

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2309948
Decision Date:	01/04/2024	Hearing Date:	11/16/2023
Hearing Officer:	Rebecca Brochstein		

Appearances for Appellant:



Appearances for MassHealth:

Allison Gates, 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:	Eligibility; Over 65
Decision Date:	01/04/2024	Hearing Date:	11/16/2023
MassHealth Rep.:	Allison Gates	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center (Telephonic)	Aid Pending:	No

Authority

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

Jurisdiction

Through a notice dated September 9, 2023, MassHealth notified the appellant that his coverage would change to Senior Buy-In because his income and/or assets are too high for MassHealth Standard (Exhibit 1). The appellant filed a timely appeal on October 16, 2023 (Exhibit 2). A change in benefit type is a valid basis for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified the appellant that his coverage would change to Senior Buy-In because his income and/or assets are too high for MassHealth Standard.

Issue

The appeal issue is whether MassHealth correctly determined that the appellant is eligible for a Buy-In program but not MassHealth Standard.

Summary of Evidence

An eligibility worker from the Springfield MassHealth Enrollment Center appeared at the hearing telephonically and testified as follows: The appellant is over the age of 65. On September 9, 2023, after reviewing his eligibility for benefits, MassHealth determined that the appellant is not eligible for MassHealth Standard because his income and assets are above the regulatory limits. The appellant has Social Security income of \$1,508 gross per month, which is above the income limit of \$1,215 per month, and his total assets exceed the limit of \$2,000. The MassHealth representative testified that MassHealth determined the appellant is eligible for the Senior Buy-In program,¹ which covers his Medicare premium as well as co-insurance and deductibles. He can also become eligible for MassHealth coverage if he meets a six-month deductible.

The MassHealth representative testified that the appellant's countable assets (which put him above the \$2,000 limit) include a car in his name. She stated that MassHealth sent a request for information about the car; the appellant responded that the car is no longer registered but has not provided verification that he no longer owns it.

The appellant appeared at the hearing telephonically and testified on his own behalf. He stated that he brought the car to a junkyard and no longer has it, explaining that he gave the title to the junkyard but did not get a receipt. He argued that he should not have to provide any further evidence that he no longer owns the car; he maintained that MassHealth can seek a transcript of the hearing if it requires something in writing and that if it does not it is "MassHealth's problem." The appellant testified that he is living at the poverty level and has barely enough income to pay his bills. He argued that it does not make sense to reduce his benefits at a time when he needs more help. He stated that he will suffer serious health issues as a result of MassHealth's decision. The appellant stated that he needs dental work and was told his benefits will no longer cover his treatment. He argued that MassHealth's determination is not fair, logical, or just.

The MassHealth representative stated that if the appellant cannot provide the title to the car he can send a written statement, signed under the pains and penalties of perjury, to verify that he no longer owns it. She provided the mailing address where the appellant can send the statement. However, she added, even if the appellant verifies his assets are below \$2,000, his income still exceeds the limits for MassHealth Standard.

Findings of Fact

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

1. The appellant is over the age of 65 and has a family group of one.
2. In September 2023, MassHealth redetermined the appellant's eligibility for benefits.

¹ The Buy-In programs are now known collectively as Medicare Savings Programs (MSPs).

3. MassHealth determined that the appellant's Social Security income exceeds the regulatory limit of \$1,215 per month for a household of one. MassHealth determined that the appellant's countable assets exceed the limit of \$2,000 for a single individual.
4. On September 9, 2023, MassHealth notified the appellant that his coverage type would change to MassHealth Senior Buy-In because he does not meet the income or asset limits for MassHealth Standard.
5. On October 16, 2023, the appellant filed a timely appeal.

Analysis and Conclusions of Law

The MassHealth eligibility criteria for community residents who are age 65 and older are found at 130 CMR 519.005. Part (A) of that regulation states that except as provided in 130 CMR 519.005(C)², 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% 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.

In this case, MassHealth determined that the appellant's income and assets exceed the program limits for MassHealth Standard. That decision was correct. However, MassHealth correctly determined that the appellant is eligible for a Medicare Savings Program, also known as a "Buy-In" program. The Medicare Savings Programs are federally funded programs administered by individual states that pay for some or all of their low-income Medicare recipients' premiums, deductibles, copayments, and co-insurance. Effective January 1, 2023, the income limits for the three Massachusetts MSP coverage types were as follows:

Qualified Medicare Beneficiaries (QMB): The countable income limit is at or below 190% of the federal poverty level.

Specified Low-Income Medicare Beneficiaries (SLMB): The countable income limit is greater than 190% and less than or equal to 210% of the FPL.

Qualifying Individuals (QI): The countable income limit for the QI program is greater than 210% and less than or equal to 225% of the FPL.

² The exceptions in section (C) are reserved for parents and caretaker relatives of children under age 19.

For 2023, the asset limits for the MSP programs were \$18,180 for an individual and \$27,260 for a married couple. The asset limits were removed entirely as of November 24, 2023. See MassHealth Eligibility Operations Memo 23-04 and MassHealth Eligibility Letter 246 (December 2023); 130 CMR 519.010 and 519.011.

As the appellant's income and assets are well within the limits for an MSP or "Buy-In" program, MassHealth correctly approved him for this coverage. Because there was no error in MassHealth's determination, 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