

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2418170
<b>Decision Date:</b>	2/14/2025	<b>Hearing Date:</b>	01/13/2025
<b>Hearing Officer:</b>	Christopher Jones	<b>Record Open to:</b>	02/14/2025

**Appearance for Appellant:**



**Appearance for MassHealth:**

Jessica Adamiec – Taunton Intake

*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>	2/14/2025	<b>Hearing Date:</b>	01/13/2025
<b>MassHealth's Rep.:</b>	Jessica Adamiec	<b>Appellant's Rep.:</b>	
<b>Hearing Location:</b>	Telephonic	<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 3, 2024, MassHealth denied the appellant's application for MassHealth benefits because the appellant did not give MassHealth information needed to determine eligibility. (Exhibit 1; 130 CMR 515.008.) The appellant filed this appeal in a timely manner on November 26, 2024. (Exhibit 1; 130 CMR 610.015(B).) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

Following the hearing, the record was left open until February 14, 2025, for the appellant to submit additional verifications, and for MassHealth to review and respond.

### Action Taken by MassHealth

MassHealth denied the appellant's long-term-care application because the appellant did not provide documentation needed to verify all eligibility conditions.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 515.008 and 516.001, in determining that the appellant is ineligible for coverage for failing to cooperate and verify resources.

## Summary of Evidence

MassHealth's representative testified that an application for long-term-care benefits was filed on the appellant's behalf on June 12, 2024. The application was denied for missing verifications on October 3, 2024. At the time of the hearing, MassHealth was still missing: a valid Authorized Representative Designation ("ARD") form; a current pension statement; supplemental medical insurance premium verification; banks statements for 3 accounts from January 1, 2023, until present with proof of all deposits and withdrawals of \$1,500 and over; documentation regarding real estate; and documentation regarding a trust.

MassHealth's representative noted that Section 1 of the submitted ARD form was filled out, but it was signed by the power of attorney.<sup>1</sup> MassHealth's representative explained that Section 1 of the ARD form may only be signed by the applicant or member. The holder of the power of attorney must complete Section 3 of the ARD form and attach the authorizing document. The hearing record was left open until January 31, 2025, for the appellant to submit documentation, and MassHealth was allowed 2 weeks to review and respond. Instructions regarding how the appellant could request additional time were included in the email allowing the record open period.

On or around January 14, 2024, the appellant's representative submitted an email from the appellant's power of attorney explaining that the property had been sold, and they would not be able to provide the requested documentation within the record open timeline because they were on vacation. The email goes on to state that the appellant's bank balances would disqualify her from Medicaid coverage at this time, "so it's a waste of all of our time to spend hours gathering disqualifying records. I suggest we wait [and] then apply when her assets have been transferred to [the nursing facility] for back payments." (Exhibit 4, p. 9.)

The appellant's representative was asked if they wanted to withdraw the application or the appeal, based on this instruction from the power of attorney. On or around January 29, 2025, the appellant's representative submitted some bank statements, and asked whether the appellant would need to file a new application if they withdrew the application. MassHealth's representative confirmed that a new application would need to be filed. On February 4, 2025, after the appellant's record open period had closed, the appellant submitted pension verification and another ARD form with Section 1 completed by the power of attorney. No documentation regarding real estate or the appellant's trust were submitted. The appellant never requested additional time to submit information.

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<sup>1</sup> The power of attorney documentation was submitted with this appeal, and the power of attorney authorized the appeal representative to represent the appellant at this hearing.

## Findings of Fact

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

- 1) An application for long-term-care benefits was filed on the appellant's behalf on June 12, 2024. (Testimony by MassHealth's representative; Exhibit 5.)
- 2) MassHealth sent the appellant a list of documents the agency needed in order to process the application, and MassHealth denied the application on October 3, 2024, when all required documents were not received. (Testimony by MassHealth's representative; Exhibit 1.)
- 3) The record was left open until January 31, 2025, for the appellant to submit the requested documents, including real estate verifications and trust documents. The appellant's representative did not submit the requested real estate verifications and trust documents. (Exhibit 4.)

## Analysis and Conclusions of Law

MassHealth applicants must establish financial eligibility, which includes showing that their countable assets are below a threshold and that they reduced their assets in accordance with state and federal law. (See 130 CMR 520.000.) To qualify for long-term-care benefits, an applicant must complete an application and cooperate with the MassHealth agency by submitting corroborative information. (See 130 CMR 516.001.) "If the requested information is received within 30 days of the date of denial, the date of receipt of one or more of the verifications is considered the date of reapplication." (130 CMR 516.002(A); cf. EOM 23-09 (Mar. 2023) (extending time for non-MAGI to verify eligibility factors and provide documentation from 30 days to 90 days).)<sup>2</sup> If a MassHealth member fails to cooperate with MassHealth and submit the documentation requested, MassHealth will deny the member's application. (See 130 CMR 515.008(C).)

The appellant failed to submit all requested information and cooperate with MassHealth during the processing of the application. The appellant further failed to submit requested verifications despite the extension afforded through the fair hearing process. For this reason, this appeal is DENIED.

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<sup>2</sup> The language of the regulation itself gives 30 days to verify eligibility factors. "Effective April 1, 2023, MassHealth [extended] the time that non-MAGI applicants and members will have for verifying eligibility factors and providing corroborative information, from 30 days to 90 days. This extension will provide more time to respond to a Request for Information and submit verifications and information necessary for MassHealth to make an eligibility determination." (EOM 23-09 (Mar. 2023).) There is no published guidance from MassHealth revoking or amending this EOM.

## 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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Christopher Jones  
Hearing Officer  
Board of Hearings

cc: Appellant Representative: K [REDACTED]  
[REDACTED]

Appellant Representative: [REDACTED]

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St.,  
Ste. 4, Taunton, MA 02780