

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2506609
<b>Decision Date:</b>	7/1/2025	<b>Hearing Date:</b>	05/28/2025
<b>Hearing Officer:</b>	Christine Therrien		

**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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	LTC – Disqualifying Transfers
<b>Decision Date:</b>	7/1/2025	<b>Hearing Date:</b>	05/28/2025
<b>MassHealth’s Rep.:</b>	Trish Rogers	<b>Appellant’s Rep.:</b>	
<b>Hearing Location:</b>	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 4/11/25, MassHealth approved the appellant's application for MassHealth Long Term Care benefits beginning 1/24/24, with a patient-paid amount (PPA) of \$1,394.20 a month beginning on 1/1/25. (130 CMR 520.026 and Exhibit 1). The appellant filed this appeal in a timely manner, challenging the coverage start date on 1/24/25. (130 CMR 610.015(B) and Exhibit 2). Determination of a start date is valid grounds for appeal (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth determined a MassHealth start date of 1/24/24.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 516.006, in determining that the appellant’s LTC benefits start date is 1/24/24.

### Summary of Evidence

The MassHealth representative testified that the appellant is [REDACTED] years old and was admitted to a long-term care (LTC) facility on [REDACTED] 23. The MassHealth representative testified that on 7/12/24, MassHealth received a LTC application with a requested coverage start date of 5/23/24. The MassHealth representative testified that the notice on appeal was issued because of disqualifying transfers during the look-back period, resulting in a period of ineligibility from 5/23/24 through 1/23/25. The MassHealth representative testified that MassHealth found that on 5/2/22, the appellant deposited \$106,310.55 into her Money Market account, which were the proceeds from the sale of a home in a trust. (Exhibit 5, p. 9). The MassHealth representative testified that between 5/2022 and 7/2023, all the proceeds from the sale had been transferred from the appellant's Money Market account to her checking account, and then from the checking account via the Cash App to the appellant's daughter and the daughter's boyfriend in numerous small transactions. In addition, a \$4,000 check was made out to the appellant's daughter's boyfriend on 7/25/22. (Exhibit 5).<sup>1</sup> The appellant's February 2025 Money Market statement shows a balance of \$527.63, and the appellant's March 2025 checking account statement shows a balance of \$170.73. (Exhibit 5). The MassHealth representative testified that MassHealth views these as resource transfers for less than fair market value because the funds did not go toward the appellant's care, warranting the calculation of a period of ineligibility.

The MassHealth representative testified that MassHealth calculates the period of ineligibility by dividing the disqualifying transfer amount by the average cost to a person paying privately for nursing facility services in the Commonwealth; \$106,310.55 (transfer amount) divided by \$441.00 (average daily nursing home rate) = 241.06, or 242 days. The MassHealth representative testified that the resulting coverage start date is 1/24/25.

The appellant's representative testified that the appellant's daughter took charge of the appellant's accounts, and the daughter took all the money. The appellant's representative testified that the appellant does not know what the Cash App is, and she does not know where the money went. The appellant's representative testified that the appellant filed a fraud report with the bank, but the bank would not investigate because the appellant gave her daughter account access. The appellant's representative testified that the appellant will not file a police report.

A review of the bank statements shows daily Cash App transfers, large cash withdrawals, and debit card purchases from the appellant's checking account. The ATM locations and debit card purchases vary from sites in eastern Massachusetts to southern New Hampshire for gas stations, dining out, parking, ride shares, cell phone bills, RMV transactions, mini-marts, and grocery stores. The hundreds of Cash App transfers are to the appellant's daughter and another person.

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<sup>1</sup> Cash App is a digital wallet that allows users to send, receive, or save money and access a debit card. Cash App transactions list the recipient's name on the bank statements.

## Findings of Fact

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

1. The appellant is [REDACTED] years old and was admitted to a LTC facility on [REDACTED] 23.
2. On 7/12/24, MassHealth received an LTC application with a requested coverage start date of 5/23/24.
3. The notice on appeal was issued because of disqualifying transfers during the look-back period, resulting in a period of ineligibility from 5/23/24 through 1/23/25.
4. MassHealth found that on 5/2/22, the appellant deposited \$106,310.55 into her Money Market account, which were the proceeds from the sale of a home in a trust.
5. Between 5/2022 and 7/2023, all the proceeds from the sale were withdrawn from the appellant's account.
6. Money was transferred from the appellant's Money Market account to her checking account. The money was then transferred via the Cash App to the appellant's daughter and the daughter's boyfriend in numerous small transactions; in addition, a \$4,000 check was made out to the appellant's daughter's boyfriend on 7/25/22.
7. A review of the bank statements shows daily Cash App transfers, large cash withdrawals, and debit card purchases from the appellant's checking account.
8. The ATM locations and debit card purchases vary from sites in eastern Massachusetts to southern New Hampshire for gas stations, dining out, parking, ride shares, cell phone bills, utility bills, RMV transactions, mini-marts, and grocery stores.
9. The hundreds of Cash App transfers are to the appellant's daughter and another person.
10. MassHealth views these as resource transfers for less than fair market value because the money did not go toward the appellant's care and calculates the period of ineligibility by dividing the disqualifying transfer amount by the average cost to a person paying privately for nursing facility services in the Commonwealth; \$106,310.55 (transfer amount) divided by \$441.00 (average daily nursing home rate) = 241.06, or 242 days.
11. The resulting coverage start date is 1/24/25.

12. The appellant filed a fraud report with the bank, but the bank would not investigate because the appellant gave her daughter account access.
13. The appellant will not file a police report to report the funds stolen.

## Analysis and Conclusions of Law

To qualify for MassHealth LTC coverage, the assets of the institutionalized applicant cannot exceed \$2,000.00 (130 CMR 520.016(A)). If resources above the program limit are available to the applicant, then 130 CMR 520.018(B) and 130 CMR 520.019 govern whether those assets are disqualifying transfers.

130 CMR 520.018(B) states:

The MassHealth agency will deny payment for nursing facility services to an otherwise eligible nursing-facility resident ... who transfers or whose spouse transfers countable resources for less than fair-market value during or after the period of time referred to as the look-back period.

The relevant parts of 130 CMR 520.019(B) and (C) ("Transfer of Resources Occurring on or after August 11, 1993") state:

(B) Look-Back Period. Transfers of resources are subject to a look-back period, beginning on the first date the individual is both a nursing-facility resident and has applied for or is receiving MassHealth Standard. This period generally extends back in time for 36 months. For transfers of resources occurring on or after February 8, 2006, the period extends back in time for 60 months...

(C) Disqualifying Transfer of Resources. The MassHealth agency considers any transfer during the appropriate look-back period by the nursing-facility resident or spouse of a resource, or interest in a resource, owned by or available to the nursing-facility resident or the spouse (including the home or former home of the nursing-facility resident or the spouse) for less than fair-market value a disqualifying transfer unless listed as permissible in 130 CMR 520.019(D), identified in 130 CMR 520.019(F), or exempted in 130 CMR 520.019(J). The MassHealth agency may consider as a disqualifying transfer any action taken to avoid receiving a resource to which the nursing-facility resident or spouse is or would be entitled if such action had not been taken...

130 CMR 520.019(D)(1) through (5) do not apply as the transfer was neither for the of benefit the appellant's spouse, nor a permanently disabled child, nor placed in a trust for the benefit of a permanently disabled appellant in a nursing facility or a permanently disabled person under the age of 65. Further, 130 CMR 520.019(D)(6) does not apply as this transfer does not include a

home, and subsection (7) does not apply as this transfer was not used to fund a burial account for the appellant or her spouse.<sup>2</sup> This transfer was also not exempt under 130 CMR 520.019(J) since it was not the proceeds from a home equity loan or reverse mortgage. Therefore, the only regulation that applies is 130 CMR 520.019(F), which states the following:

(F) Determination of Intent. In addition to the permissible transfers described in 130 CMR 520.019(D), the MassHealth agency will not impose a period of ineligibility for transferring resources at less than fair-market value if the nursing-facility resident or the spouse demonstrates to the MassHealth agency's satisfaction that

- (1) the resources were transferred exclusively for a purpose other than to qualify for MassHealth; or
- (2) the nursing-facility resident or spouse intended to dispose of the resource at either fair-market value or for other valuable consideration. Valuable consideration is a tangible benefit equal to at least the fair-market value of the transferred resource.

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<sup>2</sup> 130 CMR 520.019(D) Permissible Transfers. The MassHealth agency considers the following transfers permissible. Transfers of resources made for the sole benefit of a particular person must be in accordance with federal law. (1) The resources were transferred to the spouse of the nursing-facility resident or to another for the sole benefit of the spouse. A nursing facility resident who has been determined eligible for MassHealth agency payment of nursing facility services and who has received an asset assessment from the MassHealth agency must make any necessary transfers within 90 days after the date of the notice of approval for MassHealth in accordance with 130 CMR 520.016(B)(3). (2) The resources were transferred from the spouse of the nursing facility resident to another for the sole benefit of the spouse. (3) The resources were transferred to the nursing facility resident's permanently and totally disabled or blind child or to a trust, a pooled trust, or a special-needs trust created for the sole benefit of such child. (4) The resources were transferred to a trust, a special-needs trust, or a pooled trust created for the sole benefit of a permanently and totally disabled person who was younger than 65 years old at the time the trust was created or funded. (5) Effective until sixty days after the end of the maintenance of effort and continuous eligibility provisions of Section 6008 of the Families First Coronavirus Response Act (Public Law No. 116-127), the resources were transferred to a pooled trust created for the sole benefit of the permanently and totally disabled nursing-facility resident. Effective sixty days after the end of the maintenance of effort and continuous eligibility provisions of Section 6008 of the Families First Coronavirus Response Act (Public Law No. 116-127), this transfer is no longer permissible. (6) The nursing facility resident transferred the home he or she used as the principal residence at the time of transfer and the title to the home to one of the following persons: (a) the spouse; (b) the nursing facility resident's child who is younger than 21 years old, or who is blind or permanently and totally disabled; (c) the nursing facility resident's sibling who has a legal interest in the nursing facility resident's home and was living in the nursing facility resident's home for at least one year immediately before the date of the nursing-facility resident's admission to the nursing facility; or (d) the nursing facility resident's child (other than the child described in 130 CMR 520.019(D)(6)(b)) who was living in the nursing facility resident's home for at least two years immediately before the date of the nursing facility resident's admission to the institution, and who, as determined by the MassHealth agency, provided care to the nursing facility resident that permitted him or her to live at home rather than in a nursing facility. (7) The resources were transferred to a separately identifiable burial account, burial arrangement, or a similar device for the nursing facility resident or the spouse in accordance with 130 CMR 520.008(F).

The transfer of \$106,310.55 to the appellant's daughter and the daughter's boyfriend falls within the look-back period described in 130 CMR 520.019(B) and (C). While the appellant claims not to be aware that her daughter and the daughter's boyfriend took the funds from the appellant's bank account, the appellant did not file a police report to report the funds stolen. Thus, there is no evidence that the transfer of assets was intended to be for valuable consideration, nor was the appellant able to demonstrate that the transfer of funds was exclusively for the purpose other than to qualify for MassHealth. Under 130 CMR 520.019(F), the transfer of funds to the appellant's daughter and the daughter's boyfriend must be considered a disqualifying transfer.

If the MassHealth agency has determined that a disqualifying transfer of resources has occurred, the MassHealth agency will calculate a period of ineligibility under 130 CMR 520.019(G)(1).

The relevant part of 130 CMR 520.019(G)(2) ("Determination of the Period of Ineligibility in Special Circumstances") states:

(i) Multiple transfers occurring on or after February 8, 2006. The MassHealth agency adds the value of all the resources transferred during the look-back period and divides the total by the average monthly cost to a private patient receiving long-term-care services in the Commonwealth of Massachusetts at the time of application, as determined by the MassHealth agency. The result will be a single period of ineligibility beginning on the first day of the month in which the first transfer was made or the date on which the individual is otherwise eligible for long-term-care services, whichever is later.

Based on the above, the appellant transferred \$106,310.55 for less than fair market value, and MassHealth correctly determined an ineligibility period of 242 days (\$106,310.55/\$441.00), from 5/23/24 through 1/23/25. 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.

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Christine Therrien  
Hearing Officer  
Board of Hearings

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