

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2511604
<b>Decision Date:</b>	10/31/2025	<b>Hearing Date:</b>	09/09/2025
<b>Hearing Officer:</b>	Thomas Doyle	<b>Record Open to:</b>	N/A

**Appearance for Appellant:**



**Appearance for MassHealth:**

Elizabeth Kittiphane, Quincy MEC



*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>	Long Term Care – Disqualifying Transfer
<b>Decision Date:</b>	10/31/2025	<b>Hearing Date:</b>	09/09/2025
<b>MassHealth’s Rep.:</b>	Elizabeth Kittiphane	<b>Appellant’s Rep.:</b>	██████████
<b>Hearing Location:</b>	Remote (phone)	<b>Aid Pending:</b>	No

## 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 September 2, 2025,<sup>1</sup> MassHealth approved appellant's long term care application and decided she qualified for MassHealth Standard benefits to cover her care in a nursing facility beginning on November 17, 2024 and calculated a period of ineligibility from October 8, 2024 to November 16, 2024.<sup>2</sup> (Testimony; Ex. 5, p. 25). Appellant filed this appeal in a timely manner on August 1, 2025. (130 CMR 610.015(B); Ex. 2). Imposition of a coverage date is a MassHealth action and is valid grounds for appeal. (130 CMR 610.032(3)).

## Action Taken by MassHealth

MassHealth approved appellant's long term care application and decided she qualified for MassHealth Standard benefits to cover her care in a nursing facility with coverage beginning November 17, 2024 due to disqualifying transfers.

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<sup>1</sup> A prior notice dated July 28, 2025 was issued to appellant determining a longer period of ineligibility but MassHealth received verifications on August 21, 2025 that enabled appellant to cure \$61,000. Appellant appealed the July 28, 2025 notice and after appellant made the partial cure, MassHealth issued the updated September 2, 2025 notice.

<sup>2</sup> The worker testified that the September 2, 2025 notice does not contain the period of ineligibility. She stated she tried to input the dates but the system would not allow it.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.019, in determining that appellant had disqualifying transfers resulting in an ineligibility period from October 8, 2024 to November 16, 2024.

## Summary of Evidence

The appeal representative and the MassHealth worker (worker) appeared by phone and were sworn. The evidence shows the following: Appellant is a female in her [REDACTED] (Ex. 6). MassHealth received an application for long term care services from appellant on November 21, 2024. (Ex. 5, p. 3). MassHealth notified appellant she needed to provide verifications for payments from a [REDACTED] account that showed \$14,363.96 being paid towards rent and \$3,000 towards a car, totaling \$17,363.96. (Testimony; Ex. 5, pp. 16, 18, 22, 24). There were three dates of payment memorialized as rent, August 3 and 16, 2022 and December 29, 2022. (Testimony; Ex. 5, pp. 16, 18-19, 21). Appellant wrote a check for \$3,000 for a car on January 31, 2023, that was cashed on February 8, 2023. (Ex. 5, pp. 22, 24). The worker stated for MassHealth to verify the amount paid towards rent, MassHealth would need a copy of the lease or a rental agreement. Regarding the car, the worker stated MassHealth would need a copy of the registration or an excise tax bill or some kind of receipt or invoice that shows the money went towards appellant's car. (Testimony). The worker testified that MassHealth did receive a letter, dated August 21, 2025, regarding the car, but the letter was insufficient to accept as a verification. (Testimony; Ex. 5, p. 5). The letter is signed by appellant's power of attorney and states appellant was moved from [REDACTED] in October 2023 because appellant was not receiving proper care. The car payment was to [REDACTED] for a car appellant previously had in [REDACTED]. The power of attorney writes that due to appellant's health, she can no longer provide answers to questions such as "rent." (Ex. 5, p. 5). I confirmed with the worker that pursuant to the regulations, a person is entitled to keep one automobile, but the worker stated that the car was never reported as an asset by appellant and MassHealth was seeking a verification of why the \$3,000 payment was made to [REDACTED] (Testimony). The worker stated appellant did not submit the requested verifications, therefore, MassHealth imposed a period of ineligibility of 39 days from October 8, 2024 to November 16, 2024. (Testimony). These transactions occurred during the five-year look back period.

The appeal representative stated appellant's family is not involved in appellant's care. She stated appellant oversaw her own finances while living in [REDACTED] and that appellant's power of attorney did not get involved with appellant's finances until late 2023. (Testimony). The appeal representative stated the power of attorney tried to reach the people the checks were made payable to but was unsuccessful. She stated the power of attorney did not know [REDACTED] the person appellant drafted a check to and wrote "car payment" in the memorandum line. (Testimony; Ex. 5, p. 24). The appeal representative stated she looked in [REDACTED] for any information

that appellant owned a car in that state and found nothing. She stated she did not look in either [REDACTED] because the power of attorney was told it was a car in [REDACTED]. The appeal representative testified they knew nothing about the car, including if it was sold or bought by appellant. (Testimony). The appeal representative stated she did not know why the “rent” checks were written for such large amounts of money. Regarding the letter from appellant’s power of attorney, the power of attorney writes “I don’t know who she paid rent to.” (Ex. 5, p. 5).

## Findings of Fact

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

1. Appellant is a female in her [REDACTED]. MassHealth received an application for long term care services from appellant on November 21, 2024. (Ex. 5, p. 3).
2. MassHealth approved appellant’s application on September 2, 2025 with a coverage date beginning on November 17, 2024. (Testimony; Ex. 5).
3. Within the lookback period, in August and December 2022, appellant paid \$14,363.96 for rent and in February of 2023 appellant paid \$3,000 for a car. (Testimony; Ex. 5, pp. 16, 18-19, 22, 24).
4. MassHealth notified appellant it needed verifications for payments from a [REDACTED] account that showed \$14,363.96 being paid towards rent and \$3,000 towards a car. (Ex. 5, pp. 1, 16, 18, 22, 24).
5. The appeal representative testified they knew nothing about the car, including whether it was sold or bought by appellant. (Testimony).
6. Appellant’s power of attorney wrote in a letter, “I don’t know who she paid rent to.” (Ex. 5, p. 5).
5. Appellant did not submit the requested verifications, therefore, MassHealth imposed a period of ineligibility of 39 days from October 8, 2024 to November 16, 2024. (Testimony).
6. MassHealth deemed the checks to be disqualifying transfers by appellant, and imposed a penalty period of 39 days, calculated by dividing the sum of the transfers, \$17,363.96, by the average daily cost of nursing-facility services in the Commonwealth of Massachusetts at the time of application, or \$441 per day. (Testimony; Ex. 5, p. 1; [Program financial guidelines for certain MassHealth applicants and members | Mass.gov](#)).

## Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007). Moreover, "[p]roof by a preponderance of the evidence is the standard generally applicable to administrative proceedings." Craven v. State Ethics Comm'n, 390 Mass. 191, 200 (1983).

An applicant for MassHealth benefits has the burden to prove his or her eligibility, including that a transfer of resources was legitimate, not gratuitous, or for less than fair market value within the "look-back" period. (130 CMR 515.001, 520.007; 520.019; and MGL Ch. 118E, § 20). If an applicant or member has transferred resources for less than fair-market value during the look-back period, MassHealth long-term-care benefits may not be paid until a period of ineligibility has been imposed and expires. (See 42 USC §1396p(c)(1)(A); MGL Ch. 118E, § 28.) The look-back period is 60 months, or 5 years. (130 CMR 520.019(B)).

The federal law is reflected in MassHealth regulations 130 CMR 520.018 and 520.019, which provide that a disqualifying transfer exists where an applicant transfers an interest during the appropriate look-back period for less than fair-market value. "A disqualifying transfer may include any action taken that would result in making a formerly available asset no longer available," unless the transfer is "listed as permissible in 130 CMR 520.019(D), identified in 130 CMR 520.019(F), or exempted in 130 CMR 520.019([K])." (130 CMR 520.019(C).) Permissible transfers are made to benefit a community spouse or a disabled person. Exempted transfers are cured in some manner after the fact.

In addition, the State Medicaid Manual (HCFA Transmittal letter 64) at Section 3258.10 sets forth the following guidance to address transfers exclusively for a purpose other than qualifying for Medicaid:

2. Transfers Exclusively for a Purpose Other Than to Qualify for Medicaid. --Require the individual to establish, to your satisfaction, that the asset was transferred for a purpose other than to qualify for Medicaid. Verbal assurances that the individual was not considering Medicaid when the asset was disposed of are not sufficient. Rather, convincing evidence must be presented as to the specific purpose for which the asset was transferred.

See also, Gauthier v. Director of the Office of Medicaid, 80 Mass. App. Ct. 777, 785-786 (2011) (the Court held, *inter alia*, that hearing officer correctly affirmed MassHealth's decision that applicant made a disqualifying transfer of resources during the application lookback period; the applicant failed to show that the transfer was made exclusively for a purpose other than to qualify for MassHealth, because applicant did not present convincing evidence as the specific purpose for which the asset was transferred, as is required under federal law).

At issue in this case is MassHealth's determination that the appellant transferred resources for less than fair market value during the regulatory look-back period. Specifically, MassHealth found that the appellant wrote a check for \$3,000 to ██████ in January 2023 for a car. Appellant wrote three checks for rent, two in August 2022 and one in December 2022. These three rent checks totaled \$14,363.96. Appellant's power of attorney wrote to MassHealth "I don't know who she paid rent to." The appeal representative testified she knew nothing about the car, including whether it was sold or bought by appellant. In sum, appellant's representatives have no knowledge where appellant's money went or if appellant received fair market value for her money.

Based on the record before me, it is clear appellant did not receive fair market value for the money paid for the car and the rent. I also find, based on the record, the transfers in question were not permissible under 130 CMR 520.019 (D)(1) through (7). The transfers do not meet any of the conditions listed in that portion of the regulation.

In accordance with the above, MassHealth's decision that appellant made disqualifying transfers of resources was correct. 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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Thomas Doyle  
Hearing Officer  
Board of Hearings

cc: [REDACTED]

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171