center	Aid Pending:	No

Correction Preamble

This corrected decision replaces and supersedes the original decision issued on 01/24/2025, which did not reference the appellant's submission during the record open period. As a result, there is an error in the Order. The original Order directs MassHealth to do nothing. This Corrected Order approves the appeal and directs MassHealth to process the appellant's Long Term Care (LTC) application using the 05/16/2024 application date.

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 09/03/2024, MassHealth informed the appellant, a nursing home resident, that it reviewed her application for MassHealth long term care (LTC) benefits and that she is not eligible because she failed to submit verifications (130 CMR 515.008; Exhibit 1). On 11/04/2024, a timely appeal was filed on the appellant's behalf (130 CMR 610.015(B); Exhibits 2 and 4). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

A fair hearing took place before the Board of Hearings (Board) on 12/05/2024 (Exhibit 3). The appellant representative requested an extension of time to submit the missing verification. His request was granted, and the record remained open in this matter until 12/27/2024 for MassHealth's submission and until 01/31/2025 for the appellants response (Exhibit 5). Only the appellant made a submission during the record open period (Exhibit 6).

Action Taken by MassHealth

MassHealth denied the appellant's application for Long Term Care (LTC) benefits for failure to submit requested verifications.

Issue

The issue is whether or not the requested verifications were submitted to MassHealth.

Summary of Evidence

The MassHealth representative testified telephonically that the appellant submitted an application for MassHealth long term care (LTC) benefits on 05/16/2024, seeking a MassHealth benefit start date of 07/15/2024. As part of the eligibility process, MassHealth sent to the appellant a request for information (VC-1), seeking verifications. As of the date of the fair hearing, not all of the requested verifications have been received by MassHealth. At the fair hearing, the MassHealth representative testified that there is only one missing verification:

- Verification of pension from federal government Office of Personnel Management.

(Exhibit 4.)

The appellant's representative appeared at the fair hearing and testified telephonically. He testified that he needed additional time to obtain the missing verification. He requested that the record remain open until 12/27/2024 for MassHealth's detailed description of the missing verification. His request was granted, and the record remained open for the MassHealth's submission until 12/27/2024 and for the appellant's response until 01/31/2025 (Exhibit 5.)

MassHealth made no submission during the record open period (Exhibit 6); however, the appellant's representative submitted the requested verification.

Findings of Fact

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

1. The appellant applied for MassHealth long term care benefits on 05/16/2024.
2. MassHealth sent to the appellant a request for information (VC-1), seeking financial information necessary to make an eligibility determination.
3. On 09/03/2024, MassHealth denied the appellant's application for benefits because it did not receive the requested verifications.
4. The appellant submitted a request for a fair hearing on 11/04/2024.
5. A fair hearing took place before the Board of Hearings on 12/05/2024.
6. As of the date of the fair hearing, the appellant did not provide the following verification:
 - Verification of pension from federal government Office of Personnel Management.
7. At the fair hearing, the appellant's representative requested additional time to provide the missing verifications. His request was granted, and the record remained open in this matter until 12/27/2024 for MassHealth's submission and until 01/31/2025 for the appellant's submission.
8. The appellant submitted the requested verification during the record open period.

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 515.008 address responsibilities of applicants and members as follows:

(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.

Regulations at 130 CMR 516.001(B) address corroborative information 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.

This appeal involves a denial of MassHealth LTC benefits based on the appellant's failure to provide requested verifications within the regulatory time frame. MassHealth sent a request for verifications to the appellant, requesting certain documents and information to establish eligibility for LTC benefits. The appellant failed to provide all of the requested information, and on 09/03/2024, MassHealth denied the appellant's application for failure to provide verifications.

At the fair hearing, the appellant's representative requested additional time to provide the missing verifications. His request was granted. During the record open period, the appellant provided the one remaining verification needed by MassHealth to process the application.¹

The requested verifications were received by the Board during the record open period. As a result, pursuant to the above regulations, MassHealth's denial of the appellant's application is not supported by the facts in the record. This appeal is therefore approved.

Order for MassHealth

Process application dated 05/16/2024. Inform the appellant of the eligibility determination. Include appeal rights.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, Division of Medical Assistance, at the address on the first page of this decision.

Marc Tonaszuck
Hearing Officer
Board of Hearings

¹ See 130 CMR 610.071.

CC: [REDACTED]

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