

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



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|-------------------------|----------------|------------------------|------------|
| Appeal Decision: | Denied | Appeal Number: | 2503839 |
| Decision Date: | 05/27/2025 | Hearing Date: | 04/07/2025 |
| Hearing Officer: | Marc Tonaszuck | Record Open to: | 05/23/2025 |

Appearance for Appellant:



Appearance for MassHealth:

Jernice Diaz



*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: | Long Term Care - Verifications |
| Decision Date: | 05/27/2025 | Hearing Date: | 04/07/2025 |
| MassHealth's Rep.: | Jernice Diaz | Appellant's Rep.: | Conservator |
| Hearing Location: | Taunton MassHealth Enrollment Center | 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 02/05/2025, MassHealth informed the appellant that it reviewed her application for MassHealth Long Term Care (LTC) benefits determined and that she is not eligible because her assets exceed the program limit for that benefit (130 CMR 515.008; Exhibit 1). On 03/07/2025, a timely appeal was filed on the appellant's behalf (130 CMR 610.015(B); Exhibits 2 and 4). MassHealth agency actions to suspend, reduce, terminate, or restrict a member's assistance are valid grounds for appeal (see 130 CMR 610.032).

A fair hearing took place before the Board of Hearings (Board) on 04/07/2025 (Exhibit 3). The appellant representative requested an extension of time to submit verification that the appellant's assets are below the program limit. Her request was granted, and the record remained open in this matter until 05/09/2025 for her submission and until 05/23/2025 for MassHealth's response (Exhibit 6).

Action Taken by MassHealth

MassHealth denied the appellant's application for Long Term Care (LTC) benefits for assets that exceed the program limit.

Issue

The issue is whether or not the appellant has countable assets that are below the MassHealth program limit for LTC benefits.

Summary of Evidence

The MassHealth representative testified telephonically that the appellant submitted an application for MassHealth long term care (LTC) benefits on 07/11/2024, seeking MassHealth benefits starting on 08/15/2024. As part of the eligibility process, MassHealth sent to the appellant a request for information (VC-1), seeking verifications. As of the date of the notice at issue, the appellant had countable assets of \$282,343.07, which exceed the \$2,000.00 asset limit for MassHealth LTC benefits (Exhibit 5).

The appellant's representative appeared at the fair hearing and testified telephonically. She testified that she needed additional time to provide the missing asset verifications to show that the appellant "has zero left, zero income." Her request was granted, and the record remained open for the appellant's submission until 05/09/2025 and for MassHealth's response until 05/23/2025 (Exhibit 6.)

Neither the appellant nor MassHealth made submissions to the hearing record during their respective record open deadlines. On 05/13/2025, the appellant's conservator wrote to the hearing officer, "in regard to [the appellant], I was not able to obtain the rest of the verifications" (Exhibit 7).

Findings of Fact

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

1. The appellant, an unmarried nursing home resident, applied for MassHealth long term care benefits on 07/11/2024, seeking MassHealth LTC benefits starting on 08/15/2024.
2. As part of the eligibility process, MassHealth does a calculation to determine the appellant's countable assets.
3. The asset limit for MassHealth's LTC benefits is \$2,000.00 for an unmarried applicant.
4. On 02/05/2025, MassHealth denied the appellant's application for benefits because it determined she had assets totaling \$282,343.07 in "cash" (Exhibit 1).

5. The appellant submitted a request for a fair hearing on 03/07/2025.
6. A fair hearing took place before the Board of Hearings on 04/07/2025.
7. As of the date of the fair hearing, the MassHealth representative testified that the excess asset amount had been reduced to \$174,605.79 as a result of a submission made by the appellant's conservator.
8. At the fair hearing, the appellant's conservator requested additional time to provide the missing verifications. Her request was granted, and the record remained open in this matter until 05/09/2025 for the appellant's submission and until 05/23/2025 for MassHealth's' response.
9. Neither party made a submission to the hearing record during their respective record open deadline.
10. On 05/13/2025, the appellant's conservator wrote to the hearing officer, "in regard to [the appellant], I was not able to obtain the rest of the verifications" (Exhibit 7).

Analysis and Conclusions of Law

MassHealth administers and is responsible for the delivery of health-care services to MassHealth members (See 130 CMR 515.002). The regulations governing MassHealth at 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for noninstitutionalized persons aged 65 or older, institutionalized persons of any age, persons who would be institutionalized without community-based services, as defined by Title XIX of the Social Security Act and authorized by M.G.L. c. 118E, and certain Medicare beneficiaries (See 130 CMR 515.002). The appellant in this case is an institutionalized person. Therefore, the regulations at 130 CMR 515.000 through 522.000 apply to this case (See 130 CMR 515.002).

MassHealth regulations at 130 CMR 520.003 address asset limits as follows:

(A) The total value of countable assets owned by or available to individuals applying for or receiving MassHealth Standard, Family Assistance, or Limited may not exceed the following limits:

- (1) for an individual — \$2,000; and
- (2) for a couple living together in the community where there is financial responsibility according to 130 CMR 520.002(A)(1) — \$3,000.

Regulations at 130 CMR 520.007 address countable assets as follows:

Countable assets are all assets that must be included in the determination of eligibility.

Countable assets include assets to which the applicant or member or his or her spouse would be entitled whether or not these assets are actually received when failure to receive such assets results from the action or inaction of the applicant, member, spouse, or person acting on his or her behalf. In determining whether or not failure to receive such assets is reasonably considered to result from such action or inaction, the MassHealth agency considers the specific circumstances involved. The applicant or member and the spouse must verify the total value of countable assets. However, if he or she is applying solely for MassHealth Senior Buy-in for Qualified Medicare Beneficiaries (QMB) as described in 130 CMR 519.010: MassHealth Senior Buy-in (for Qualified Medicare Beneficiaries (QMB)) or MassHealth Buy-in for Specified Low Income Medicare Beneficiaries (SLMB) or MassHealth Buy-in for Qualifying Individuals (QI) both as described in 130 CMR 519.011: MassHealth Buy-in, verification is required only upon request by the MassHealth agency. 130 CMR 520.007 also contains the verification requirements for certain assets. The assets that the MassHealth agency considers include, but are not limited to, the following...

The appellant, a nursing home resident, applied for MassHealth LTC benefits on 07/11/2024, seeking a benefit start date of 08/15/2024. As part of the eligibility process, MassHealth received from the appellant information about her finances. According to documentation, at the time of the asset assessment, the appellant had assets totaling \$282,343.07, which exceeds the \$2,000.00 asset limit. As a result, MassHealth denied the appellant's application for LTC benefits on 02/05/2025.

At the fair hearing, appellant was represented by her conservator, who testified that the appellant has no assets and no income. She asked for an opportunity to provide verification that the appellant's assets are below the \$2,000.00 limit. Her request was granted, but no submission was made to the hearing record. On 05/13/2025, the appellant's conservator wrote to the hearing officer, "in regard to [the appellant], I was not able to obtain the rest of the verifications" (Exhibit 8).

The appellant's conservator requested time to provide verifications that the appellant was eligible for LTC benefits; however, she failed to provide all the necessary documentation within the record open period. Accordingly, MassHealth's denial is supported by the regulations and relevant facts in the hearing record. This appeal is therefore 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings



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