

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2417249
Decision Date:	3/6/2025	Hearing Date:	12/13/2024
Hearing Officer:	Alexandra Shube	Record Open to:	03/03/2025

Appearance for Appellant:



Appearance for MassHealth:

Via Telephone:

Ka Lam (Mandy) Lau, Charlestown 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:	LTC; Verifications
Decision Date:	3/6/2025	Hearing Date:	12/13/2024
MassHealth's Rep.:	Ka Lam (Mandy) Lau	Appellant's Rep.:	
Hearing Location:	Charlestown MassHealth Enrollment Center - Remote	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 November 5, 2024, MassHealth denied the appellant's application for MassHealth long-term care benefits because the appellant failed to submit all requested information needed to determine the appellant's eligibility within the required time frame (Exhibit 1). The appellant filed this appeal in a timely manner on November 11, 2024 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

At the request of the appellant's representative, the record was held open until January 10, 2025 for the appellant's representatives to submit the missing verifications. MassHealth was given until January 24, 2025 to review and respond to the appellant's submission. An additional extension was granted for the appellant until January 24, 2025 and until February 7, 2025 for MassHealth. A final extension was granted until February 12, 2025 for the appellant and until March 3, 2025 for MassHealth.

Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits for failure to submit requested verifications in a timely manner.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant failed to submit requested verifications in a timely manner.

Summary of Evidence

The representatives for the appellant and MassHealth both appeared at hearing via telephone. The MassHealth representative testified as follows: the appellant is over the age of ■ and a resident of a nursing facility. On July 23, 2024, MassHealth received an application for long-term care benefits on behalf of the appellant. The requested start date was unknown because MassHealth had not received an SC-1 from the facility. On August 1, 2024, MassHealth issued a request for information with a due date of October 30, 2024. MassHealth did not receive all the required information by October 30. On November 5, 2024, MassHealth issued a notice informing the appellant that she did not qualify for MassHealth long-term care benefits because she did not provide MassHealth with the information it needed to decide her eligibility within the required time frame. This is the notice under appeal. Outstanding documentation included the following: health insurance premium bill; banking information for four different accounts; information on real estate, including who is living in the house now and the deed; personal needs allowance (PNA) account statement and private pay letter; current face and cash value of life insurance; SC-1; and nursing facility screening (level of care). This had all been requested in the initial August 1, 2024 request for information, as well as in the November 5, 2024 denial.

The appellant's representative, a Medicaid application specialist from the facility, testified that he has been trying to work with the family to get the information. He has the PNA statement and SC-1, but no screen yet. He requested additional time to submit the information.

The record was held open until January 10, 2025 for the appellant to submit the outstanding verifications. MassHealth was given until January 24, 2025 to review and respond to the appellant's submission. At the request of the appellant, an extension was granted until January 24 and then a final extension until February 12, 2025. MassHealth was ultimately given until March 3, 2025 to review and respond to the appellant's submission. At the close of the record open period, the MassHealth representative reported that she had only received information related to the person living in the home. Based on email communications during the record open period, it also appears that the appellant submitted the SC-1 and nursing facility screening; however, all other verifications remain outstanding.

Findings of Fact

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

1. The appellant is over the age of [REDACTED] and is a resident of a nursing facility (Testimony and Exhibit 4).
2. On July 23, 2024, MassHealth received a long-term care application on behalf of the appellant (Testimony and Exhibit 5).
3. On August 1, 2024, MassHealth issued a request for information with a due date of October 30, 2024 (Exhibit 5).
4. MassHealth did not receive all the requested verifications and, on November 5, 2024, issued a denial notice for failure to provide all requested verifications within the required time frame. This is the notice under appeal. (Testimony and Exhibit 1).
5. Verifications outstanding at the time of the notice and hearing include the following: health insurance premium bill; banking information for four different accounts; information on real estate, including who is living in the house now and the deed; PNA account statement and private pay letter; current face and cash value of life insurance; SC-1; and nursing facility screening (level of care). (Testimony and Exhibit 5).
6. The record was initially held open until January 10, 2025 for the appellant to submit the outstanding verifications. MassHealth was given until January 24, 2025 to review and respond to the appellant's submission. (Exhibit 6).
7. Ultimately, after two extensions of the record open period, the appellant was given until February 12, 2025 to submit verifications, and MassHealth, until March 3, 2025 to review and respond (Exhibit 7).
8. At the close of the record open period, the MassHealth representative stated that she had not received the requested documentation. The only information she had received was related to the person living at the real estate. (Exhibit 7).
9. The appellant also submitted the SC-1 and nursing facility screening via email during the record open period; however, all other verifications remain outstanding. (Exhibit 7).

Analysis and Conclusions of Law

Pursuant to 130 CMR 515.008(A), an “applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility...” After receiving an application for MassHealth benefits, MassHealth proceeds 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.

(130 CMR 516.001(B)). “If the requested information...is received [by MassHealth] within 30 days of the date of the request, the application is considered complete....If such information is not received within 30 days of the date of the request, MassHealth benefits may be denied.” (130 CMR 516.001(C).)

MassHealth denied the appellant’s application for failure to submit all requested information needed to determine the appellant’s eligibility within the required time frame. The appellant was granted a record open period and two extensions of that record open period to submit those missing verifications. At the close of the record open period, MassHealth had not received all the requested information, which was initially requested on August 1, 2024. Including the record open period, the appellant has had over six months to produce the verifications. As the appellant has failed to submit all requested verifications, 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.

Alexandra Shube
Hearing Officer
Board of Hearings

CC:

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