

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2310127
Decision Date:	11/21/2023	Hearing Date:	11/6/2023
Hearing Officer:	Cynthia Kopka		

Appearance for Appellant:



Appearance for MassHealth:

Elizabeth Rodriguez, Tewksbury



*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, community, assets
Decision Date:	11/21/2023	Hearing Date:	11/6/2023
MassHealth's Rep.:	Elizabeth Rodriguez	Appellant's Rep.:	████
Hearing Location:	Tewksbury (remote)	Aid Pending:	No

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder. The issue on appeal involved the September 29, 2023 denial of benefits because Appellant had more countable assets than MassHealth allows. Exhibit 1. Appellant filed this appeal on October 19, 2023 and submitted documents in support. Exhibit 2. 130 CMR 610.015(B).

At hearing, MassHealth's representative reported that based on the asset verifications submitted in October 2023, Appellant's assets were within MassHealth's limit. Based on Appellant's gross monthly income of \$1,469, Appellant was eligible for MassHealth's Senior Buy-in program. Appellant's representative confirmed that Appellant had applied for the frail elder waiver and received a clinical screening to determine eligibility. The MassHealth representative testified that Appellant would be approved for MassHealth Standard if clinical eligibility for the waiver was approved.

As the asset issue in dispute at this appeal has been resolved, this appeal is dismissed. 130 CMR 610.035(A)(8), 130 CMR 610.051(B), 130 CMR 610.083(C).

Order for MassHealth

Issue a new eligibility notice reflecting the approval for Senior Buy-in/Medicare Savings Program.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Cynthia Kopka
Hearing Officer
Board of Hearings

cc:

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