

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2418131
Decision Date:	1/13/2025	Hearing Date:	12/10/2024
Hearing Officer:	Amy B. Kullar, Esq.	Record Open to:	12/31/2024

Appearance for Appellant:



Appearance for MassHealth:

Kathleen Towle, Springfield MassHealth  
Enrollment Center



*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>	Long-Term Care; Verifications
<b>Decision Date:</b>	1/13/2025	<b>Hearing Date:</b>	12/10/2024
<b>MassHealth's Rep.:</b>	Kathleen Towle	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Springfield MassHealth Enrollment Center Room 1 (Telephone)	<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 October 2, 2024, MassHealth denied the appellant's application for MassHealth long-term care (LTC) benefits because MassHealth determined that the appellant did not submit the necessary documentation required to make an eligibility decision. *See*, 130 CMR 515.008 and Exhibit 1. The appellant filed this appeal in a timely manner, having submitted a request for fair hearing on November 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 long-term care benefits.

### Issue

The appeal issue is whether MassHealth was within its discretion to deny the appellant's application for long-term care benefits for failure to submit the necessary eligibility verifications.

## Summary of Evidence

The appellant is an adult over the age of 65 who was represented at hearing by her temporary conservator. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the testimony and evidence presented at hearing.

On June 17, 2024, an application for MassHealth LTC benefits was filed on the appellant's behalf, seeking a benefit start date of August 21, 2024. MassHealth sent a request for information on June 26, 2024, with a due date for response of July 25, 2024. The appellant was unable to provide all of the items in the request for information, and a denial was issued on October 4, 2024. As of the date of hearing, the following items were still outstanding:

- Life Insurance: [REDACTED] policies: need current statement showing face value, type of policy and if whole, current cash surrender value;
- Annuity: [REDACTED] Please provide a copy of the full annuity contract and a copy of the check used to purchase the annuity. 2. Verify that the contract is irrevocable and nonassignable. 3. We require the completion of the Notice of Preferred Beneficiary ANN-3 completed and verification that the Commonwealth of MA has been listed as the primary beneficiary if the policy was purchased after February 8, 2006; and
- PNA/Private pay statement

The appellant's representative did not deny the MassHealth representative's testimony and acknowledged that the verifications were still outstanding. The appellant's representative expressed that she was having difficulty with obtaining the appellant's information as she was experiencing resistance from the various financial institutions accepting her authority as temporary conservator, and that she is working with an attorney who is representing her in her capacity as the temporary conservator for the appellant. The attorney is assisting her with having the powers in her Letters of Conservatorship expanded. She requested that the record be kept open to allow her more time to gather the documentation. Additionally, when questioned by the hearing officer, she acknowledged that her Letters of Conservatorship did in fact, expire on December 10, 2024, which is the date of this appeal hearing. Testimony and Exhibit 3. The appellant's representative testified that her counsel was scheduled to be in court on this matter today. The appellant's representative agreed to submit unexpired Letters of Conservatorship to all parties when she received them from her attorney.

It was agreed that the record would be held open until December 31, 2024, for the appellant to provide the outstanding verifications to all parties, and then MassHealth would have an opportunity to process the submission and respond. The appellant's representative emailed a 65-page scanned document to all parties on December 29, 2024. Exhibit 6. On January 2, 2025, MassHealth responded to the appellant's submission by stating that the submitted documentation

satisfied the request for information as to the [REDACTED] but that all other requested information is still outstanding, including the PNA/Private pay statement from the appellant's long-term care facility. Exhibit 7. As of the issuance of this decision, none of the other outstanding verifications have been provided, including unexpired Letters of Conservatorship.

## Findings of Fact

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

1. The appellant is an adult over the age of 65 who is a resident of a nursing facility.
2. A justice of the Massachusetts Probate and Family Court appointed a temporary conservator to represent the appellant's interests. Exhibit 3.
3. On June 17, 2024, an application for MassHealth Long-Term care benefits was filed on the appellant's behalf. Testimony, Exhibit 6.
4. On October 2, 2024, the appellant's application was denied for failure to provide verification information after a request for information by MassHealth. Exhibit 1, Testimony.
5. The appellant's representative requested that the record be kept open until December 31, 2024, which was granted. Testimony, Exhibit 7.
6. As of the issuance of this decision, the following verifications are still outstanding:
  - Life Insurance: [REDACTED] policies: need current statement showing face value, type of policy and if whole, current cash surrender value; and
  - PNA/Private pay statement

## Analysis and Conclusions of Law

An applicant for any MassHealth benefits is required to "cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility..." 130 CMR 515.008(A). After receiving an application for 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 request, MassHealth benefit may be denied.” 130 CMR 516.001(C).

MassHealth applicants must meet certain financial requirements to be eligible for long-term care services. Specifically, there is a \$2000 asset limit for an individual and a \$3000 asset limit for certain couples living together in the community. *See* 130 CMR 520.003(A).

In this case, the appellant has not provided MassHealth with critical financial information it needs to make an eligibility determination for long-term care benefits. As a result, MassHealth was within its discretion to deny the appellant’s application, which has been open since June 17, 2024.

For the foregoing reasons, the appeal is hereby 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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Amy B. Kullar, Esq.  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104