

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



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|-------------------------|--------------------|------------------------|------------|
| Appeal Decision: | DENIED | Appeal Number: | 2418787 |
| Decision Date: | 4/23/2025 | Hearing Date: | 01/08/2025 |
| Hearing Officer: | Kenneth Brodzinski | Record Open to: | 02/21/2025 |

Appearance for Appellant:



Appearance for MassHealth:

Kim McAvinchey



*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

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|---------------------------|----------------|--------------------------|----------------------------|
| Appeal Decision: | DENIED | Issue: | LTC Eligibility Start Date |
| Decision Date: | 4/23/2025 | Hearing Date: | 01/08/2025 |
| MassHealth's Rep.: | Kim McAvinchey | Appellant's Rep.: | |
| Hearing Location: | Tewksbury MEC | | |

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 18, 2024, MassHealth approved Appellant's application for MassHealth Long Term Care benefits with a start date of July 14, 2024 ([Exhibit A](#)). Appellant filed this appeal in a timely manner on December 9, 2024 challenging the start date ([Exhibit B](#)). Calculation of the start date constitutes valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved Appellant's application for MassHealth Long Term Care benefits with a start date of July 14, 2024.

Issue

The appeal issue is whether the controlling regulations entitle Appellant to a start date prior to July 14, 2024.

Summary of Evidence

Both parties appeared by telephone. At the time of hearing, Masshealth submitted a packet of supporting documentation (Exhibit B). Appellant made no filing other than her Request for Fair Hearing (Exhibit A).

The Masshealth representative testified that Appellant filed an application for Masshealth Long term care benefits on April 16, 2024. She was admitted on [REDACTED] and the facility is seeking a coverage start date of June 8, 2024.

On November 14, 2024, Masshealth approved the application with 25-day period of ineligibility due to having excess assets as of the request date of June 8, 2024, and an 11-day penalty period for disqualifying transfers totaling \$4,593.43. According to MassHealth, Appellant was \$10,804.16 over asset on June 8, 2024, which resulted in a 25-day period of ineligibility bringing her otherwise eligible date to July 3, 2024 (June 8, 2024, plus 25 days).

MassHealth also issued a denial notice on September 25, 2024, for excess assets of \$8,658.34 which were to be spent down within 30 days. Thereafter, Appellant verified the following allowable expenditures: \$3,000.00 burial; \$541.78 receipts for purchases made on behalf of Appellant. There was also cash of \$523.13 left in an account. MassHealth determined \$4,593.43 of disqualifying resource transfers arising from unverified disbursements made during the spend down. From this amount Masshealth calculated an 11-day period of ineligibility that was added to the otherwise eligible date of July 3, 2024, to reach a start date of July 14, 2024.

Appellant's representative did not dispute MassHealth's testimony. Instead, she discussed Appellant's expenditures on items such as clothing, pharmacy bills and ambulance charges. In response, the Masshealth representative asked Appellant's representative to explain the unverified expenditures of \$4,593.43. She noted that MassHealth had already reviewed all payments made by checks so posited that the remaining expenditures must have been made using cash.

Appellant's representative requested that the record be held open to allow her time to gather and file further evidence of Appellant's expenditures. Appellant was given one month to make such a filing; however, by the record close date, Appellant had made no post-hearing filing with this Board and made no request for additional time to make such a filing. The Masshealth representative also indicated that she had received no additional information from Appellant since the hearing (Exhibit C).

Findings of Fact

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

1. Appellant filed an application for Masshealth Long term care benefits on April 16, 2024.
2. Appellant was admitted to a long term care facility on [REDACTED] and the facility is seeking a coverage start date of June 8, 2024.
3. On November 14, 2024, Masshealth approved the application with 25-day period of ineligibility due to having excess assets as of the request date of June 8, 2024, and an 11-day penalty period for disqualifying transfers totaling \$4,593.43.
4. Appellant was \$10,804.16 over asset on June 8, 2024, which resulted in a 25-day period of ineligibility bringing her otherwise eligible date to July 3, 2024 (June 8, 2024, plus 25 days).
5. MassHealth issued a denial notice on September 25, 2024, for excess assets of \$8,658.34 which were to be spent down within 30 days.
6. Appellant verified the following allowable expenditures: \$3,000.00 burial; \$541.78 receipts for purchases made on behalf of Appellant and there was also cash of \$523.13 left in an account.
7. MassHealth determined \$4,593.43 of disqualifying resource transfers arising from unverified disbursements made during the spend down.
8. From the \$4,593.43 of disqualifying resource transfers Masshealth calculated an 11-day period of ineligibility that was added to the otherwise eligible date of July 3, 2024 to reach a start date of July 14, 2024.
9. Appellant's representative requested that the record be held open to allow her time to gather and file further evidence of further expenditures.
10. Appellant was given one month to make such a filing; however, by the record close date, Appellant had made no post-hearing filing with this Board and made no request for additional time to make such a filing.
11. By the record close date, the Masshealth representative had received no additional information from Appellant since the hearing (Exhibit C).

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989) On this record, Appellant has failed to meet her burden.

Appellant did not dispute MassHealth's calculation of excess assets or the disqualifying transfers. Appellant requested more time after the hearing to verify expenditures but failed to make any post-hearing filing of any kind. On this record, Appellant has provided no basis in fact and/or law to disturb MassHealth's determinations including the eligibility start date of July 14, 2025.

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: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290