

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2516291
Decision Date:	01/13/2026	Hearing Date:	12/12/2025
Hearing Officer:	Amy B. Kullar, Esq.	Record Open to:	12/17/2025; 01/02/2026

Appearance for Appellant:



Appearance for MassHealth:

Stephanie Mowles, Springfield 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:	01/13/2026	Hearing Date:	12/12/2025
MassHealth's Rep.:	Stephanie Mowles	Appellant's Rep.:	██████████
Hearing Location:	Springfield MassHealth Enrollment Center Room 1 (Telephone)	Aid Pending:	Yes

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 November 5, 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 November 14, 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 an adult who is over the age of 65 and resides in a long-term care facility. He was represented at hearing by a patient financial services specialist employed by the long-term care facility, who verified the appellant's identity. MassHealth was represented by a worker from the Springfield 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: on August 11, 2025, an application for MassHealth LTC benefits was filed on the appellant's behalf, and a Request for Information was sent to the appellant on August 26, 2025¹. The LTC application was then denied for missing verifications on September 30, 2025. MassHealth received some of the outstanding verifications on October 1, 2025; therefore, the application was re-logged and a new Request for Information was issued on that same day. A final denial, for missing verifications, was issued to the appellant on November 5, 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 his application is still incomplete. As of the date of hearing, there is only one verification outstanding from the November 5, 2025 denial notice:

- **Proof of bank account information from Checking Account [Bank Name]**
██████████ Please provide bank statements from 6/2025-7/2025. Verify the source of the \$2,100 deposit on July 2, 2025, as well as receipts for the withdrawals on August 26, 2025, September 10, 2025 and September 22, 2025.

Testimony and Exhibit 6.

The appellant's representative did not dispute the MassHealth representative's testimony regarding the timeline of the appellant's application for LTC MassHealth. She stated that she has faxed the outstanding 6/2025-7/2025 bank statement to MassHealth several times during the application process. Testimony. The MassHealth representative responded that MassHealth had only received the first page of the statement in question and that the entire statement needs to be submitted to MassHealth. After questioning by the Hearing Officer, the appellant's representative agreed that she could email the outstanding statement to the Hearing Officer and the MassHealth representative if the Hearing Officer held the record open for that purpose.

The appellant's representative then stated that she was able to provide documentation for the

¹ The completed SC-1 Form and Nursing Facility Screening did not accompany the appellant's 8/11/2025 application for LTC MassHealth. The SC-1 Form and Nursing Facility Screening were on the list of outstanding verifications on the 11/5/2025 notice under appeal; it was the testimony of the MassHealth representative that the SC-1 and Nursing Facility Screening were submitted to MassHealth pre-hearing. The SC-1 Form states that the nursing facility is seeking payment from MassHealth beginning on 12/3/2025. Testimony of MassHealth representative; see *also* Exhibit 6.

withdrawals in August and September 2025. The appellant's representative is able to provide a signed and dated letter from the appellant's sister that explains that she spent the withdrawn money on the appellant's behalf. The appellant's sister purchased new clothing for the appellant, including a winter coat. The other withdrawals were taken out to pay for the appellant's pre-paid burial contract. She stated, "I have all that documentation." Testimony.

The hearing then concluded and it was agreed that the record would be held open until December 17, 2025 for the submission of the outstanding verifications, specifically, "**proof of bank account information from Checking Account [Bank Name] [REDACTED] Please provide bank statements from 6/2025-7/2025.** Verify the source of the \$2,100 deposit on July 2, 2025, as well as receipts for the withdrawals on August 26, 2025, September 10, 2025 and September 22, 2025." Testimony, Exhibits 6, 7. On December 12, 2025, the appellant's representative emailed several PDF files to the Hearing Officer and the MassHealth representative. Exhibit 8. On December 17, 2025, the MassHealth representative responded to appellant's submission:

Those documents have all been reviewed and are all documents that were previously received and reviewed. For the 6/2025 - 7/2025 bank statement, only the first page of the statement was received, and in those [record open submission] documents. The complete bank statement for that month remains outstanding. As for the receipts for the specified withdrawals on 8/26/2025, 9/10/2025, and 9/22/2025 are outstanding. Receipts to show the items purchased on behalf of [Appellant] are needed.

Exhibit 9.

The appellant's representative accepted the Hearing Officer's offer of an extension of time for the appellant's submissions, and the Hearing Officer held the record open until January 2, 2026. Exhibits 10, 11. On January 9, 2026, via email, the MassHealth representative confirmed that "MassHealth has not received the necessary documentation to determine eligibility." Exhibit 12. On January 9, 2026, having received no communications from the appellant's representative since December 17, 2025, the Hearing Officer closed the administrative record. Exhibit 13.

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 65 and resides in a long-term care facility. Testimony, Exhibit 6.
2. On August 11, 2025, an application for MassHealth Long-Term care benefits was filed on the appellant's behalf. Prior to hearing, the appellant filed an SC-1 Form with MassHealth, seeking a coverage start date of 12/3/2025. Testimony, Exhibit 6.

3. On November 5, 2025, the appellant's application was denied for failure to provide verification information after a request for information by MassHealth. Exhibits 1 & 6, Testimony.
4. The appellant filed a timely appeal on November 14, 2025. Exhibit 2.
5. Following the appeal hearing, the appellant's representative requested that the record be kept open until December 17, 2025 for the submission of missing verifications, which the Hearing Officer granted. Testimony, Exhibit 7.
6. During the record open period, the appellant's representative requested an extension of the open record period until January 2, 2026, for the submission of missing verifications, which the Hearing Officer granted. Exhibits 10, 11.
7. As of the issuance of this decision, the following verifications are still outstanding:
 - **Proof of bank account information from Checking Account [Bank Name]** [REDACTED] **Please provide bank statements from 6/2025-7/2025.** Verify the source of the \$2,100 deposit on July 2, 2025, as well as receipts for the withdrawals on August 26, 2025, September 10, 2025 and September 22, 2025.

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, 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 August 11, 2025.

For the foregoing reasons, the appeal is hereby DENIED.


Order for MassHealth

Remove aid pending.

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



cc: MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 243 Cottage Street, Springfield, MA 01104