

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2204699
Decision Date:	9/8/2022	Hearing Date:	07/29/2022
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via telephone:



Appearance for MassHealth:

Via telephone:

Kelly Worthen, Springfield 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

Appeal Decision:	Denied	Issue:	Eligibility – Income
Decision Date:	9/8/2022	Hearing Date:	07/29/2022
MassHealth’s Rep.:	Kelly Worthen	Appellant’s Rep.:	POA
Hearing Location:	Springfield MassHealth Enrollment Center Remote	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 June 9, 2022, MassHealth notified the appellant that he was eligible MassHealth Buy-In coverage with a start date of June 1, 2022 (see 130 CMR 519.011 and Exhibit 1). The appellant filed this appeal in a timely manner on June 23, 2022 (see 130 CMR 610.015(B) and Exhibit 2). Determinations regarding scope and amount of assistance are valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved the appellant for MassHealth Buy-In coverage with a start date of June 1, 2022.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 519.011, in determining that the appellant is eligible for MassHealth Buy-In coverage with a start date of June 1, 2022.

Summary of Evidence

The MassHealth representative appeared at hearing via telephone and testified as follows: the appellant is over the age of 65 and has a household size of one. On June 9, 2022, MassHealth issued a notice informing the appellant that he is eligible for MassHealth Buy-In coverage with a start date of June 1, 2022. His assets were within MassHealth limits. She explained that he had been on MassHealth Standard, but when he turned [REDACTED], MassHealth redetermined his eligibility. The appellant has a monthly gross income of \$1,501. With the \$20 disregard, the appellant's total countable income is \$1,481 per month, which is 130.7% of the Federal Poverty Level (FPL). To qualify for MassHealth Standard benefits, the appellant would have to be at or below 100% of the FPL, which is \$1,133 per month for a household of one.

The appellant was represented by his power of attorney who appeared at hearing via telephone. He confirmed that the appellant's income was reported accurately. He explained that the appellant had a brain tumor for which he has had surgery. He is also blind in one eye. He explained that the appellant cannot afford the deductible or the portion of bills that he would be responsible for if some health issues were to arise. He was looking for a special dispensation to reduce the deductible.

The MassHealth representative responded that there was no way to reduce the deductible. The determination is made based on income. The MassHealth representative explained the Frail Elder Waiver and suggested that it might be a good option for the appellant. He would need to contact his local Elder Services provider to arrange for an assessment.

Findings of Fact

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

1. The appellant was approved for MassHealth Buy-In coverage with a start date of June 1, 2022 (Testimony and Exhibit 1).
2. The appellant is over 65 years old and has a household size of one (Testimony).
3. The appellant has a gross monthly income of \$1,501 and total countable income of \$1,481, which is 130.7% of the FPL (Testimony and Exhibit 1).
4. To qualify for MassHealth Standard coverage, the appellant would have to be at or below 100% of the FPL, or \$1,133 for a household of one (Testimony).
5. The appellant does not dispute his income (Testimony).

Analysis and Conclusions of Law

Pursuant to 130 CMR 519.011, the following applies to MassHealth Buy-In coverage:

- (A) MassHealth Buy-In for Specified Low Income Medicare Beneficiaries (SLMB).
- (1) Eligibility Requirements. MassHealth Buy-In coverage for Specified Low Income Medicare Beneficiaries (SLMB) is available to Medicare beneficiaries who meet the eligibility requirements of MassHealth Senior Buy-In coverage at 130 CMR 519.010 with the following exception: **the countable income amount of the individual and his or her spouse must be greater than 130% of the federal poverty level and less than or equal to 150% of the federal poverty level.**
 - (2) Benefits. The MassHealth agency pays the cost of the monthly Medicare Part B premium for members who establish eligibility for MassHealth Buy-In for SLMB coverage in accordance with 130 CMR 519.011(A).
 - (3) Begin Date. MassHealth Buy-In for SLMB coverage, in accordance with 130 CMR 519.011(A), begins with the month of application and may be retroactive up to three calendar months before the month of application.

(Emphasis added).

Additionally, 130 CMR 519.005 states the following for community residents 65 years of age and older:

- (A) Eligibility Requirements. Except as provided in 130 CMR 519.005(C), noninstitutionalized individuals 65 years of age and older may establish eligibility for MassHealth Standard coverage provided they meet the following requirements:
- (1) **the countable-income amount, as defined in 130 CMR 520.009: *Countable-income Amount*, of the individual or couple is less than or equal to 100 percent of the federal poverty level; and**
 - (2) the countable assets of an individual are \$2,000 or less, and those of a married couple living together are \$3,000 or less.

(Emphasis added).

As explained above, to qualify for MassHealth Standard benefits, the countable income of an individual who is over the age of 65 must be equal to or less than 100% of the Federal Poverty Level which for a household of one is \$1,133. Therefore, the appellant's countable income (\$1,481 or 130.7% of the FPL) is over the limit to qualify for MassHealth Standard benefits. MassHealth correctly determined that the appellant qualifies for MassHealth Buy-In benefits. Based on his income, there is no way to adjust the appellant's deductible; however, as explained at hearing, he is encouraged to contact his local Elder Services provider to inquire about the Frail Elder Waiver as a possible avenue to MassHealth Standard coverage.

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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104

[REDACTED]