

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



**Appeal Decision:** Denied

**Appeal Number:** 2201006

**Decision Date:** 6/15/2022

**Hearing Date:** 06/14/2022

**Hearing Officer:** Patricia Mullen

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Nicole Conrad, Taunton MEC



*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>	Deductible
<b>Decision Date:</b>	6/15/2022	<b>Hearing Date:</b>	06/14/2022
<b>MassHealth's Rep.:</b>	Nicole Conrad, Taunton MEC	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Taunton MassHealth Enrollment Center		

## 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 January 3, 2022, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant's income exceeds the limit for MassHealth Standard. (see 130 CMR 520.028 and Exhibit 1). The appellant filed this appeal in a timely manner on February 9, 2022. (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal. (see 130 CMR 610.032). The appeal was dismissed by notice dated March 14, 2022 for failure to appeal at the March 10, 2022 hearing. (Exhibits 3, 4). The appellant submitted a request to vacate the dismissal and the Board of Hearings allowed the request and scheduled the hearing for May 13, 2022. (Exhibits 5, 6). The May 13, 2022 hearing was rescheduled to June 14, 2022. (Exhibits 7, 8).

## Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth and determined the appellant has a six month deductible to be met before eligibility for MassHealth Standard could be established.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.028, in determining that the appellant's income exceeds the limit for MassHealth Standard resulting in a six month deductible to be met before eligibility can be established.

## Summary of Evidence

The appellant testified telephonically. MassHealth was represented telephonically by a worker from the Taunton MassHealth Enrollment Center (MEC). The MassHealth representative stated that the appellant submitted a Senior Affordable Care Application (SACA) on August 13, 2021. A request for information was sent to the appellant on August 25, 2021 and information was received on January 3, 2022. (Testimony). The MassHealth representative stated that the appellant submitted pay stubs during various months in 2022 and MassHealth updated the income in the system each time. The MassHealth representative testified that the appellant is over age 65 and lives in a one person household in the community. The MassHealth representative stated that the appellant receives \$1,381.00 in gross monthly Social Security income from which \$20.00 is deducted to determine MassHealth unearned countable income of \$1,361.00. The MassHealth representative stated that the appellant is employed and submitted recent paystubs which averaged out to \$983.82 a month. (Exhibit 10). The MassHealth representative testified that in determining countable earned income, MassHealth deducts \$65.00 and then takes half of that amount. Accordingly, the appellant's countable earned income is \$459.00. (Testimony, exhibit 13). The MassHealth representative explained that the income limit for MassHealth Standard for persons age 65 and older living in the community is 100% of the federal poverty level, or \$1,133.00 a month for a family size of one. The MassHealth representative stated that the appellant's countable income of \$1,820.00 exceeds \$1,133.00 a month and thus he is not financially eligible for MassHealth Standard. The MassHealth representative stated that the appellant is eligible for MassHealth Buy In and MassHealth is paying his Medicare premium every month. The MassHealth representative stated that she spoke with the appellant prior to the hearing and sent him a packet regarding the Frail Elder Waiver and Personal Care Attendant waiver programs.

MassHealth previously calculated a 6 month deductible of \$6,896.00 but based on the appellant's 2022 income, his new deductible is \$7,352.00. (Exhibits 1, 13). The deductible must be met every 6 months before eligibility for MassHealth could be established. (Exhibit 1). The MassHealth representative stated that MassHealth issued a most recent deductible notice dated June 13, 2022. (Exhibit 13).

The appellant confirmed that his gross Social Security is \$1,381.00 a month. When asked by the hearing officer, the appellant noted that he does not require home care. The appellant stated that he has not been determined disabled by Social Security. Prior to the hearing, the appellant submitted 4 weekly paystubs for May, 2022. (Exhibit 10). The weekly pay stubs show gross weekly income of \$174.12, \$332.29, \$240.96, and \$160.85, which adds up to \$908.22, or a weekly average of \$227.05. ( $\$908.22/4 = \$227.05$ ). MassHealth multiplied the weekly average by 4.333 to get the

average monthly earnings of \$983.82. (Testimony).

## **Findings of Fact**

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

1. The appellant is over age 65 and lives in a one person household in the community.
2. 100% of the federal poverty level is \$1,133.00 a month for a family size of one.
3. The appellant receives gross monthly Social Security income of \$1,381.00 and has countable monthly earnings totaling \$459.00.
4. The appellant has Medicare coverage.
5. MassHealth pays the appellant's Medicare premium through the Buy In program.

## **Analysis and Conclusions of Law**

The regulations at 130 CMR 515.000 through 520.000 provide the requirements for MassHealth eligibility for persons age 65 and older. See 130 CMR 515.002. A non-institutionalized person age 65 and older may establish eligibility for MassHealth Standard coverage if the countable income is less than or equal to 100% of the federal poverty level. 130 CMR 519.005. 100% of the federal poverty level for a family of one is \$1,133.00 per month. The appellant's gross unearned income totals \$1,381.00 per month. After allowing the \$20.00 deduction for unearned income, the appellant's countable unearned income is \$1,361.00. The appellant's countable earned income is \$459.00. The appellant's combined countable unearned and earned income total \$1,820.00. This amount exceeds 100% of the federal poverty level for a family of one. The appellant is not financially eligible for MassHealth Standard at this time.

The appellant must meet a six month deductible before MassHealth eligibility can be determined. (130 CMR 520.028). The appellant's countable income for the deductible calculation is \$1,820.00. The MassHealth Income Standard applicable to an individual age 65 or older residing in the community is \$522.00 per month for a household of one. (130 CMR 520.030) The deductible is the total dollar amount of incurred medical expenses that an individual is responsible for before MassHealth eligibility is established. (130 CMR 520.031). The deductible period is 6 months and the deductible is determined by multiplying the excess monthly income by 6. (130 CMR 520.029, 520.030). The excess monthly income is the amount by which the appellant's countable income exceeds the MassHealth Income Standard. (130 CMR 520.030). In the present case, the appellant's countable income of \$1,820.00, as calculated above, exceeds the MassHealth income standard of \$522.00 by \$1,298.00. MassHealth determined deductible amounts of \$1,149.00 for January, 2022, \$1,226.40 for both February and March, 2022, and \$1,154.50 for April, 2022, based on the appellant's submissions of earned income. The

appellant's six month deductible for the period January 3, 2022 to August 1, 2022 is \$7,352.00.

Accordingly, the appellant is responsible for \$7,352.00 of incurred medical expenses for the 6 month deductible period before eligibility for MassHealth Standard can be established. MassHealth's action is upheld and 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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Patricia Mullen  
Hearing Officer  
Board of Hearings

cc: MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center