

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2306085
Decision Date:	10/27/2023	Hearing Date:	09/06/2023
Hearing Officer:	Rebecca Brochstein		

Appearances for Appellant:



Appearances for MassHealth:
Courtney Juday, Springfield MEC



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

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Long-Term Care / Patient-Paid Amount
Decision Date:	10/27/2023	Hearing Date:	09/06/2023
MassHealth's Rep.:	Courtney Juday	Appellant's Reps.:	Appellant and Appellant's Daughter
Hearing Location:	Springfield MassHealth Enrollment Center (Telephonic)		

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapters 118E and 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

By a notice dated July 26, 2023, MassHealth approved the appellant for long-term care coverage beginning on January 1, 2022, and set her monthly patient-paid amount at \$1,672.13 (Exhibit 1). The appellant filed a timely appeal (130 CMR 610.015; Exhibit 2). The Board of Hearings dismissed the appeal for failure to provide a copy of the notice being appealed; BOH subsequently vacated the dismissal after receiving a copy of the notice (Exhibits 3 and 4). Calculation of a PPA is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth approved the appellant for long-term care benefits starting on January 1, 2022, and calculated her patient-paid amount at \$1,672.13.

Issue

The issue presented on appeal is whether MassHealth correctly determined the appellant's patient-paid amount.

Summary of Evidence

A caseworker from the Springfield MassHealth Enrollment Center appeared at the hearing telephonically and testified as follows: The appellant, who is over the age of 65, has been a resident of a nursing facility since [REDACTED]. The appellant submitted a MassHealth eligibility review form in April 2023, and later submitted verifying documentation. In reviewing her case, MassHealth determined that the appellant has gross Social Security income of \$1,974. MassHealth deducted the appellant's personal needs allowance (PNA) of \$72.80, as well as her health insurance premium of \$229.07, and arrived at a patient-paid amount of \$1,672.13. The MassHealth representative explained that this is the amount that the appellant owes to the nursing facility each month, and that MassHealth will cover the rest of the cost.

The appellant and her daughter both appeared at the hearing telephonically. The appellant stated that based on conversations she had with MassHealth several months ago, she believed that MassHealth would provide her with 100% coverage in the nursing facility. She indicated that she was surprised to then start receiving letters saying she owed money for her care. She stated that she was admitted to the facility to rehabilitate from an ileostomy and that she was due to return home, but then suffered fractures and permanent hip damage when she fell from a gurney during an ambulance transfer. The appellant argued that she otherwise would not be in the facility, and that it was not her fault she was injured and had to extend her stay.

The appellant's daughter added that she has been working on moving the appellant out of the facility for the past year. She noted that the appellant has had to continue paying her mortgage and that she is not getting an allowance from MassHealth to maintain her home. In response, the MassHealth representative testified that the home maintenance needs allowance is only available for the first six months of a member's stay in a nursing facility.

Findings of Fact

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

1. The appellant was admitted to a nursing facility in [REDACTED]
2. In April 2023, the appellant submitted an eligibility review form to MassHealth, and submitted supporting documentation in July.
3. In reviewing her eligibility, MassHealth determined that the appellant has gross Social Security income of \$1,974.
4. The appellant is entitled to a deduction for her personal needs allowance (PNA) of \$72.80 and for her health insurance premium of \$229.07. She does not qualify for any other deduction in the calculation of the patient-paid amount.

5. On July 26, 2023, MassHealth approved the appellant for long-term care coverage with a patient-paid amount of \$1,672.13.

Analysis and Conclusions of Law

The issue in this appeal is whether MassHealth correctly calculated the appellant's patient-paid amount when it approved her for long-term care coverage. The PPA is the amount that a member in a long-term care facility must contribute to the cost of his or her care under the laws of the Commonwealth of Massachusetts. 130 CMR 515.001. By regulation, MassHealth allows several deductions from the member's income in calculating the PPA. This includes the deduction for the maintenance of the appellant's former home, described as follows in 130 CMR 520.026(D):

The MassHealth agency allows a deduction for maintenance of a home when a competent medical authority certifies in writing that a single individual, with no eligible dependents in the home, is likely to return home within six months after the month of admission. This income deduction terminates at the end of the sixth month after the month of admission regardless of the prognosis to return home at that time.

In this case, MassHealth deducted a personal needs allowance as well as an allowance for the appellant's health insurance premium but determined that she is not eligible for the home maintenance needs deduction. This determination was correct. As the appellant's nursing home stay began in [REDACTED], her eligibility for the home maintenance needs deduction ended six months later. Though it is understandable that the appellant would like the additional income available to cover her housing expenses in the community – with the hope that she will eventually return home – the regulation does not provide for this allowance beyond six months. There is also no evidence that the appellant qualifies for any of the other deductions (apart from those for the PNA and health insurance) set forth in 130 CMR 520.026. As there is no error in MassHealth's calculation of the patient-paid amount, this 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.

Rebecca Brochstein
Hearing Officer
Board of Hearings

cc: Springfield MEC