Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied Appeal Number: 2506717

Decision Date: 06/13/2025 **Hearing Date:** 05/28/2025

Hearing Officer: Marc Tonaszuck Record Open to: 06/11/2025

Appearance for Appellant:

Appearance for MassHealth:

Jamie Lapa



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: Community Eligibility

Over 65 –Verifications

Decision Date: 06/13/2025 **Hearing Date:** 05/28/2025

MassHealth's Rep.: Jamie Lapa Appellant's Rep.:

Hearing Location: Springfield Aid Pending: No

 ${\bf Mass Health}$

Enrollment Center

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 04/09/2025, MassHealth informed the appellant that it reviewed his application for MassHealth benefits and determined and that he is not eligible because he failed to submit requested verifications (130 CMR 515.008; Exhibit 1). On 04/24/2025, a timely appeal was filed on the appellant's behalf (130 CMR 610.015(B); Exhibit 2). 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 05/28/2025 (Exhibit 3). The appellant requested an extension of time to submit the missing verifications. His request was granted, and the record remained open in this matter until 06/04/2025 for his submission and until 06/11/2025 for MassHealth's response (Exhibit 5).

The appellant made no submission to the hearing record during the record open period. MassHealth also made no submission during the record open period.

Action Taken by MassHealth

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MassHealth denied the appellant's application for Long Term Care (LTC) benefits for failure to submit requested verifications.

Issue

The issue is whether or not the requested verifications were submitted to MassHealth.

Summary of Evidence

The appellant requested a virtual hearing (Exhibit 2). His request was granted and prior to the date of the fair hearing, the Board of Hearings sent to the parties a Teams link where the parties would appear virtually. On the date of the hearing, the hearing officer and the MassHealth representative waited for the appellant to log onto the Teams meeting. After a while, the hearing officer telephoned the appellant. The appellant answered the telephone call and requested that the hearing go forward telephonically. His request was granted, and the hearing took place telephonically.

The MassHealth representative testified that the appellant is over 65 years of age. The appellant submitted an application for MassHealth community benefits. It was denied for failure to provide verification of financial information. Subsequent to the denial, the application was assigned to a long-term care representative, who appeared at the fair hearing. She testified that she received a status change (SC-1) form from a long-term facility seeking nursing home level of care benefits. The MassHealth worker preserved the original application date of 3/4/25. She testified that all of the verifications listed on the 04/09/2025 MassHealth denial notice remain outstanding. The are the following:

- 1) Proof of income from private pension send copy of your monthly gross pension stub and show where is deposited:
- 2) Automobile: do you still own this vehicle? If so, please provide current vehicle registration and excise tax bill. If not, please provide documentation or signed affidavit stating what happened to this vehicle.
- please send copies of your statements beginning in April 2023 to present. Verify all withdrawals of \$1,500.00 or more and source of all deposits, except Social Security. If you no longer have this account, send closing statement and statements three months prior to closure.
- 4) Checking account. Please send copy of your statements beginning in April 2023 to present. Verify all withdrawals of \$1,500.00 or more and source of all deposits, except Social Security. If you no longer have this account, send closing statement and statements three months prior to closure, except social security.

MassHealth requested the above information in March 2025 and the verifications were due to be received by MassHealth by 04/08/2025. They were not received by the deadline and MassHealth denied the appellant's application.

The appellant appeared at the fair hearing, and he testified telephonically that he is not interested in applying for LTC benefits. He stated he is only concerned about the community benefits. He requested that the LTC application be withdrawn. The appellant acknowledged that the documents requested by MassHealth were not provided. The appellant requested an extension of a week to provide the missing verifications to MassHealth. His request was granted, and the record remained open in this matter until 06/04/2025 for his submission and until 06/11/2025 for MassHealth's response (Exhibit 4).

The appellant did not make any submission to the hearing record during the record open period.

Findings of Fact

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

- 1. The appellant applied for MassHealth community benefits on 03/04/2025. He is over the age of 65 (Testimony).
- 2. In March 2025, MassHealth sent to the appellant a request for information (VC-1), seeking information necessary to make an eligibility determination. The verifications were due by 04/08/2025 (Testimony).
- 3. On 04/08/2025, MassHealth denied the appellant's application for benefits because it did not receive the requested verifications.
- 4. The appellant submitted a request for a fair hearing on 04/24/2025.
- 5. A fair hearing took place before the Board of Hearings on 05/28/2025.
- 6. As of the date of the fair hearing, the appellant acknowledges he did not provide the following verifications:
 - Proof of income from private pension send copy of your monthly gross pension stub and show where is deposited:
 - Automobile: do you still own this vehicle? If so, please provide current vehicle registration and excise tax bill. If not, please provide documentation or signed affidavit stating what happened to this vehicle.
 - please send copies of your statements beginning in

April 2023 to present. Verify all withdrawals of \$1,500.00 or more and source of all deposits, except Social Security. If you no longer have this account, send closing statement and statements three months prior to closure.

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- 7. At the fair hearing, the appellant requested additional time to provide the missing verifications. His request was granted, and the record remained open in this matter until 06/04/2025 for the appellant's submission and until 06/11/2025 for MassHealth's' response.
- 8. The appellant made no submission to the hearing record during the record open period.
- 9. MassHealth made no submission to the hearing record during the record open period.

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 515.008 address responsibilities of applicants and members as follows:

(A) Responsibility to Cooperate. The applicant or member must cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all the rules and regulations of MassHealth, including recovery and obtaining or maintaining other health insurance.

Regulations at 130 CMR 516.001(B) address corroborative information as follows:

The MassHealth agency requests all corroborative information necessary to determine eligibility.

- (1) The MassHealth agency sends the applicant written notification requesting the corroborative information generally within five days of receipt of the application.
- (2) The notice advises the applicant that the requested information must be received within 30 days of the date of the request, and of the consequences of failure to provide the information.

This appeal involves a denial of MassHealth LTC benefits based on the appellant's failure to provide requested verifications within the regulatory time frame. The application was submitted on 03/04/2025, seeking community benefits. In March 2025, MassHealth sent a request for verifications to the appellant, requesting certain documents and information to establish eligibility

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for benefits. The submission was due by 04/08/2025. The appellant failed to provide the requested information, and on 04/08/2025, MassHealth denied the appellant's application for failure to provide verifications. A timely appeal was filed on behalf of the appellant and a fair hearing was held before the Board of Hearings.

At the fair hearing, the appellant acknowledged he did not provide the verifications. He requested additional time to provide the missing verifications. His request was granted; however, the appellant provided nothing during the record open period.

The requested verifications were not received by the Board. As a result, pursuant to the above regulations, MassHealth's denial of the appellant's application is supported by the facts in the 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: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

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