

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2503033
Decision Date:	6/23/2025	Hearing Date:	03/20/2025
Hearing Officer:	Scott Bernard	Record Open to:	04/21/2025 for appellant; 04/28/2025 for MassHealth

Appearance for Appellant:




Appearance for MassHealth:

Patricia Rogers, Taunton MassHealth
Enrollment Center (MEC)



*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:	Eligibility over age 65; long term care; assets
Decision Date:	6/23/2025	Hearing Date:	03/20/2025
MassHealth's Rep.:	Patricia Rogers, Taunton MEC	Appellant's Rep.:	
Hearing Location:	Taunton MassHealth Enrollment Center (remote)	Aid Pending:	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 January 9, 2025, MassHealth denied the appellant's application for MassHealth Standard benefits for long term care residents because MassHealth determined that the appellant's assets exceed the limit for MassHealth Standard. (see 130 CMR 520.016(A) and Exhibit 1). The appellant filed this appeal in a timely manner on February 18, 2025. (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 MassHealth Standard for long term care residents.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.016, in determining that the appellant's assets exceed the limit for MassHealth Standard for long term care residents.

Summary of Evidence

The appellant was represented telephonically by his authorized representative, who verified his identity. MassHealth was represented telephonically by a worker from the Taunton MEC. The MassHealth representative stated that the appellant submitted a MassHealth application on July 15, 2024, which would allow for an earliest possible MassHealth start date of April 1, 2024. Based on the SC-1 in the record, the appellant was admitted to the nursing facility on [REDACTED] (Exhibit 4, p. 2). The appellant is over age [REDACTED] and single. (Testimony; exhibit 4, p. 2). The MassHealth representative stated that the application was denied for failure to timely submit verifications, but such denial was appealed and the July 15, 2024 application date still controls.

The MassHealth representative testified that the appellant has a bank account with a balance of \$1,342.31 and a life insurance policy with a cash surrender value (CSV) of \$3,882.81 for assets totaling \$5,225.12. The MassHealth representative noted that the asset limit for MassHealth Standard for long term care residents is \$2,000.00 and thus the appellant is not financially eligible for MassHealth due to excess assets.

The appellant's representative stated that she has been in contact with the life insurance company and received documentation from the life insurance company seeking more information from the funeral home. The appellant's representative stated that she forwarded the request to the funeral home that day. The appellant's representative asked for more time to get the information.

The hearing officer left the record open for over 30 days, until April 21, 2025, to give the appellant's representative the opportunity to submit verification that the appellant's assets no longer exceed the countable asset limit. (Exhibit 5). MassHealth was given until April 28, 2025 to respond. (Exhibit 5).

On April 22, 2025, after the record open period expired, a person from the nursing facility (presumably a colleague of the appellant's authorized representative) requested an extension to the record open period. (Exhibit 7). The individual stated that they faxed a request for an extension on the previous Thursday because they were unaware of the email chain set up by the hearing officer with the parties to the hearing. (Exhibit 7). The request to extend the record open period was denied. (Exhibit 7). The hearing officer noted that if the parties were able to resolve the issue between themselves before a decision issued, they should let the hearing officer know. (Exhibit 7). The MassHealth representative forwarded an email from another person at the nursing facility (using the authorized representative's email) asking to submit additional documentation of

the spend down. (Exhibit 8). The MassHealth representative declined to accept any documentation outside of the record open period. (Exhibit 8).

The appellant authorized an individual, not the nursing facility or the nursing facility business office, to be his authorized representative. (Exhibit 2, p. 1). It is up to the nursing facility to get updated authorizations if the authorized representative changes.

Findings of Fact

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

1. The appellant submitted a MassHealth application on July 15, 2024; the application was denied for failure to submit verifications but the denial was appealed and the July 15, 2024, application was reopened and is the controlling application date.
2. The appellant was admitted to the nursing facility on [REDACTED] the appellant is over age [REDACTED] and single.
3. The appellant has a bank account with a balance of \$1,342.31 and a life insurance policy with a CSV of \$3,882.81 for assets totaling \$5,225.12.
4. The record was left open for over 30 days, until April 21, 2025, to give the appellant's representative the opportunity to submit verification that the appellant's assets no longer exceed the countable asset limit; MassHealth was given until April 28, 2025, to respond.
5. Verification of spend down was not submitted during the record open period.
6. On April 22, 2025, after the record open period expired, a colleague of the appellant's authorized representative requested an extension to the record open period.
7. The request was denied.

Analysis and Conclusions of Law

Institutionalized Individuals. The total value of assets owned by an institutionalized single individual or by a member of an institutionalized couple must not exceed \$2,000.

(130 CMR 520.016(A)).

There was no dispute that the appellant has a bank account balance of \$1,342.31 and a life insurance policy with a CSV of \$3,882.81 for assets totaling \$5,225.12. The asset limit for MassHealth Standard for long term care residents is \$2,000.00 and the appellant's assets exceed

this limit by \$3,225.12. Even after a 30-day record open period, the appellant did not submit evidence of a spend down. The appellant has been a resident at the nursing facility for almost 2 years and filed a MassHealth application almost a year ago. The appellant has had more than enough time to get the life insurance policy appropriately signed over to the funeral home. The appeal is denied.

As noted above, BOH has received no authorization from the appellant for an appeal representative other than the one listed on the appeal request at exhibit 2.

Order for MassHealth

The appellant has 30 days from the date of this decision to evidence to MassHealth's satisfaction that assets are reduced to \$2,000.00 or less.

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.

Scott Bernard (Patricia Mullen)
Hearing Officer
Board of Hearings

cc: [REDACTED]

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616