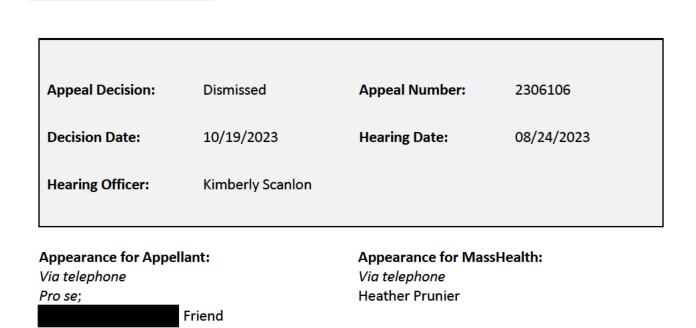
# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:** 





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:	Dismissed	Issue:	Eligibility; Over 65; Over Income
Decision Date:	10/19/2023	Hearing Date:	08/24/2023
MassHealth's Rep.:	Heather Prunier	Appellant's Rep.:	Pro se;
Hearing Location:	Tewksbury MassHealth Enrollment Center Room 1 (Remote)	Aid Pending:	Νο

#### 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 27, 2023, MassHealth notified the Appellant that she did not qualify for MassHealth Standard or Limited benefits because MassHealth determined that she was over the allowable income limits. The notice further stated that the Appellant is eligible for MassHealth Senior Buy In. (Exhibit 1). The Appellant filed this appeal in a timely manner on July 25, 2023. (130 CMR 610.015(B); Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

### **Action Taken by MassHealth**

MassHealth notified the Appellant that she is not eligible for MassHealth benefits because she was over the allowable income limits.

#### Issue

The appeal issue is whether MassHealth was correct in determining that the Appellant is not

eligible for MassHealth benefits because she is over the allowable income limits.

# **Summary of Evidence**

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: The Appellant was previously receiving MassHealth Care Plus benefits. Further, the Appellant currently receives Senior Buy-In assistance which began in April of 2023.

The Appellant appeared at the hearing telephonically and testified that she mailed additional documentation to MassHealth which shows that she qualifies for MassHealth benefits. She explained that she previously received Care Plus benefits, and it is her understanding that she qualifies for Senior Buy-in benefits.

In response, the MassHealth representative explained that all benefits were protected during the COVID pandemic.<sup>1</sup> However, when the COVID pandemic ended all members were sent a renewal application. The MassHealth representative explained that MassHealth received the Appellant's renewal application and subsequently sent her a request for information.<sup>2</sup> She testified that MassHealth received the Appellant's submission of documentation and determined that the Appellant was eligible for Senior Buy-in, however, she is not eligible for MassHealth Standard or Limited coverage because she is over the allowable income limits. The Appellant is eligible for Health Safety Net coverage though, which covers community health center services and emergency services. The MassHealth representative explained that to be eligible for MassHealth benefits, the Appellant's income must be under 100% of the Federal Poverty Level ("hereinafter FPL") or \$ 1,215.00 and her assets must be under \$ 2000.00.

The Appellant testified that her assets are under \$ 2,000.00. In response, the MassHealth representative explained that the issue is the Appellant's income. Here, the Appellant's gross income that she receives from social security amounts to \$ 1,514.00, which is over the allowed income limit. The MassHealth representative reiterated that the Appellant is eligible for Health Safety Net coverage, which covers community health centers and emergency services. She suggested that the Appellant contact the Health Safety Net directly and inquire about the closest community center.<sup>3</sup> In response to inquiry regarding Senior Buy In, the MassHealth representative explained it assists in paying the Appellant's premium for her Part A and Part B Medicare coverage.

The Appellant made inquiry about whether MassHealth could stop paying for her premium because that would make her within the income guidelines to qualify for MassHealth benefits. In

<sup>&</sup>lt;sup>1</sup> The MassHealth representative testified that the Appellant was under the age of 65 when the COVID pandemic commenced, which was not disputed by the Appellant.

<sup>&</sup>lt;sup>2</sup> The MassHealth representative further explained that the documentation that the Appellant submitted was presumably in response to the request for information by MassHealth.

 $<sup>^{3}</sup>$  The contact number for the Health Safety Net is 1-877-910-2100.

response, the MassHealth representative explained that unfortunately MassHealth rules and regulations mandate use of gross income before deductions. Further, MassHealth's computer system matches directly with social security. Here, social security reported the Appellant's gross income of \$ 1,514.00. The MassHealth representative inquired whether the Appellant needs personal care services (hereinafter "PCA"). She explained that there are additional MassHealth programs that could assist the Appellant. Further, the MassHealth representative testified that the Appellant can also opt to contact elder services in her local area and request to be screened for the Frail Elder Waiver program.

The Appellant testified that she does not currently need PCA assistance. She explained that she is in need of dental and eye care. The MassHealth representative suggested that the Appellant contact the Health Safety Net and inquire where the Appellant can receive such services. With respect to inquiry made about Medicare payments, the MassHealth representative explained that Medicare pays for 80%. As to the remaining 20% owed, the MassHealth representative suggested that the Appellant make inquiry with the Health Safety Net. In response to inquiry made about prescriptions, the MassHealth representative suggested that the Appellant should contact the Health Safety Net to ask where the nearest community health center is located and whether said center has a pharmacy within. The Appellant expressed her appreciation for the additional information.

## **Findings of Fact**

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

- 1. The Appellant is over the age of 65. (Testimony; Exhibit 3).
- 2. On or about June 27, 2023, MassHealth notified the Appellant that she was not eligible for MassHealth benefits because she is over the allowable income limits. (Testimony; Exhibit 1).
- 3. The Appellant timely appealed on July 25, 2023. (Exhibit 2).
- 4. The Appellant qualifies for MassHealth Senior Buy In. (Exhibit 1).
- 5. The Appellant is eligible for Health Safety Net. (Testimony).

### Analysis and Conclusions of Law

MassHealth may make an adjustment in the matters at issue before or during an appeal period. (<u>See</u>, 130 CMR 610.051(B)). If the parties' adjustment resolves one or more of the issues in dispute in favor of the Appellant, the hearing officer, by written order, may dismiss the appeal in

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accordance with 130 CMR 610.035 as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement in favor of the appellant. *Id.* 

With respect to 130 CMR 610.035, the Board of Hearings will dismiss a hearing when....

(1) the request is not received within the time frame specified in 130 CMR 610.015;

(2) the request is withdrawn by the appellant;

(3) the sole issue is one of state or federal law requiring automatic change in assistance for classes of members;

(4) the stated reason for the request does not constitute grounds for appeal as set forth in 130 CMR 610.032. Without limiting the generality of the foregoing, except as provided in 130 CMR 610.032(A)(11), no provider decision or action including, but not limited to, a provider determination about whether or the extent to which a service is medically necessary constitutes an appealable action hereunder;

(5) the stated reason for the hearing request is outside the scope of 130 CMR 610.000 as set forth in 130 CMR 610.003;

(6) BOH has conducted a hearing and issued a decision on the same appealable action arising out of the same facts that constitute the basis of the request;

(7) the party requesting the hearing is not an applicant, member, or resident as defined in 130 CMR 610.004;

(8) BOH learns of an adjustment or action that resolves all of the issues in dispute between the parties;

(9) BOH learns that the applicant or member has passed away prior to the date of filing and there is no full compliance with 130 CMR 610.016(B) within ten days of a BOH request;

(10) BOH learns that the applicant or member has passed away prior to the date of filing and scheduling a hearing and is not informed until the date of the hearing and there is no full compliance with 130 CMR 610.016(B); or

(11) the appellant fails to appear at a scheduled hearing.

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(130 CMR 610.035(A)).

In the present case, the Appellant was satisfied with the explanation given at the hearing by the MassHealth representative. Because the appeal issue has been resolved in the Appellant's favor, there is nothing left to dispute before the hearing officer. For the above-stated reasons, this appeal is dismissed.

# **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.

Kimberly Scanlon Hearing Officer Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290