

YOffice of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2418130
Decision Date:	2/27/2025	Hearing Date:	12/23/2024
Hearing Officer:	Kenneth Brodzinski	Record Open to:	02/28/2025

Appearance for Appellant:



Appearance for MassHealth:

Wilfred Colon



*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 - Failure to Verify
Decision Date:	2/27/2025	Hearing Date:	12/23/2024
MassHealth's Rep.:	Wilfred Colon	Appellant's Rep.:	Robyn Church
Hearing Location:	Quincy		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through notice dated October 29, 2024, MassHealth determined that Appellant is not eligible for MassHealth benefits for failure to provide MassHealth with requested documentation needed to decide eligibility (Exhibit A). Appellant filed this appeal in a timely manner on November 22, 2024 seeking to preserve an application date (see 130 CMR 610.015(B) and Exhibit A). Denial of MassHealth benefits constitutes valid grounds for appeal (see 130 CMR 610.032). The record was held open for the submission and review of additional information until February 28, 2025.

Action Taken by MassHealth

MassHealth determined that Appellant has not established eligibility for MassHealth benefits because she failed to provide requested financial documentation necessary for an eligibility determination.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied Appellant MassHealth benefits for failing to provide requested financial documentation necessary to make an eligibility determination.

Summary of Evidence

The MassHealth representative testified that Appellant filed an application for MassHealth Long-Term Care benefits on July 16, 2024. On July 25, 2025 MassHealth issued a written request for financial verifications that were due to be filed with MassHealth on or before August 23, 2024. The MassHealth representative testified that all of the requested verifications were not filed by the due date and on October 26, 2024, MassHealth issued a denial notice due to Appellant's failure to file requested verifications. The denial notice listed the verifications that remained outstanding at that time (Exhibit A).

The MassHealth representative testified that some documentation was filed on November 22, 2024, so the application was revived with a re-application date of November 22, 2024. According to the MassHealth representative, on the day of hearing, all of the verifications listed in the denial notice as well as the SC-1 Form were still outstanding except for the PNA statement.

Appellant's representative did not dispute any of the MassHealth representative's testimony nor did she deny that the requested verifications were needed to establish Appellant's eligibility. Appellant's representative explained unsuccessful attempts to obtain the [REDACTED] records. Appellant's representative requested more time to obtain and file all of the outstanding verifications. Appellant was given until the close of business on January 31, 2025 to file the verifications with the MassHealth representative and the hearing officer. Masshealth was given until the close of business on February 7, 2025 to review any additional documentation and file a written response via email to the hearing officer cc'd to Appellant.¹

Appellant filed additional records with MassHealth's EDMC on January 21, 2025 (Exhibit B). On February 4, 2025, Appellant's representative communicated by email stating she was not able to obtain all of the requested verifications, and that the nursing facility would be petitioning the Court to appoint a conservator for Appellant as she was no longer capable of assisting in this matter (Exhibit C). On February 18, 2025, the Masshealth representative sent an email to Appellant and the hearing officer informing them that financial verifications (information on two bank accounts – one [REDACTED] account ending in [REDACTED] and a [REDACTED] account ending in [REDACTED] that had been requested since July 2024 and were necessary to determine MassHealth eligibility were still outstanding (Exhibit D and the subject denial notice, Exhibit A).

¹ The record-open period was extended for MassHealth until cob February 28, 2025 when it was learned that Appellant had not sent a copy of her post-hearing submission directly to the MassHealth representative who was unaware that her submission had been made through EDMC. At hearing, Appellant was specifically told to send her submission directly to the Masshealth representative.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant filed an application for MassHealth Long-Term Care benefits on July 16, 2024.
2. On July 25, 2025 MassHealth issued a written request for financial verifications that were due to be filed with MassHealth on or before August 23, 2024.
3. All of the requested verifications were not filed by the due date.
4. On October 26, 2024, MassHealth issued a denial notice due to Appellant's failure to file requested verifications; the denial notice listed the verifications that remained outstanding at that time (Exhibit A).
5. Some, but not all, some documentation was filed on November 22, 2024, so the application was revived with a re-application date of November 22, 2024.
6. On the day of hearing, all of the verifications listed in the denial notice as well as the SC-1 Form were still outstanding except for the PNA statement.
7. Appellant was given 38 days after the hearing to file the requested documentation.
8. Appellant filed additional records with MassHealth's EDMC on January 21, 2025 (Exhibit B).
9. Appellant's post hearing submission was still missing documentation needed to make an eligibility determination that had been requested since July 2024 [REDACTED]
[REDACTED]
10. On February 4, 2025, Appellant's representative communicated by email stating she was not able to obtain all of the requested verifications, and the nursing facility would be petitioning the Court to appoint a conservator for Appellant as she was no longer capable of assisting in this matter (Exhibit C).

Analysis and Conclusions of Law

Regulation 130 CMR 516.001(C) states that MassHealth may request corroborative 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.

In this case, MassHealth sent a written request for necessary financial verifications. Appellant failed to fully respond to the request within 30 days; therefore, I find that MassHealth had adequate grounds and authority to properly deny the application on October 29, 2024 (130 CMR 516.001(C) and (D)).

On appeal, Appellant was given more than 5 weeks after the hearing to provide the identified verifications. Appellant failed to file all of the verifications that had been requested since July 2024. At the hearing, Appellant's representative explained unsuccessful efforts she had made with obtaining documentation from [REDACTED]. According to the subject denial notice, MassHealth was seeking documentation on three [REDACTED] [REDACTED] that Appellant did not address at hearing. MassHealth's post-hearing response to Appellant's submission indicated that information on one of the three [REDACTED] accounts and the [REDACTED] account were still missing. Appellant did not explain why she was apparently able to get the documentation on two of the three [REDACTED] but not the third, and did not explain any efforts to obtain the [REDACTED] documentation.

In total, Appellant has had over 6 months to obtain and file copies of the bank statements. The fact that she may now need a conservator does not justify this prolonged delay and failure to provide the still-missing verifications.

For the foregoing reasons the 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

[REDACTED]

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171