# Office of Medicaid BOARD OF HEARINGS

#### **Appellant Name and Address:**



Appeal Decision: Denied Appeal Number: 2312140

**Decision Date:** 01/19/2024 **Hearing Date:** 12/20/2023

Hearing Officer: Thomas J. Goode

**Appearances for Appellant:** 

Pro se

Leslie Garcia, Tewksbury MEC



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: Denied Issue: Eligibility; Over 65

**Decision Date:** 01/19/2024 **Hearing Date:** 12/20/2023

MassHealth's Rep.: Leslie Garcia Appellant's Rep.: Pro se

Hearing Location: Remote Aid Pending: 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 November 8, 2023, MassHealth approved Appellant for Senior Buy In and denied Appellant's application for MassHealth Standard benefits because MassHealth determined that Appellant's income exceeds the limit for MassHealth Standard; MassHealth determined that Appellant may be able to establish eligibility for MassHealth benefits by meeting a six-month deductible of \$936 (130 CMR 520.028 and Exhibit 1). Appellant filed this appeal in a timely manner on November 27, 2023 (130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (130 CMR 610.032).

## **Action Taken by MassHealth**

MassHealth denied Appellant's application for MassHealth Standard benefits and calculated a sixmonth deductible of \$936.

#### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.028, in determining that Appellant's income exceeds the limit for MassHealth Standard for persons age 65 and older.

## **Summary of Evidence**

The MassHealth representative testified that a renewal application was mailed to Appellant in July 2023, and it was returned by Appellant on September 5, 2023. MassHealth issued a notice on November 8, 2023, informing Appellant that his income exceeds the limit for MassHealth Standard benefits, and that he was approved for MassHealth Senior Buy In (Exhibit 1). Appellant receives \$125.75 in monthly annuity payments and \$1,647 in gross monthly Social Security Income, for a total of \$1,772.75 in gross monthly income. The MassHealth representative confirmed that appellant is over the age of 65 and lives in a one-person household in the community and noted that the income limit for MassHealth Standard for persons aged 65 and older living in the community is 100% of the federal poverty level, or \$1,215.00 a month for a household size of one. Appellant's countable income exceeds \$1,215.00 a month and thus Appellant is not financially eligible for MassHealth Standard. MassHealth calculated a six-month deductible of \$936 (Exhibit 1). The MassHealth representative stated that Appellant filled out the supplemental form regarding his need for personal-care attendant ("PCA") services and MassHealth applied a PCA disregard of \$1,094.00 in calculating appellant's six-month deductible which must be met every 6 months before eligibility for MassHealth can be established. MassHealth also reviewed eligibility and income requirements through the Frail Elder Waiver and provided contact information for Elder Services through Senior Care of Gloucester at 978-281-1750.

Appellant verified that his income is correct and added that he would inquire about the Frail Elder Waiver through Senior Care of Gloucester.

## **Findings of Fact**

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

- 1. Appellant is over age 65 and lives in a one-person household in the community.
- 2. On September 5, 2023, MassHealth received Appellant's renewal application for MassHealth Standard benefits; Appellant also completed a supplemental form regarding his need for PCA services. MassHealth allowed a \$1,094.00 PCA income disregard.
- 3. On November 8, 2023, MassHealth issued a notice to Appellant informing him that his income exceeded the eligibility limit for MassHealth Standard benefits, and that he could establish eligibility for MassHealth Standard benefits by meeting a six-month deductible of \$960.
- 4. 100% of the federal poverty level is \$1,215.00 a month for a household size of one.
- 5. 133% of the federal poverty level is \$1,616.00 a month for a household size of one.

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6. Appellant receives \$125.75 in monthly annuity payments and \$1,647 in gross monthly Social Security Income, for a total of \$1,772.75 gross monthly income.

## **Analysis and Conclusions of Law**

MassHealth regulations at 130 CMR 515.000 through 520.000 provide the requirements for MassHealth eligibility for persons who are 65 or older (130 CMR 515.002). A noninstitutionalized person aged 65 or older may establish eligibility for MassHealth Standard coverage if countable income is less than or equal to 100% of the federal poverty level of \$1,215.00 per month (130 CMR 519.005). Appellant's gross unearned income totals \$1,772.75 per month. MassHealth allows a PCA deduction pursuant to 130 CMR 520.013(B) in determining countable income where an over 65 applicant is either "receiving personal-care attendant services paid for by the MassHealth agency, or [has] been determined by the MassHealth agency, through initial screening or by prior authorization, to be in need of personal-care attendant services" (130 CMR 520.013(B)). However, if the applicant's countable income exceeds 133% of the federal poverty level prior to applying the PCA disregard, then eligibility for MassHealth benefits must be established by meeting a six-month deductible as outlined below (130 CMR 520.013(B)(3); 130 CMR 520.028). Here, Appellant's countable income before accounting for any PCA deduction is \$1,772.75 per month, which exceeds 133% of the federal poverty level, or \$1,616.00 a month for a household of one. Accordingly, Appellant is not financially eligible for MassHealth Standard for community residents at this time, notwithstanding the PCA income deduction applied by MassHealth (130 CMR 520.012(B)(3)).

Therefore, Appellant must meet a six-month deductible before MassHealth eligibility can be established (130 CMR 519.005(B); 130 CMR 520.028). Appellant's countable income for the deductible calculation is \$678, which MassHealth reached by subtracting the PCA disregard of \$1,094.00 from Appellant's gross unearned monthly income of \$1,772. The MassHealth Income Standard applicable to an individual aged 65 or older residing in the community is \$522.00 per month for a household of one (130 CMR 520.030). The deductible is the total dollar amount of incurred medical expenses that an individual is responsible for before MassHealth eligibility is established (130 CMR 520.031). The deductible period is six months, and the deductible is determined by multiplying the excess monthly income by 6 (130 CMR 520.029, 520.030). The excess monthly income is the amount by which Appellant's countable income exceeds the MassHealth Income Standard (130 CMR 520.030). In the present case, Appellant's countable income of \$678 as calculated above exceeds the MassHealth income standard of \$522 by \$156, which is multiplied by 6 to determine the six-month deductible of \$936. (Exhibit 1, p. 3). Accordingly, Appellant is responsible for \$956 of incurred medical expenses for the six-month deductible period of September 1, 2023 to February 1, 2024 before eligibility for MassHealth Standard can be established (Exhibit 1). The MassHealth determination is upheld and the

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appeal is DENIED.

For information about the Frail Elder Waiver, Appellant can contact Elder Services through Senior Care of Gloucester at 978-281-1750.

### **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.

Thomas J. Goode Hearing Officer Board of Hearings

cc: Appeals Coordinator: Sylvia Tiar, Tewksbury MassHealth Enrollment Center

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