

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2502090
Decision Date:	05/08/2025	Hearing Date:	03/03/2025
Hearing Officer:	Christine Therrien	Record Open to:	05/12/2025

Appearance for Appellant:




Appearance for MassHealth:

Trish Rogers, Taunton



*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 – verifications
Decision Date:	05/08/2025	Hearing Date:	03/03/2025
MassHealth's Rep.:	Trish Rogers	Appellant's Rep.:	
Hearing Location:	Taunton 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 1/21/25, 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 2/3/25. (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 5/3/25 for the appellant to submit the missing verifications, and until 5/12/25 to allow MassHealth to review all submissions and respond. (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.

Issue

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 under the age of 65 who was admitted to a long-term care facility on [REDACTED]. The appellant submitted a MassHealth long-term care conversion application on 11/19/24, with a requested coverage start date of 11/22/24. The MassHealth representative testified that on 12/16/24 MassHealth sent a request for verifications due within 30 days. The MassHealth representative testified that on 1/21/25, a denial was issued for failure to submit all the required verifications. (Exhibit 5). The MassHealth representative testified that MassHealth received the requested bank statements. The MassHealth representative testified that MassHealth is missing the following verifications:

- 1) Completed disability supplement
- 2) Proof the appellant applied for SSDI
- 3) Vehicle registration for a [REDACTED]

Following the appeal hearing, the record was left open until 4/3/25 to allow additional time for the appellant's representative to submit the missing verifications, and until 4/27/25 to give MassHealth time to review all the submitted verifications. (Exhibit 6).

On 4/3/25, the appellant's representative requested that the record be left open until after July of 2025, because there is a "restraining order" against the appellant preventing him from obtaining the vehicle registration.

The hearing officer informed the appellant's representative that the record would be left open in 30-day increments, because there were other verifications that were still outstanding. The appellant's representative was informed that she would need to check in with the hearing officer every 30 days with an update. The record was left open until 5/3/25.

The hearing officer closed the record on 5/3/25, because the appellant's representative had not checked in as required, nor had she submitted any of the requested verifications. (Exhibit 7).

Findings of Fact

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

- 1) The appellant is a single individual under the age of 65, who was admitted to a long-term care facility on [REDACTED]
- 2) The appellant submitted a MassHealth long-term care conversion application on 11/19/24,

with a requested coverage start date of 11/22/24.

- 3) On 12/16/24, MassHealth sent a request for verifications due within 30 days.
- 4) On 1/21/25, a denial was issued for failure to submit all the required verifications.
- 5) MassHealth received the requested bank statements.
- 6) The MassHealth representative testified that MassHealth is missing the following verifications:
 - 1) Completed disability supplement
 - 2) Proof the appellant applied for SSDI
 - 3) Vehicle registration for a [REDACTED]
- 7) The record was left open until 4/3/25 to allow time for the appellant's representative to submit the missing verifications, and until 4/27/25 to give MassHealth time to review all the submitted verifications and respond.
- 8) On 4/3/25, the appellant's representative requested that the record be left open until after July of 2025, because there is a "restraining order" against the appellant preventing him from obtaining the vehicle registration.
- 9) The hearing officer informed the appellant's representative that the record would be left open in 30-day increments, because there were other verifications that were still outstanding. The appellant's representative was informed that she would need to check in with the hearing officer every 30 days with an update. The record was left open until 5/3/25.
- 10) The hearing officer closed the record on 5/3/25, because the appellant's representative had not checked in as required, nor had she submitted any of the requested verifications.

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 any of the missing verifications, nor checked in as required by the hearing officer. 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

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

[REDACTED]

cc: MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center