

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	DENEID	<b>Appeal Number:</b>	2509050
<b>Decision Date:</b>	9/10/2025	<b>Hearing Date:</b>	07/15/2025
<b>Hearing Officer:</b>	Kenneth Brodzinski	<b>Record Open to:</b>	08/29/2025

**Appearance for Appellant:**



**Appearance for MassHealth:**

Jessica Adamiec



*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>	Missing Verifications
<b>Decision Date:</b>	9/10/2025	<b>Hearing Date:</b>	07/15/2025
<b>MassHealth's Rep.:</b>	Jessica Ademiec	<b>Appellant's Rep.:</b>	[REDACTED]
<b>Hearing Location:</b>	Taunton MEC		

## Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

## Jurisdiction

Through notice dated May 21, 2025, MassHealth denied Appellant's MassHealth Long Term Care application due to her failure to provide MassHealth with requested documentation needed to determine her financial eligibility (Exhibit A). Appellant filed for this appeal in a timely manner on June 13, 2025 (see 130 CMR 610.015(B) and Exhibit A). Denial of MassHealth benefits constitutes valid grounds for appeal (see 130 CMR 610.032).

## Action Taken by MassHealth

MassHealth denied Appellant's MassHealth Long Term Care application due to her failure to provide MassHealth with requested documentation needed to determine her financial eligibility.

## Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it denied Appellant's MassHealth Long Term Care application due to her failure to provide MassHealth with requested documentation needed to determine her financial eligibility.

## Summary of Evidence

The MassHealth representative testified that Appellant filed an application for MassHealth long term care benefits on April 1, 2025. The application was denied on May 22, 2025 after all requested verifications were not filed by the specified due date. The MassHealth representative reviewed each of the outstanding verifications.

Appellant's representative works in the business office at the nursing facility where Appellant resides. Appellant's representative did not dispute that all requested verifications had not been filed by the specified due date. Appellant's representative testified that she understood what verifications were still missing and requested two weeks to obtain and file them. Appellant was granted 16 days.

Prior to Appellant's record-close date, Appellant requested an additional three weeks. The request was granted for an additional 22 days. Appellant made a post-hearing filing within the record-open period, but also requested a second extension of the record-open period (Exhibit C). Appellant explained that the facility needed to file a petition with the Court to appoint a conservator for Appellant because of difficulties Appellant was encountering trying to obtain verifications relative to a pension (Id). In response, MassHealth reported that verifications other than the pension remained outstanding including clarification of deposits being made into a [REDACTED] account and verifications relative to a [REDACTED] account that funds were being transferred into (Exhibit D). The MassHealth representative also stated that the agency could not make an eligibility determination without the missing verifications (Id). The hearing officer denied Appellant's request to extend the record-open period for a second time based on the fact that the need to appoint a conservator to obtain the pension verifications did not excuse the other requested verifications that were still missing (Exhibit E).

## Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant filed an application for MassHealth long term care benefits on April 1, 2025.
2. MassHealth denied the application on May 22, 2025 after all requested verifications were not filed by the specified due date.
3. At hearing, all of the missing verifications were identified by MassHealth.
4. At hearing, Appellant's representative understood what verifications were still missing and requested and was granted time to obtain and file them.

5. Prior to Appellant's record-close date, Appellant requested and was granted additional time to make her post-hearing filing.
6. By the final record-close date, Appellant made her filing.
7. Appellant's post-hearing filing did not include requested verifications concerning Appellant's pension, and accounts held at [REDACTED] and [REDACTED].
8. An eligibility determination cannot be made without the remaining missing verifications.

## Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). On this record, Appellant has failed to meet her burden.

Regulation 130 CMR 516.003 in pertinent part states:

*Verification of Eligibility Factors* The MassHealth agency requires verification of eligibility factors including income, assets, residency, citizenship, immigration status, and identity as described in 130 CMR 517.000: MassHealth: Universal Eligibility Requirements, 130 CMR 518.000: MassHealth: Citizenship and Immigration, and 130 CMR 520.000: MassHealth: Financial Eligibility.

*(A) Information Matches.* The MassHealth agency initiates information matches with federal and state agencies and other informational services, as described at 130 CMR 516.004, when an application is received in order to verify eligibility.

*(B) Electronic Data Sources.* If electronic data sources are unable to verify or are not reasonably compatible with the attested information, additional documentation will be required from the individual.

*(C) Request for Information Notice.* If additional documentation is required, including corroborative information as described at 130 CMR 516.001(B), a Request for Information Notice will be sent to the applicant listing all requested verifications and the deadline for submission of the requested verifications.

*(D) Time Standards.* The following time standards apply to the verification of eligibility factors.

*(1) The applicant or member has 30 days from the receipt of the Request for Information Notice to provide all requested verifications.*

*(2) If the applicant or member fails to provide verification of information within 30 days of receipt of the MassHealth agency's request, MassHealth coverage is denied or terminated.*  
*(3) A new application is required if a reapplication is not received within 30 days of the date of denial.*

Masshealth issued a written verification request and a denial notice when verifications were not filed by the due date which comports with the above-cited regulations.

Despite being granted the requested record-open period and a further extension, Appellant has still failed to file all of the requested verifications. The asserted need to obtain a court-appointed conservator may have excused the delay of obtaining the pension verifications warranting a second extension, but it does not excuse Appellant's ongoing failure to file the verifications pertaining to the [REDACTED] and [REDACTED] accounts.

On this record, there is no basis in law or fact to overturn MassHealth's denial of May 21, 2025. The 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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Kenneth Brodzinski  
Hearing Officer  
Board of Hearings

cc:



MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616