

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2300286
<b>Decision Date:</b>	4/18/2023	<b>Hearing Date:</b>	03/03/2023
<b>Hearing Officer:</b>	Alexandra Shube		

**Appearance for Appellant:**

*Via telephone:*



**Appearance for MassHealth:**

*Via telephone:*

Dianne Braley, Taunton MEC

**Interpreter:** Jody H., Cantonese



*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>	LTC – PPA
<b>Decision Date:</b>	4/18/2023	<b>Hearing Date:</b>	03/03/2023
<b>MassHealth’s Rep.:</b>	Dianne Braley	<b>Appellant’s Rep.:</b>	HCP
<b>Hearing Location:</b>	Taunton MassHealth Enrollment Center Remote	<b>Aid Pending:</b>	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 December 15, 2022, MassHealth notified the appellant that her patient paid amount (PPA) would increase from \$2,714.73 to \$2,860.73 beginning January 1, 2023 due to a change in circumstances (Exhibit 1). The appellant filed this appeal in a timely manner on January 11, 2023 (see 130 CMR 610.015(B) and Exhibit 2). A determination regarding scope of assistance is a valid basis for appeal. (see 130 CMR 610.032).

## Action Taken by MassHealth

MassHealth changed the appellant’s PPA from \$2,714.73 to \$2,860.73 beginning January 1, 2023.

## Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.026, in determining the change in the appellant’s PPA.

## Summary of Evidence

The MassHealth representative appeared at hearing via telephone and testified as follows: on December 15, 2022, MassHealth notified the appellant, who is over the age of 65 and a resident in a nursing facility, that her patient paid amount (PPA) would increase from \$2,714.73 to \$2,860.73 beginning January 1, 2023 due to a change in circumstances. Her gross pension amount remained at \$1,432.43, but her Social Security Income (SSI) had increased from \$1,450 to \$1,596, for a total monthly income of \$3,028.43. The PPA was calculated as follows: \$3,028.43 (countable income) - \$72.80 (Personal Needs Allowance (PNA)) - \$94.90 (deduction for additional health insurance at \$50 per month and dental insurance at \$44.90 per month) = \$2,860.73. There were no other applicable deductions.

The appellant's representative appeared via telephone and testified as follows: SSI is \$1,590 but the net monthly pension is only \$1,290.58. She explained that there is only a very little amount of money left after paying the nursing facility. She stated that last year there was \$72.80 left every month in the appellant's bank account, but there has not been that amount in January and February of this year since the change in the PPA.

MassHealth responded that the PNA of \$72.80 was accounted for in the PPA calculation, but she did not see a PNA account at the facility, only a checking account with a bank. She also stated that MassHealth considers an applicant's gross income, not net. She would look into where the \$72.80 was deposited for the past two months, but there was nothing further she could do to adjust the PPA as the income and deductions were calculated correctly.

## Findings of Fact

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

1. The appellant is over the age of 65 and a resident of a nursing facility (Testimony).
2. On December 15, 2022, MassHealth notified the appellant that her patient paid amount would increase from \$2,714.73 to \$2,860.73 beginning January 1, 2023 due to a change in circumstances (Testimony and Exhibit 1).
3. The appellant timely appealed the notice on January 11, 2023 (Exhibit 2).
4. The appellant's monthly income totals \$3,028.43, comprised of her pension (\$1,432.43) and SSI (\$1,596) (Testimony).
5. The PPA was calculated as follows: \$3,028.43 (countable income) - \$72.80 (Personal Needs Allowance (PNA)) - \$94.90 (deduction for additional health insurance at \$50 per month and dental insurance at \$44.90 per month) = \$2,860.73 (Testimony).

## Analysis and Conclusions of Law

130 CMR 520.009(A) states the following regarding countable income:

- (1) An individual's and the spouse's **gross earned and unearned income** less certain business expenses and standard income deductions is referred to as the countable-income amount. In determining gross monthly income, the MassHealth agency multiplies the average weekly income by 4.333 unless the income is monthly.
- (2) For community residents, the countable-income amount is compared to the applicable income standard to determine the individual's financial eligibility.
- (3) **For institutionalized individuals, specific deductions described in 130 CMR 520.026 are applied against the individual's countable-income amount to determine the patient-paid amount.**  
(Emphasis added).

In determining a member's PPA, MassHealth regulations require that deductions be made from the member's income "in the following order: a personal-needs allowance; a spousal-maintenance-needs allowance; a family-maintenance-needs allowance for qualified family members; a home-maintenance allowance; and health-care coverage and incurred medical and remedial-care expenses. These deductions are used in determining the monthly patient-paid amount..." See 130 CMR 520.026. The amount for the personal-needs allowance is set at \$72.80.

The appellant pays \$94.90 for additional health-care coverage and, other than the PNA, there are no other applicable deductions. The appellant's total countable income is \$3,028.43, based on \$1,596 from SSI and \$1,432.43 from the pension. MassHealth correctly calculated the appellant's income, allowable deductions, and monthly PPA. For these reasons, the MassHealth determination was correct 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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Alexandra Shube  
Hearing Officer  
Board of Hearings

cc:

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

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