

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2508072
Decision Date:	11/21/2025	Hearing Date:	06/23/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	09/10/2025

Appearance for Appellant:




Appearance for MassHealth:

Krystina Trout



*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 – Verifications
Decision Date:	11/21/2025	Hearing Date:	06/23/2025
MassHealth’s Rep.:	Krystina Trout	Appellant’s Rep.:	
Hearing Location:	Springfield 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 03/20/2025, MassHealth informed the appellant that it reviewed her application for MassHealth Long Term Care (LTC) benefits and determined and that she is not eligible because she failed to submit requested verifications (130 CMR 515.008; Exhibit 1). On 05/23/2025, a timely appeal was filed by the appellant (130 CMR 610.015(B); Exhibits 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 06/23/2025 (Exhibit 3). The appellant representative requested an extension of time to submit the missing verifications. Her request was granted, and the record remained open in this matter until 07/25/2025 for the appellant’s submission and until 08/15/2025 for MassHealth’s submission (Exhibit 6). On 07/23/2025, the appellant’s representative submitted a request for a second extension of the hearing record. Her request was granted, and the record remained open in this matter until 08/27/2025 for the appellant’s submission and until 09/10/2025 for MassHealth’s submission.

(Exhibit 7).

Action Taken by MassHealth

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 MassHealth representative testified telephonically that the appellant submitted an application for MassHealth long term care (LTC) benefits on 11/20/2024, seeking MassHealth benefits on 01/24/2025. On 02/11/2025, a request for verifications was sent by MassHealth, requesting various financial information to process the appellant's application for benefits. The appellant's response was due by 03/13/2025. On 03/20/2025, some of the verifications remained outstanding and MassHealth denied the application.

As of the date of the fair hearing, the missing verifications were the following:

SC1, clinical screening, PNA/private pay from facility

[REDACTED]

Send statements 2/1/20-12/23/22. For transactions \$1000 or more, send copies of cleared checks, explanation, bills. Verify source of all deposits.

[REDACTED]

[REDACTED]

Send statements 02/01/20-08/10/23, 06/13/24-date coverage needed.
Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits into account.
-If account opened in Nov 2022 with the \$15K loan from [REDACTED] verify from bank that account opened at this time.

[REDACTED]

Our asset verification system located this unreported account. Send statements 02/1/20 to date coverage needed. Verify transactions \$1000 or more via cleared checks, explanation of funds spent, bills.

Verify all deposits into account.

[REDACTED]

-Verify deposit \$3500 2/2024 warranting payback.

-For \$9500 withdrawal 1/24 previously inquired about, we received self attested statement it was to purchase [REDACTED] Provide proof of this, such as bill of sale. Also verify why car was purchased for \$9500 if fair market value provided is \$4000.

-Based on info recently received, this account opened 11/26/22 with \$15000. Verify source. Please clarify if this is actually the account opened with \$15000 loan from [REDACTED]

-Verify source of transfers into account 1/28/25, 2/4/25

Provide verification of current value and verify amount still owed by financing carry on trailer. Info provided was for a 2002 load and our info indicates this is a 2023 owned by you. Please verify.

Updated info shows a \$4500 deposit from [REDACTED] was deposited into this account, which was not on file. Provide statements from opening to present. Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits.

(Exhibit 4.)

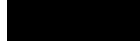
The appellant was represented at the fair hearing by her attorney and a paralegal who works for the attorney. Counsel requested that the record remain open so that they could provide the missing verifications to MassHealth without losing the application date of 11/20/2024. The request was granted, and the record remained open in this matter until 07/25/2025 for the appellant's submission and until 08/15/2025 for MassHealth's submission (Exhibit 6). On 07/23/2025, the appellant's representative submitted a request for a second extension of the hearing record. Her request was granted, and the record remained open in this matter until 08/27/2025 for the appellant's submission and until 09/10/2025 for MassHealth's submission (Exhibit 7).

On 08/26/2025, the appellant's representatives made a 20-page submission to the hearing record (Exhibit 8). A copy was provided to the MassHealth representative. On 09/11/2025, MassHealth responded to the appellant's submission. The MassHealth representative wrote that the following verifications were not received during the record open period:

- [REDACTED]
- [REDACTED]
 - Verify deposit source \$95801 01/31/20, \$12026 6/2/21.
 - Verify disposition \$60000 check 326 2/5/20 (without verification, may be reviewed for transfer)
 - Verify deposit source \$1900 04/22, \$1900 5/22, \$1000 twice on 6/7/22.

-For one of the \$1900 deposits, the slip states April rental payment. Please verify if you were or are receiving rental income.

(Updated info via email exchange with the law office and the Community Spouse indicate it was rent. MassHealth asked for self-attestation as the email response is not sufficient. Additionally, MassHealth needs to verify that they are no longer receiving rental income. Again, this can be included in the same self-attestation regarding the source of deposits).

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Our asset verification system located this unreported account. Send statements 02/1/20 to date coverage needed. Verify transactions \$1000 or more via cleared checks, explanation of funds spent, bills. Verify all deposits into account.
(This is the account indicated that the applicant is POA on the account. MassHealth needs to know both who the account owner, and the beneficiary of the account is. The notice from the bank does not outline this. Additionally, if ultimately the account is non-countable for the appellant, we would still need to know whose money went into the account and if any of it was hers during the lookback period).

(Exhibit 9.)

Findings of Fact

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

1. The appellant, a nursing home resident, applied for MassHealth long term care benefits on 11/20/2024.
2. The appellant is requesting MassHealth benefits starting on 01/24/2025.
3. On 02/11/2025, MassHealth sent to the appellant a request for information (VC-1), seeking information necessary to make an eligibility determination.
4. On 03/20/2025, MassHealth denied the appellant's application for benefits because it did not receive the requested verifications.
5. The appellant submitted a request for a fair hearing on 05/23/2025.
6. A fair hearing took place before the Board of Hearings on 06/23/2025.
7. At the fair hearing, the MassHealth representative testified that the following verifications were not received by MassHealth:

- SC1, clinical screening, PNA/private pay from facility
- [REDACTED]
Send statements 2/1/20-12/23/22. For transactions \$1000 or more, send copies of cleared checks, explanation, bills. Verify source of all deposits.
-Verify \$8860 deposit 1/18/23.
- [REDACTED]
Send statements 02/01/20-08/10/23, 06/13/24-date coverage needed.
Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits into account.
-If account opened in Nov 2022 with the \$15K loan from USAA, verify from bank that account opened at this time.
- [REDACTED]
Our asset verification system located this unreported account. Send statements 02/1/20 to date coverage needed. Verify transactions \$1000 or more via cleared checks, explanation of funds spent, bills.
Verify all deposits into account.
- [REDACTED]:
-Verify deposit \$3500 2/2024 warranting payback.
[REDACTED]
-For \$9500 withdrawal 1/24 previously inquired about, we received self attested statement it was to purchase [REDACTED] Provide proof of this, such as bill of sale. Also verify why car was purchased for \$9500 if fair market value provided is \$4000.
- [REDACTED]
-Based on info recently received, this account opened 11/26/22 with \$15000. Verify source. Please clarify if this is actually the account opened with \$15000 loan from [REDACTED]
-Verify source of transfers into account 1/28/25, 2/4/25
- 2023 Carry on trailer:
Provide verification of current value and verify amount still owed by financing carry on trailer. Info provided was for a 2002 load and our info indicates this is a 2023 owned by you. Please verify.
- [REDACTED]
Updated info shows a \$4500 deposit from [REDACTED] was deposited into this account, which was not on file. Provide statements from opening to present. Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits.

(Exhibit 4.)

8. At the fair hearing, the appellant representative requested an extension of time to submit the missing verifications. Her request was granted, and the record remained open in this matter until 07/25/2025 for the appellant's submission and until 08/15/2025 for MassHealth's submission.
9. On 07/23/2025, the appellant's representative submitted a request for a second extension of the hearing record. Her request was granted, and the record remained open in this matter until 08/27/2025 for the appellant's submission and until 09/10/2025 for MassHealth's submission.
10. The appellant's representatives made one submission of a 20-page document with attachments during the record open period (Exhibit 8).
11. On 09/11/2025, the MassHealth representative informed the hearing officer that the following verifications remained outstanding:
 - [REDACTED]: Verify source of deposits \$8860 01/18/23
 - [REDACTED]
 - Verify deposit source \$95801 01/31/20, \$12026 6/2/21.
 - Verify disposition \$60000 [REDACTED] 2/5/20 (without verification, may be reviewed for transfer)
 - Verify deposit source \$1900 04/22, \$1900 5/22, \$1000 twice on 6/7/22.
 - For one of the \$1900 deposits, the slip states April rental payment. Please verify if you were or are receiving rental income.
 - (Updated info via email exchange with the law office and the Community Spouse indicate it was rent. MassHealth asked for self-attestation as the email response is not sufficient. Additionally, MassHealth needs to verify that they are no longer receiving rental income. Again, this can be included in the same self-attestation regarding the source of deposits).
 - [REDACTED]
 - Our asset verification system located this unreported account. Send statements 02/1/20 to date coverage needed. Verify transactions \$1000 or more via cleared checks, explanation of funds spent, bills. Verify all deposits into account.
 - (This is the account indicated that the applicant is POA on the account. MassHealth needs to know both who the account owner, and the beneficiary of the account is. The notice from the bank does not outline this. Additionally, if ultimately the account is non-countable for the appellant, we would still need to know whose money went into the account and if any of it was hers during the lookback 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 11/20/2025. MassHealth sent a request for verifications to the appellant, requesting certain documents and information to establish eligibility for LTC benefits. The appellant failed to provide all of the requested information, and on 03/20/2025, 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 MassHealth representative testified that the following verifications remained outstanding:

- SC1, clinical screening, PNA/private pay from facility
- [REDACTED]
Send statements 2/1/20-12/23/22. For transactions \$1000 or more, send copies of cleared checks, explanation, bills. Verify source of all deposits.
-Verify \$8860 deposit 1/18/23.
- [REDACTED]
Send statements 02/01/20-08/10/23, 06/13/24-date coverage needed.

Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits into account.

-If account opened in Nov 2022 with the \$15K loan from USAA, verify from bank that account opened at this time.

- [REDACTED]:
Our asset verification system located this unreported account. Send statements 02/1/20 to date coverage needed. Verify transactions \$1000 or more via cleared checks, explanation of funds spent, bills.
Verify all deposits into account.
- [REDACTED]
-Verify deposit \$3500 2/2024 warranting payback.
[REDACTED]
-For \$9500 withdrawal 1/24 previously inquired about, we received self attested statement it was to purchase [REDACTED] Provide proof of this, such as bill of sale. Also verify why car was purchased for \$9500 if fair market value provided is \$4000.
- [REDACTED]
-Based on info recently received, this account opened 11/26/22 with \$15000. Verify source. Please clarify if this is actually the account opened with \$15000 loan from [REDACTED]
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- 2023 Carry on trailer:
Provide verification of current value and verify amount still owed by financing carry on trailer. Info provided was for a 2002 load and our info indicates this is a 2023 owned by you. Please verify.
- [REDACTED]
Updated info shows a \$4500 deposit from [REDACTED] was deposited into this account, which was not on file. Provide statements from opening to present. Verify transactions \$1000+ by cleared checks, explanation, bills. Verify all deposits.

The record remained open until 08/27/2025 for the appellant's submission. During the record open period the appellant's representative made one submission of a 20-page document with attachments (Exhibit 8). Upon review of the appellant's submission, the MassHealth representative informed the hearing officer that the following verifications had not been provided:

- [REDACTED]: Verify source of deposits \$8860 01/18/23
- [REDACTED]
-Verify deposit source \$95801 01/31/20, \$12026 6/2/21.

-Verify disposition \$60000 check 326 2/5/20 (without verification, may be reviewed for transfer)

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Because the appellant did not provide the requested verifications prior to or during the hearing process, MassHealth's decision to deny the application is supported by the regulations and the 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

[Redacted]

[Redacted]

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 243 Cottage Street, Springfield, MA 01104