

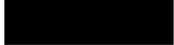
**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2514429
<b>Decision Date:</b>	11/5/2025	<b>Hearing Date:</b>	10/30/2025
<b>Hearing Officer:</b>	Susan Burgess-Cox		

**Appearance for Appellant:**



**Appearance for MassHealth:**

Stephanie Desousa



*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 - Verifications
<b>Decision Date:</b>	11/5/2025	<b>Hearing Date:</b>	10/30/2025
<b>MassHealth's Rep.:</b>	Stephanie Desousa	<b>Appellant's Rep.:</b>	[REDACTED]
<b>Hearing Location:</b>	All Parties Appeared by Telephone	<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 a notice dated August 8, 2025 MassHealth denied the appellant's application for long-term care benefits because the appellant did not give MassHealth the information it needs to decide eligibility within the required time frame. (130 CMR 515.008; 130 CMR 516.001; Exhibit 1). On October 3, 2025, an individual named as the appellant's authorized representative filed a timely appeal. (130 CMR 610.015; 130 CMR 610.016; Exhibit 2).

Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits because the appellant did not give MassHealth the information it needs to decide eligibility within the required time frame. (130 CMR 515.008; 130 CMR 516.001).

### Issue

Whether MassHealth was correct in denying the appellant's application for long-term care services because she did not give MassHealth the information it needs to decide eligibility within the required timeframe. (130 CMR 515.008; 130 CMR 516.001).

## **Summary of Evidence**

All parties appeared by telephone. Documents submitted by MassHealth are incorporated into the hearing record as Exhibit 5. The appellant's representative provided documents that are incorporated into the hearing record as Exhibit 6,

MassHealth received an application for long-term care in June 2025. The MassHealth representative noted that they did not have an SC-1 form indicating a date for which the appellant would be seeking coverage. The MassHealth representative noted that coverage could go back to a date in March 2025. Upon receipt of the application, MassHealth issued a notice requesting information necessary to determine eligibility. As of August 8, 2025, MassHealth had not received the information necessary to determine eligibility. Therefore, the agency issued the notice on appeal.

At hearing, the appellant's representative stated that they sent some of the information to MassHealth prior to the hearing. The appellant's representative sent the first page of a facsimile which includes a copy of the first page of the application and a cover sheet indicating that the facsimile contained 11 pages. The MassHealth representative responded that the agency did not receive this information from the appellant's representative. At hearing, the appellant's representative testified that this submission did not include all of the information necessary to determine eligibility and they did not have that information as of the date of the hearing. The appellant was discharged from the facility prior to the hearing. The request for hearing states that the reason for the appeal is to preserve the application date. The appellant's representative asked the Board of Hearings to keep the record open to allow the agency to continue to process the application on appeal. This request was denied as all of the parties present at the hearing agreed that the decision on appeal was correct as of the date of the hearing and the appellant's representative offered testimony acknowledging that they did not have all of the information necessary to determine eligibility.

The MassHealth representative also noted that she spoke with the appellant's representative prior to the hearing to see if the issue on appeal could be resolved; the representative did not provide any additional information to the MassHealth representative. The MassHealth representative testified that the appellant's representative did not appear to be overly concerned that she would not have evidence of providing the information necessary to determine eligibility at the hearing.

## **Findings of Fact**

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

1. MassHealth received an application for long-term care in June 2025.
2. In June 2025, MassHealth issued a notice seeking information necessary to determine eligibility.
3. MassHealth did not receive all the information necessary to determine eligibility by the due date.
4. On August 8, 2025, MassHealth denied coverage for failure to provide information necessary to determine eligibility.
5. As of the hearing date, MassHealth had not received information necessary to determine eligibility.

## **Analysis and Conclusions of Law**

MassHealth administers and is responsible for the delivery of health-care services to MassHealth members. (130 CMR 515.002). The regulations governing MassHealth at 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for noninstitutionalized persons aged [REDACTED] institutionalized persons of any age, persons who would be institutionalized without community-based services, as defined by Title XIX of the Social Security Act and authorized by M.G.L. c. 118E, and certain Medicare beneficiaries. (130 CMR 515.002). The appellant in this case is an institutionalized person. Therefore, the regulations at 130 CMR 515.000 through 522.000 apply to this case. (130 CMR 515.002).

Pursuant to 130 CMR 515.008, applicants or members must cooperate with MassHealth in providing information to establish and maintain eligibility and must comply with all of the rules and regulations governing MassHealth, including recovery. MassHealth may request additional information and documentation, if necessary, to determine eligibility. (130 CMR 516.001).

To obtain the necessary information and documentation, MassHealth sends the applicant written notification requesting verifications to corroborate information necessary to determine eligibility, generally within five days of the receipt of the application. (130 CMR 516.001(B)). The notice must advise the applicant that the requested verifications 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, with the exceptions of verification of immigration status, is not provided within 30 days of the date of the request, MassHealth benefits may be denied. (130 CMR 516.001(C)).

The appellant's representative did not dispute the fact that the appellant received proper notices requesting information. (130 CMR 516.001). The appellant's representative acknowledged at the hearing that the appellant did not provide all of the information necessary to determine eligibility.

The fair hearing regulations at 130 CMR 610.000 set out the process for requesting and participating in a fair hearing that allows dissatisfied applicants, members, or nursing facility residents to have administrative review of certain actions or inactions on the part of the MassHealth agency. (130 CMR 610.001(A)(1)). The fair hearing process is an administrative, adjudicatory proceeding where dissatisfied applicants, members, and nursing facility residents upon written request, obtain an administrative determination of the appropriateness of:

- (1) certain actions or inactions by the MassHealth agency;
- (2) certain actions or inactions by a managed care contractor;
- (3) actions to recover payment for benefits to which the member was not entitled at the time the benefit was received;
- (4) alleged coercive or otherwise improper conduct by a MassHealth agency employee;
- (5) a notice of intent or failure to give notice of intent by a nursing facility to discharge, transfer, or readmit a resident; or
- (6) a PASRR determination. (130 CMR 610.012(A)).

The hearing process is designed to secure and protect the interests of both the appellant and, as appropriate, the MassHealth agency or its personnel and to ensure equitable treatment for all involved. (130 CMR 610.012(B)). The definition of the hearing process does not indicate that it is a means to extend the application process for members or representatives as was sought at this hearing. To ensure equitable treatment, both parties should be prepared to offer testimony and evidence at the hearing. (130 CMR 610.012(B)). The representative present at hearing did not provide sufficient testimony or evidence to challenge the decision on appeal.

A hearing decision is based upon evidence, testimony, materials, and legal rules, presented at the hearing, including the MassHealth agency's interpretation of its rules, policies, and regulations. (130 CMR 610.082(A)). The hearing decision must be based upon a preponderance of evidence. (130 CMR 610.082(A)). The appellant's representative did not meet this legal standard in acknowledging that they did not have the information necessary for MassHealth to determine eligibility as of the day of the hearing.

MassHealth acted within its discretion to deny the appellant's application for long-term care coverage. (130 CMR 516.001(C)). The decision made by MassHealth was correct.

This 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.

---

Susan Burgess-Cox  
Hearing Officer  
Board of Hearings

cc: [REDACTED]

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