

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2513575
Decision Date:	1/21/2026	Hearing Date:	10/01/2025
Hearing Officer:	Amy B. Kullar, Esq.	Record Open to:	10/31/2025; 11/07/2025; 01/02/2026; 01/12/2026

Appearances for Appellant:




Appearance for MassHealth:

Riana Malik, Tewksbury MassHealth
Enrollment Center



*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:	1/21/2026	Hearing Date:	10/01/2025
MassHealth's Rep.:	Riana Malik	Appellant's Reps.:	
Hearing Location:	Tewksbury MassHealth Enrollment Center Room 2 (Telephone)	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 July 21, 2025, MassHealth denied the appellant's application for MassHealth long-term care (LTC) benefits because MassHealth determined that the appellant did not submit the necessary documentation required to make an eligibility decision within the required timeframe. *See* 130 CMR 515.008; Exhibit 1. The appellant filed this appeal in a timely manner, having submitted a request for fair hearing on September 16, 2025. *See* 130 CMR 610.015(B) and Exhibit 2. Denial of assistance is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied the appellant's application for long-term care benefits.

Issue

The appeal issue is whether MassHealth was within its discretion to deny the appellant's application for long-term care benefits for failure to submit the necessary eligibility verifications.

Summary of Evidence

The appellant is a single adult who is over the age of [REDACTED] and resides in a long-term care facility. She was represented at hearing by legal counsel appearing on behalf of the appellant's court-appointed conservator, who verified the appellant's identity. MassHealth was represented by a worker from the Tewksbury MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the testimony and evidence presented at hearing.

The MassHealth representative testified to the following: the appellant was admitted to her long-term care facility in [REDACTED]. A long-term care application, seeking coverage beginning on October 1, 2024, was received by MassHealth on January 31, 2025, and a request for additional information request was sent to the appellant on February 19, 2025. A denial notice was then issued to the appellant, for missing verifications, on March 27, 2025. On July 11, 2025, the original application date was preserved through appeal. A final denial notice, for missing verifications, was issued to the appellant on July 21, 2025; this is the notice on appeal. MassHealth is unable to make a final determination as to the appellant's eligibility for LTC MassHealth because her application is still incomplete. As of the date of hearing, there are seven (7) verifications outstanding from the July 21, 2025 denial notice:

- **Proof of Other Income from [REDACTED]** Bank statements show incoming wires from [REDACTED]. Verify source of wire transfers. If [Appellant] had beneficial interest in any accounts in the last 60 months then: Provide statements from 1/1/2022 to current with deposit sources and verification of disbursements.
- **Proof of Other Income from DISBURSEMENTS** Provide supporting documentation for all disbursements (withdrawals, Checks, [REDACTED] direct payments, etc) of \$1000 or more. This can include copies of invoices paid, proof of payments made on [Appellant]'s behalf that are being reimbursed, receipts, care contracts, etc.
- **Proof of Other Income from OTHER ACCOUNTS** Transfers were seen to other Checking accounts [REDACTED]. Verify account owners. If [Appellant] had beneficial interest in these accounts in the last 60 months then: Provide statements from 1/1/2022
- **Proof of Bank Account Information from Savings Account [REDACTED]** [REDACTED] For all financial accounts provide statements from 01/01/2022 to current. Provide proof of source of all deposits. Explain and verify any disbursements of \$1000 or more including recurring [REDACTED] payments and wire

made on 7/28/2023. PLEASE NOTE: Statements were received from 12/21/2022 to 5/20/2025 and do not need to be resent.

- **Proof of Bank Account Information from Checking Account [REDACTED]**
[REDACTED] For all financial accounts provide statements from 01/01/2022 to current. Provide proof of source of all deposits including wires from [Bank One] Explain and verify any disbursements of \$1000 or more including [REDACTED] to [Appellant's son], transfers to other accounts [REDACTED] direct payments to businesses, [REDACTED] to [REDACTED] and cash withdrawals. PLEASE NOTE: Statements were received from 1/19/2023 to 5/16/2025 and do not need to be resent.¹
- **Proof of Bank Account Information from Checking Account [Bank Three]**
XXXXXX UNK NEW REQUEST- This account is known to MassHealth, timeframe extended: For all financial accounts provide statements from 01/01/2022 to current. Provide proof of source of all deposits. Explain and verify any disbursements of \$1000 or more. For closed accounts, also provide the closing statement and verify how funds were disbursed.
- **Proof of Bank Account Information from Savings Account [Bank Three]** [REDACTED]
[REDACTED] NEW REQUEST- This account is known to MassHealth, timeframe extended: For all financial accounts provide statements from 01/01/2022 to current. Provide proof of source of all deposits. Explain and verify any disbursements of \$1000 or more. For closed accounts, also provide the closing statement and verify how funds were disbursed.

Testimony and Exhibit 5.

The MassHealth representative testified that MassHealth received an additional packet of verifications from the appellant on September 25, 2025; this submission is 137 pages. MassHealth is requesting additional time to review and respond to this packet. Testimony.

The appellant's counsel did not dispute the MassHealth representative's testimony regarding the timeline of the appellant's application for LTC MassHealth. Prior to the hearing, the appellant's counsel emailed the Hearing Officer and the MassHealth representative a pre-hearing submission consisting of a summary of the case and a Microsoft Excel spreadsheet. The email states:

On behalf of the Appellant, I am submitting this update to assist with the ongoing financial oversight of [Appellant], whose assets and personal affairs are now subject to court-appointed Conservatorship. As part of our review, we have compiled detailed records of activity from two of [Appellant]'s accounts with [Bank Two], ending in [REDACTED]

This financial activity reflects extensive involvement by [Appellant]'s adult son,

¹ Initials are used to protect confidentiality.

[Appellant's Son], who previously managed her finances as her Power of Attorney. Numerous transactions raise concerns, including large [REDACTED] transfers to [Appellant's Son] and his family members, unexplained wire activity, cash withdrawals, and frequent internal transfers between accounts. These transactions occurred during a period of increasing concern about [Appellant]'s capacity and financial vulnerability. A categorized transaction summary is attached for review.

[Appellant's Son] only recently resurfaced and provided the following written statement last Friday: 'Until recently, I acted in the capacity of executor and fiduciary on behalf of my mother, [Appellant]At present, I respectfully request a period of approximately three to four weeks in order to complete financial arrangements currently underway. Within that timeframe, I will ensure that any funds under review are restored so that no further concerns remain. This letter should not be construed as an admission of liability or wrongdoing. Rather, it reflects my commitment to working collaboratively and in good faith to bring this matter to a prompt resolution.'

I respectfully request that the record remain open in light of [Appellant's Son]'s admission and representation, made just this past Friday. While we appreciate his stated willingness to cooperate, the transaction history suggests significant self-dealing and poor financial stewardship. His reappearance only after the establishment of the conservatorship further supports these concerns.

I will continue to collect documentation and follow up on any verifications requested by Board of Hearings or the MassHealth caseworker.

Exhibit 6.

The appellant's counsel stated that her office has conducted a forensic investigation into the appellant's finances, and that investigation revealed that the appellant's son, who had served as the appellant's attorney-in-fact prior to the appointment of the appellant's conservator in early 2025, had likely misused the appellant's funds. As she reported in her prehearing submission, the largest development in this case that she is able to report today is the reappearance of the appellant's son, and he is claiming to be represented by counsel. The appellant's counsel and the nursing home have been trying to locate the appellant's son since November 2024, so that he could assist with the appellant's MassHealth application. Testimony.

The appellant's counsel continued her testimony. She referenced her prehearing submission and testified that her office compiled over 300 suspicious transactions involving the appellant's bank accounts and her son. She then stated, "To complicate that...there's also an [REDACTED] bank account overseas, and there are funds coming in, going out from that [REDACTED] bank account. [Appellant's Son] is the only person that can provide the bank statements from [REDACTED]"

because they do not recognize out-of-country conservatorship decrees and orders.” Testimony. She explained that her office has been working with the [REDACTED] bank’s legal department for the past four or five months, but these discussions are not getting anywhere with obtaining access to the appellant’s the [REDACTED] bank account. The legal department has said that they will not accept a United States subpoena. Testimony.

After questioning by the Hearing Officer about the legal methods that the appellant’s counsel is utilizing to either gain access to the Australian bank account or require the appellant’s son to comply with the appellant’s MassHealth application process, the appellant’s counsel stated that her office also represents the appellant’s nursing facility, and the nursing facility is considering initiating civil proceedings against Appellant’s Son to obtain the outstanding bank statements and verifications. At this time, it is still “unclear” if criminal or civil proceedings are more appropriate against the appellant’s son, but they will be attempting civil recovery, and she hopes that litigation will be filed by the end of the current week, pending discussions with the appellant’s son’s counsel. Testimony.

The hearing then concluded and it was agreed that the record would be held open one week for MassHealth to review and respond to the appellant’s September 25, 2025 submission². MassHealth would provide an updated list of the outstanding verifications, and it was agreed that the appellant would have at least three weeks from the date MassHealth’s response is received to provide their response. Exhibit 7. The MassHealth representative emailed her record open response on October 7, 2025:

I have reviewed the 137-pg submission received by MassHealth on 9/25/2025 and am writing with an update. The packet contained verifications for [Bank Two] accounts [REDACTED] only, and the following description is a revised request for those two accounts only. All other verifications listed on the denial notice (and included in the 10/1/2025 record open email) remain outstanding. I tried to organize in a way that is clear, but please just let me know if further clarification is needed.

- **[Bank Two]** [REDACTED]
 - **Received:** Statements from 12/21/2021-1/18/2023.
 - **Still requested:**
 - Statements 5/17/2025 to current (including proof of source of all deposits and verification of any disbursements of \$1,000 or more)
 - Proof of source of all deposits including wires from [Bank One] and [Bank Three], and explanation and verification of any

² Both parties agreed that the outstanding verifications at hearing were the 7 items the MassHealth representative testified to; these items are listed in the 7/21/2025 denial notice, and the list of items therein was included as a part of the Record Open form. Testimony. See also Exhibits 1 & 7.

disbursements of \$1,000.00 or more

- **Newly requested based on received statements:**
 - 7/2022 wires to [Bank Four] with notes suggesting applicant has account(s) with [Bank Four]. MassHealth is now requesting [Bank Four] statements from 1/1/2022-current for all accounts in the lookback (including proof of source of all deposits and verification of any disbursements of \$1,000 or more)
- **[Bank Two]** [REDACTED]
- **Received:** Statements from 12/23/2021-12/20/2022
- **Still requested:**
 - Statements 5/21/2025 to current (including proof of source of all deposits and verification of any disbursements of \$1,000 or more)
 - Proof of source of all deposits, and explanation and verification of any disbursements of \$1,000.00 or more (Check images were included with statements but payee was not legible)
- **Newly requested based on received statements:**
 - 8/2022 and 9/2022 payments to [Credit Card Company] indicate payments for 2022 Ford escape, insurance and excise tax. MassHealth is looking to verify this vehicle. If applicant's vehicle, provide current registration or title and current verification of vehicle's fair market value

Exhibit 8.

On the same day, the Hearing Officer responded to this email, confirming that the record would remain open until October 31, 2025 for appellant submissions. Exhibit 9. On October 30, 2025, a colleague of the appellant's counsel sent three emails, with PDF attachments, to the MassHealth Representative and the Hearing Officer, including a cover letter that requested an extension of time to November 7, 2025, for the appellant's counsel to obtain additional outstanding bank statements. Exhibit 10. On October 30, 2025, the Hearing Officer responded to this email and granted the extension of time for appellant submissions. Exhibit 11. On November 6, 2025, via the Board of Hearings fax submission line, the appellant submitted the remaining outstanding verifications. The Hearing Officer forwarded this submission to all parties. Exhibits 12, 13. On December 1, 2025, the MassHealth representative responded to the appellant's record open submission:

I have reviewed the verifications submitted for the Record Open. MassHealth did receive the requested statements, however, there were deposits/disbursements on the statements that have raised additional questions. At this time, the following is still outstanding:

- [REDACTED] Current verification of gross income and any deductions

from [REDACTED]

- **Federal Reserve:** Current verification of gross income and any deductions from Federal Reserve (deposits into [REDACTED])
- **Conservator Account:** Identify account and provide statements from inception to current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more
 - **[Bank Three]** [REDACTED] Statements 7/29/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more
 - **[Bank Three]** [REDACTED] Statements 9/26/2025-current with proof of source of deposits including those on 12/20/2021 (\$679,197.99) and 10/2/2023 (\$9,627.29) and verification of recurring disbursements and of any disbursements of \$1,000 or more including those to [REDACTED]
 - **PNA:** Statements 7/1/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more
 - **[Bank Four]** [REDACTED] Statements from 9/30/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more including 2/27/2025 marked as LOC Payoff as per S.D.³

Exhibit 14.

On December 2, 2025, the appellant's counsel emailed the MassHealth representative and the Hearing Officer, requesting an extension of time for appellant submissions:

I am writing to respectfully request an extension of the current record open period based on MassHealth's request for the Appellant to produce a substantial volume of new documentation not previously requested.

The new items include verification of multiple income sources, detailed bank records from several previously unidentified accounts and documentation of substantial international wire transfers. In addition, there is pending litigation against the Appellant's son, who is alleged to have misused and transferred significant funds during the lookback period. That litigation is active and directly impacts our ability to obtain and verify some of the information now being requested by MassHealth.

Given the scope of these newly raised issues, the timing of the request and the ongoing legal proceedings, we respectfully request that the record remain open until at least **January 9, 2026**, to allow sufficient time to gather responsive

³ Initials are used to protect confidentiality.

documentation.

Exhibit 15.

On December 2, 2025, the Hearing Officer extended the record open period for appellant submissions to January 2, 2026; MassHealth would provide a written response to the appellant's submissions by January 12, 2026. Exhibit 16. On the morning of January 14, 2026, the MassHealth representative emailed the Hearing Officer and the appellant's counsel:

I apologize for my delayed response to this record open. MassHealth received a timely submission from the appellant on 1/2/2026. However, the packet was not uploaded into the MassHealth system until 1/7/2026, so I was unaware of the submission. I have it now and am in the process of reviewing it. I should be able to provide a complete response by the end of business today.

Exhibit 17.

On the afternoon of January 14, 2026, the MassHealth representative emailed the appellant's counsel and the Hearing Officer her response to the appellant's record open submissions:

After reviewing the documents submitted during the record open, MassHealth has not received sufficient documentation to determine eligibility. For clarity in reviewing, I have copied the list of outstanding verifications sent on 12/2/2025 and added a second bullet point to each item with MassHealth's written response. I have attached a copy of the 1/2/2026 submission for your reference.

- [REDACTED]: Current verification of gross income and any deductions from CtrLink Pension (deposits into [Bank Three] [REDACTED])
 - **RO Response:** MassHealth will verify this as past income due to applicant as a resident of Australia. The general information provided verifies only Australian residents are entitled to this benefit.
- **Federal Reserve:** Current verification of gross income and any deductions from Federal Reserve (deposits into [Bank Three] [REDACTED])
 - **RO Response:** MassHealth will verify these deposits. Upon review, it appears to be the applicant's SSA income that was re-routed to [Bank Two] [REDACTED] in February of 2022.
- **Conservator Account:** Identify account and provide statements from inception to current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more
 - **RO Response:** The 1/2/2026 appellant submission states they are not aware of a Conservator Account for [Appellant], however, the 10/30/2025 submission included a bank check for the closing

balance of [Bank Two] ██████ made payable to "Conservatorship Account of [Appellant]". The 10/30/2025 submission did include a letter from [Appellant's Conservator] directing the facility to apply these funds towards [Appellant]'s balance, however, the Check provided is not made payable to the facility. I have attached copies of these verifications for your reference. For this reason, MassHealth still considers this an outstanding verification.

- **[Bank Three]** ██████ Statements 7/29/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more

- **RO Response:** The July 2025 statement does not verify the account is closed. The statement does include a "closing balance", however, each monthly statement received uses this language for the balance at the end of the statement period. MassHealth requires verification from the bank confirming the account close date and where the balance was disbursed at close. If the account is open but inactive, MassHealth still requires current statements. For these reasons, MassHealth still considers this an outstanding verification.

- **[Bank Three]** ██████: Statements 9/26/2025-current with proof of source of deposits including those on 12/20/2021 (\$679,197.99) and 10/2/2023 (\$9,627.29) and verification of recurring disbursements and of any disbursements of \$1,000 or more including those to Riverbend

- **RO Response:** MassHealth will verify recurring disbursements to ██████ F. Despite no account activity from 9/2024-9/2025, MassHealth still requires current statements for open accounts. MassHealth did not receive sufficient verification of the deposits listed above. For these reasons, MassHealth still considers this an outstanding verification.

- **PNA:** Statements 7/1/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more

- **RO Response:** MassHealth can verify the applicant's PNA account, verifications were provided in the 1/2/2026 submission.

- **[Bank Four]** ██████ Statements from 9/30/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more including 2/27/2025 marked as LOC Payoff as per S. D.

- **RO Response:** MassHealth received the requested bank statements. MassHealth did not receive any verification for the disbursement on 2/27/2025 marked as LOC Payoff as per S. D. For this reason, MassHealth still considers this an outstanding verification.

MassHealth respectfully requests that the hearing officer issue a decision.

Exhibit 18.

Findings of Fact

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

1. The appellant is a single adult who is over the age of [REDACTED] and resides in a long-term care facility. Testimony, Exhibit 5.
2. On January 31, 2025, an application for MassHealth Long-Term care benefits was filed on the appellant's behalf, seeking a coverage start-date of October 1, 2024. Testimony, Exhibit 5.
3. On July 21, 2025, the appellant's application was denied for failure to provide verification information after a request for information by MassHealth. Exhibits 1 & 5; Testimony.
4. The appellant filed a timely appeal on September 16, 2025. Exhibit 2.
5. Following the appeal hearing, the appellant's counsel requested that the record be kept open until October 31, 2025 for the submission of missing verifications, which the Hearing Officer granted. Testimony, Exhibit 7.
6. During the record open period, the appellant's counsel requested an extension of the open record period until November 7, 2025, for the submission of missing verifications, which the Hearing Officer granted. Exhibits 10, 11.
7. During the record open period, the appellant's counsel requested an extension of the open record period until January 9, 2026, for the submission of missing verifications. The Hearing Officer granted the appellant an extension of the open record period until January 2, 2026, for the submission of missing verifications. Exhibits 15, 16.
8. As of the issuance of this decision, the following verifications are still outstanding:
 - **Conservator Account:** Identify account and provide statements from inception to current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more;
 - **[Bank Three] [REDACTED]:** Statements 7/29/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more
 - **[Bank Three] [REDACTED]:** Statements 9/26/2025-current with proof of source of deposits including those on 12/20/2021 (\$679,197.99) and 10/2/2023 (\$9,627.29) and

verification of recurring disbursements and of any disbursements of \$1,000 or more including those to [REDACTED]

- **[Bank Four]** [REDACTED] Statements from 9/30/2025-current with proof of source of deposits and verification of recurring disbursements and of any disbursements of \$1,000 or more including 2/27/2025 marked as LOC Payoff as per S.D.

Analysis and Conclusions of Law

An applicant for any MassHealth benefits is required to “cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility...” 130 CMR 515.008(A). After receiving an application for benefits, MassHealth proceeds 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.

130 CMR 516.001(B). “If the requested information...is received [by MassHealth] within 30 days of the date of the request, the application is considered complete...If such information is not received within 30 days of the request, MassHealth benefit may be denied.” 130 CMR 516.001(C).

MassHealth applicants must meet certain financial requirements to be eligible for long-term care services. Specifically, there is a \$2000 asset limit for an individual and a \$3000 asset limit for certain couples living together in the community. *See* 130 CMR 520.003(A).

In this case, despite ample extra time following the appeal hearing, the appellant has not provided MassHealth with critical financial information it needs to make an eligibility determination for long-term care benefits. As a result, MassHealth was within its discretion to deny the appellant’s application, which has been open since January 31, 2025.

For the foregoing reasons, the appeal is hereby 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.

Amy B. Kullar, Esq.
Hearing Officer
Board of Hearings

[REDACTED]

[REDACTED]

cc: MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957