

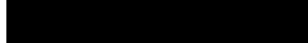
# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2176443
<b>Decision Date:</b>	10/04/2021	<b>Hearing Date:</b>	09/29/2021
<b>Hearing Officer:</b>	Sara E. McGrath		

**Appearances for Appellant:**



**Appearances for MassHealth:**

Teisha Christie, Chelsea MassHealth



*Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Office of Medicaid  
Board of Hearings  
100 Hancock Street  
Quincy, MA 02171*

## APPEAL DECISION

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility
<b>Decision Date:</b>	10/04/2021	<b>Hearing Date:</b>	09/29/2021
<b>MassHealth Rep.:</b>	Teisha Christie	<b>Appellant Rep.:</b>	Pro se
<b>Hearing Location:</b>	Board of Hearings (Remote)		

### 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 July 27, 2021, MassHealth notified the appellant that his coverage would change to MassHealth Senior Buy In because his assets and income are too high to get MassHealth Standard. The appellant filed this appeal in a timely manner on August 23, 2021 (130 CMR 610.015(B)). The scope of assistance is a valid ground for appeal (130 CMR 610.032(A)).

### Action Taken by MassHealth

MassHealth notified the appellant that his coverage would change to MassHealth Senior Buy In because his assets and income are too high to get MassHealth Standard.

### Issue

The appeal issue is whether appellant is financially eligible for MassHealth Standard benefits.

## **Summary of Evidence**

The MassHealth representative testified telephonically to the following chronology: The appellant lives in the community and had been receiving MassHealth Standard and Senior Buy In coverage. The appellant is now over the age of 65, and no longer qualifies for MassHealth Standard coverage under the rules that apply to individuals in his age group. The appellant's assets previously exceeded program limits, but are now within the program limits. The appellant's income, however, exceeds program limits. The appellant's income is from Social Security and totals \$1,143 per month, which is 104.5% of the federal poverty level for a family group of one. Because the appellant's income exceeds 100% of the federal poverty level for his family size (\$1,064), he must meet a deductible every six months in order to qualify for MassHealth Standard coverage. The appellant remains eligible for MassHealth Senior Buy In coverage.

The appellant testified telephonically and explained that he is a member of Senior Whole Health, which requires its members to have MassHealth Standard coverage. He is worried that if he loses his MassHealth Standard coverage, he will no longer be eligible to be part of Senior Whole Health. He has many expenses, including rent and car insurance. He feels that obtaining a disability benefit from Social Security has penalized him.

The MassHealth representative informed the appellant of other MassHealth programs that could potentially provide assistance, including the home- and community-based services waiver (frail elder), and the personal care attendant (PCA) services program. The appellant explained that he has completed the application for a PCA, and would look into the frail elder waiver program. The MassHealth representative confirmed that MassHealth just received the appellant's PCA application, but stated that it has not been reviewed yet.

## **Findings of Fact**

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

1. The appellant is over the age of 65 and lives in the community.
2. The appellant's monthly countable income totals \$1,143, which is 104.5% of the federal poverty level for a family group of one.
3. The appellant's assets are under \$2,000.
4. The appellant had been receiving MassHealth Standard and Senior Buy In coverage.
5. On July 27, 2021, MassHealth notified the appellant that his coverage would change to MassHealth Senior Buy In because his assets and income are too high to get MassHealth Standard.
6. On August 23, 2021, the appellant appealed this notice to the Board of Hearings.

## Analysis and Conclusions of Law

Under 130 CMR 520.009(A)(2), MassHealth financial eligibility for community residents is determined by comparing the countable-income amount to the applicable income standard. Community-based individuals whose countable-income amount exceeds 100% of the federal poverty level are generally not eligible for MassHealth Standard coverage.

The appellant's income from Social Security is appropriately characterized as unearned income (130 CMR 520.009(D)). Community unearned-income deductions are permitted, as follows:

(A) a deduction of \$20 per individual or married couple; or

(B) in determining eligibility for MassHealth Standard, a deduction that is equivalent to the difference between the applicable MassHealth deductible-income standard at 130 CMR 520.030 and 133% of the federal poverty level. This deduction includes, and is not in addition to, the \$20 disregard.

(1) This deduction from gross unearned income is allowed only for persons who

(a) are 65 years of age and older;

(b) are receiving personal-care attendant services paid for by the MassHealth agency, or have been determined by the MassHealth agency, through initial screening or by prior authorization, to be in need of personal-care attendant services; and

(c) prior to applying the deduction at 130 CMR 520.013(B), have countable income that is over 100% of the federal poverty level.

(130 CMR 520.013).

The appellant has not been approved for PCA services. Thus, at this time, he is only eligible for a \$20 deduction from his income. With that deduction, the appellant's income still exceeds 100% of the federal poverty level, and he is therefore not eligible for MassHealth Standard coverage.<sup>1</sup>

Community-based individuals whose countable-income amount exceeds the 100% federal poverty level income standards are, however, eligible for a deductible (130 CMR 520.028(B)). Per 130 CMR 520.030, the deductible is determined by multiplying the excess monthly income by six. Excess monthly income is the amount by which the applicant's countable-income amount MassHealth deductible-income standard (\$522). MassHealth applied this regulation and calculated a deductible of \$3,606 (Exhibit 1). This calculation was not specifically disputed by the appellant, and there is no evidence that MassHealth calculated the deductible incorrectly.

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<sup>1</sup> While not in dispute, it bears noting that the appellant remains eligible for MassHealth Senior Buy In coverage (130 CMR 520.010).

For these reasons, 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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Sara E. McGrath  
Hearing Officer  
Board of Hearings

cc: Chelsea MassHealth Enrollment Center