

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2503755
Decision Date:	5/16/2025	Hearing Date:	04/01/2025
Hearing Officer:	Christopher Jones	Record Open to:	04/14/2025

Appearance for Appellant:



Appearance for MassHealth:

Caitlen Pynn – Worcester 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

Appeal Decision:	Denied	Issue:	Long Term Care; Excess Assets
Decision Date:	5/16/2025	Hearing Date:	04/01/2025
MassHealth's Rep.:	Caitlen Pynn	Appellant's Rep.:	[REDACTED]
Hearing Location:	Telephonic	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 March 3, 2025, MassHealth denied the appellant's July 25, 2024 long-term care application because MassHealth determined that the appellant had more countable assets than allowed. (Exhibit 1; 130 CMR 520.003; 520.004.) The appellant's conservator filed this timely appeal on March 6, 2025. (Exhibit 1; 130 CMR 610.015(B).) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

The hearing record was left open until April 14, 2025, to allow the appellant's conservator to submit proof of asset reduction and for MassHealth to review and respond.

Action Taken by MassHealth

MassHealth denied the appellant's application because the conservator account for the appellant held over \$7,000.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.003 and 520.004, in determining that the appellant had countable assets in excess of \$2,000.

Summary of Evidence

MassHealth's representative testified that an application for long-term care services was filed in July 2024. MassHealth issued a notice requesting verifications on August 1, 2024, and denied the application for missing verifications on November 5, 2024. This denial was appealed, and the appeal was withdrawn when MassHealth agreed to continue processing the July 2024 application. Another denial for missing verifications was issued on February 3, 2025, which was also appealed and resolved. The appellant verified a conservator account in the applicant's name that held \$7,818.17, as of January 31, 2025. The appellant also had a personal needs allowance ("PNA") account with \$582.49, as of January 3, 2025.

The appellant's conservator testified that she was going to the bank after the hearing to withdraw a cashier's check to fund funeral arrangements. At the appellant's request, the hearing record was held open until April 7, 2025, for the appellant to submit proof that the assets had been reduced. MassHealth was allowed until April 14, 2025, to review and respond to any submitted documents. On April 8, 2025, and April 14, 2025, MassHealth's representative responded to say nothing had been received by MassHealth. The appellant did not submit anything to the Board of Hearings.

Findings of Fact

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

- 1) An application for long-term care services was filed in July 2024. Required verifications were submitted in January 2025, following multiple denials and appeals. (Testimony by MassHealth's representative; Exhibit 4.)
- 2) The appellant's conservator account held \$7,818.17, as of January 31, 2025. The appellant's PNA account held \$582.49, as of January 3, 2025. (Exhibit 4.)
- 3) The hearing record was left open for the appellant until April 7, 2025, to prove that the appellant's assets had been reduced. Nothing was submitted by the appellant. (Exhibit 5.)

Analysis and Conclusions of Law

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(B).) If the requested verifications are received within 30 days, "the application is considered complete" and MassHealth continues to "determine the coverage type ... for which the applicant is eligible." (130 CMR 516.001(C).) MassHealth may deny an application where the member has failed to provide requested information within 30 days. (130 CMR 516.001(C).)

As part of this application process, MassHealth members must establish financial eligibility. This includes proving their countable assets are below a threshold and those assets were reduced in accordance with state and federal law. (See 130 CMR 520.000.) Individual applicants for long-term care benefits must have less than \$2,000 in assets. (130 CMR 520.003.)

The appellant's countable assets were verified to be over the allowable limit. MassHealth was correct to deny the application on March 3, 2025. The appellant has provided no evidence that their countable assets have changed, despite the hearing record being left open. This 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.

Christopher Jones
Hearing Officer
Board of Hearings

cc: [REDACTED]

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957