

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2515572
Decision Date:	02/05/2026	Hearing Date:	11/13/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	01/09/2026

Appearance for Appellant:




Appearance for MassHealth:

Riana Malik



*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:	02/05/2026	Hearing Date:	11/13/2025
MassHealth’s Rep.:	Riana Malik	Appellant’s Rep.:	
Hearing Location:	Taunton 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 09/22/2025, MassHealth informed the appellant that it reviewed her application for MassHealth Long Term Care (LTC) benefits determined and that she is not eligible because she failed to submit requested verifications (130 CMR 515.008; Exhibit 1). On 10/23/2025, a timely appeal was filed on the appellant’s behalf by her legal guardian (130 CMR 610.015(B); Exhibits 2 and 4). 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 was held on 11/13/2025 before the Board of Hearings (Board). Upon request by the appellant's representatives, the record was left open until 12/05/2025 for the appellant's submission of the verifications requested by MassHealth. On 12/05/2025, the appellant's representatives requested an extension of the record open period until 12/26/2025 to continue to obtain the verifications. The request was granted. On 01/09/2026, the appellant’s representatives submitted a request to extend the record open period for a third time. That request was denied.

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 08/05/2025. She is awaiting admission to a skilled nursing facility. A request for verifications was sent by MassHealth, requesting various financial information to process the appellant's application for benefits. On 09/22/2025, 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:

- Verification of the appellant's employment status and income; and

- [REDACTED]

(Exhibit 5.)

The appellant's representative testified that he needed some additional time to submit the missing verifications. His request was granted, and the record was left open until 12/05/2025 for the appellant's submission of the verifications requested by MassHealth. On 12/05/2025, the appellant's representatives requested an extension of the record open period until 12/26/2025 to continue to obtain the verifications. The request was granted. On 01/09/2026, the appellant's representatives submitted a request to extend the record open period for a third time. That request was denied.

At the time the hearing record closed, all verifications have been provided to MassHealth except the verifications from [REDACTED].

Findings of Fact

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

1. The appellant applied for MassHealth long term care benefits on 08/06/2025.
2. The appellant has not been admitted to a skilled nursing facility.
3. MassHealth sent to the appellant a request for information (VC-1), seeking information necessary to make an eligibility determination.
4. On 09/22/2025, 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 10/23/2025.
6. A fair hearing took place before the Board of Hearings on 11/13/2025.
7. At the fair hearing, the MassHealth representative testified that the following verifications were not received by MassHealth:
 - Verification of the appellant's employment status and income; and
█ [REDACTED]
- (Exhibit 5.)
8. At the fair hearing, upon request by the appellant's representatives, the record was left open until 12/05/2025 for the appellant's submission of the verifications requested by MassHealth. On 12/05/2025, the appellant's representatives requested an extension of the record open period until 12/26/2025 to continue to obtain the verifications. The request was granted. On 01/09/2026, the appellant's representatives submitted a request to extend the record open period for a third time. That request was denied.
9. During the record open period, the appellant's representative submitted verification of the appellant's income and employment status.
10. The appellant did not provide the verifications from █ [REDACTED] during the record open 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 08/06/2025. 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 09/22/2025, 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.

As of the date of the fair hearing, the following verifications remained outstanding:

- Verification of the appellant's employment status and income; and

█ [REDACTED]

At the fair hearing, upon request by the appellant's representatives, the record was left open until 12/05/2025 for the appellant's submission of the verifications requested by MassHealth. On 12/05/2025, the appellant's representatives requested an extension of the record open period until 12/26/2025 to continue to obtain the verifications. The request was granted. On 01/09/2026, the appellant's representatives submitted a request to extend the record open period for a third time. That request was denied

At the close of the record open period, the appellant had not provided the verifications from █ [REDACTED] █ [REDACTED].

MassHealth denied the LTC application based on a failure of the appellant to submit requested

financial documentation to MassHealth. The appellant's representative requested a hearing and during the record open period, did not provide the missing [REDACTED] verifications.

Accordingly, MassHealth's denial is supported by the regulations and the facts in the hearing record. Accordingly, 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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

[REDACTED]

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