# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:** 



Appearance for Appellant:

Appearance for MassHealth: Yadira Rodriguez, Springfield



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	lssue:	LTC – missing verifications
Decision Date:	01/31/2025	Hearing Date:	12/23/2024
MassHealth's Rep.:	Yadira Rodriguez	Appellant's Rep.:	
Hearing Location:	Springfield MassHealth Enrollment Center Telephonic		

### 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 10/18/24, MassHealth denied the appellant's application for Long-Term Care benefits because MassHealth did not receive the requested documents within the required timeframe. (130 CMR 516.001 and Exhibit 1). The appellant filed this appeal in a timely manner on 11/14/24. (130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032). The record was left open until 1/23/25 for the appellant to submit the missing verifications and until 1/30/25 to allow MassHealth to review all submissions. (Exhibit 6).

## **Action Taken by MassHealth**

MassHealth denied the appellant's Long-Term Care (LTC) benefits application due to the failure to submit the required verifications.

lssue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.001, in determining that the appellant is ineligible for LTC benefits for failing to submit the required verifications.

#### **Summary of Evidence**

The appellant is a single individual over the age of 65 who was admitted to a long-term care facility in **Constitution** The appellant submitted an application for MassHealth long-term care benefits on 9/6/24, with a requested coverage start date of 6/1/24. The MassHealth representative testified that a request for verifications was sent on 9/13/24. The MassHealth representative testified that only some verifications were received on 10/13/24. The MassHealth representative testified that a denial was issued on 10/18/24 for failure to submit all the required verifications. (Exhibit 1). The MassHealth representative testified that MassHealth is missing the following verifications:

statements from 7/1/23 to present

Provide a copy of the HUD statement or closing

disclosure form and verify disposition of all funds received from the sale of this property.

NURSING FACILITY- PNA/PRIVATE PAY LETTER, SC-1, SCREENING

The appellant's representative, who is her court-appointed guardian, testified that the nursing facility filed the application and that the appellant would private pay for a while. The record was left open until 1/23/25 to allow time for the appellant's representative to submit the missing verifications. (Exhibit 6).

The record closed and the appellant's representative had not submitted any verifications to the hearing officer, nor did he request an extension of the record open period. The MassHealth representative indicated on 1/30/25, **Sector** were still outstanding. (Exhibit 7).

#### **Findings of Fact**

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

- The appellant is a single individual over the age of 65 who was admitted to a long-term care facility
- 2. The appellant submitted an application for MassHealth long-term care benefits on 9/6/24, with a requested coverage start date of 6/1/24.
- 3. MassHealth sent a request for verifications on 9/13/24.

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- 4. Some verifications were received on 10/13/24.
- 5. MassHealth issued a denial on 10/18/24 for failure to submit all the required verifications.
- 6. As of the hearing date, MassHealth is missing the following verifications:

statements from 7/1/23 to present
Provide a copy of the HUD statement or closing disclosure form and verify disposition of all funds received from the sale of this property.

- NURSING FACILITY- PNA/PRIVATE PAY LETTER, SC-1, SCREENING
- 7. The record was left open until 1/23/25 for the appellant to submit all of the missing verifications.
- 8. The record closed, and the appellant's representative had not submitted any verifications to the hearing officer, nor did he request an extension of the record open period.
- 9. The MassHealth representative indicated on 1/30/25 that the IRA statements were still outstanding.

## Analysis and Conclusions of Law

Regulation 130 CMR 516.001(C) provides that MassHealth may request additional information or documentation, if necessary to determine eligibility. The request is generally sent to the applicant within 5 days of receipt of the application and provides 30 days to return the needed documents. Pursuant to 130 CMR 516.001(D), if the verifications are not submitted within 30 days of the date of the request, MassHealth benefits may be denied. Thereafter, if one or more of the documents are submitted within 30 days of the denial, the date of receipt shall be the reapplication date.

Here, the appellant's representative neither submitted all the missing verifications nor requested any further extension of the record open period. Since the appellant has not provided the verifications necessary to determine MassHealth eligibility, MassHealth correctly denied the application.

The appeal is DENIED.

### **Order for MassHealth**

None.

## Notification of Your Right to Appeal to Court

cc:

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.

Christine Therrien Hearing Officer Board of Hearings

cc: MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center

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