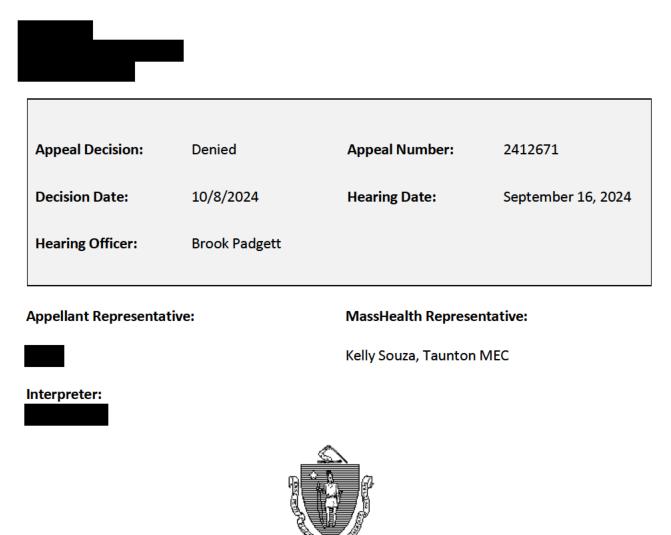
### Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:** 



Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid Board of Hearings 100 Hancock Street, 6<sup>th</sup> floor Quincy, MA 02171

## **APPEAL DECISION**

Appeal Decision:	Denied	lssue:	Community Eligibility Income 130 CMR 519.010
Decision Date:	10/8/2024	Hearing Date:	September 16, 2024
MassHealth Rep.:	K. Souza	Appellant Rep.:	
Hearing Location:	Taunton		

## Authority

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

### Jurisdiction

The appellant received a notice dated July 18, 2024 stating: You have been approved for MassHealth Senior Buy-In. Under MassHealth Senior Buy-In MassHealth will pay your Part A and Part B premiums, deductibles and co-insurance for each eligible member of your family. You have a more countable income than MassHealth Standard or Limited benefits allowed. You have a deductible of \$3,964.00 for MassHealth Standard eligibility. (Exhibit 1).

The appellant filed this appeal timely on August 15, 2024. (130 CMR 610.015(B); Exhibit 2).

Eligibility for coverage is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth determined the appellant's income exceeds the program limits for MassHealth Standard and Limited and determined the appellant was eligible for Senior Buy-In.

#### Issue

Did MassHealth correctly determine the appellant's MassHealth eligibility?

Page 1 of Appeal No.: 2412671

# **Summary of Evidence**

MassHealth testified the appellant is over 65 years old and a member of a family unit of one with income of \$1,297.00 (Social Security). To be eligible for MassHealth without a deductible the appellant's income must be under 100% of the federal poverty limit (FPL) for a household of one which currently is \$1,255.00. Because the appellant's income is over the 100% limit he cannot receive MassHealth without meeting a deductible. MassHealth testified the appellant has been approved for the Senior Buy-In and explained how the appellant's deductible amount of \$3,964.00 was calculated.

The appellant testified with the aid of an interpreter and stated he has many medical issues including diabetes, high blood pressure, and prostate problems. The appellant argued he needs MassHealth Standard because he needs personal care attendant (PCA) services and so he can continue to see his doctors and get his medications. The appellant stated his new income is from a cost of living increase which he would like to give back if it would allow him to go back to his old health insurance.

MassHealth responded that they would send the appellant a PCA application to complete to determine if he may be eligible for PCA services. MassHealth also stated the appellant was previously receiving Standard coverage only due to the public health emergency and when the emergency was lifted he was terminated from the program.

# **Findings of Fact**

- 1. The appellant is over 65 years of age and lives in a household of one. (Testimony).
- 2. The appellant has total monthly income of \$1,297.00 from Social Security. (Testimony).
- 3. The MassHealth Income Standard for a household of one is \$1,255.00.
- The appellant's deductible for MassHealth Standard and Limited eligibility is \$3,964.00 (\$1,297.00 monthly income \$20.00 disregard = \$1,277.00 \$522.00 (income standard) = \$755.00 \$94.24 (health insurance) = \$660.76 x 6 months = \$3,964.00). (Exhibit 1).

# Analysis and Conclusions of Law

The appellant is over 65 and lives in the community as a household of one with monthly income of \$1,297.00. The federal poverty limit (100%) for a family unit of one is \$1,255.00 a month. At the end of the public health emergency<sup>1</sup> MassHealth redetermined the appellant's eligibility for MassHealth

<sup>&</sup>lt;sup>1</sup> At the beginning of the COVID-19 public health emergency (PHE), the federal government issued continuous coverage requirements. Beginning March 2020, MassHealth put protections in place so that individuals receiving

Standard and found the appellant over the 100% income standard for MassHealth Standard coverage.

The regulations dictate that when an individual's monthly income is above 100% of the federal poverty limit, the unearned income, less the allowable \$20.00 unearned income disregard, the MassHealth Standard \$520.00 and the appellant's Medicare payment of \$94.24 is then multiplied by six to determine the individual's MassHealth deductible (\$1,297.00 - \$20.00 = \$1,277.00 - \$522.00 = \$755.00 - \$94.24 x 6 = \$3,964.00).

#### 130 <u>R 519.005</u>: Community Residents Aged 65 and Older

(B) <u>Financial Standards Not Met</u> Except as provided in 130 CMR 519.005(C), individuals whose income, assets, or both exceed the standards set forth in 130 CMR 519.005(A) may establish eligibility for MassHealth Standard by reducing their assets in accordance with 130 CMR 520.004, meeting a deductible as described at 130 CMR 520.028 et seq., or both.

and

#### 130 CMR 520.030: Calculating the Deductible

The deductible is determined by multiplying the excess monthly income by six. Excess monthly income is the amount by which the applicant's countable-income amount as described in 130 CMR 520.009 exceeds the MassHealth deductible-income standard.

MassHealth Senior Buy-In and Buy-In coverage is available to Medicare beneficiaries who are not eligible for MassHealth Standard, in accordance with 130 CMR 519.010.

#### 130 CMR 519.010: Medicare Savings Program (MSP)

#### Qualified Medicare Beneficiaries (QMB)

- (A) Eligibility Requirements. MSP (Buy-in) QMB coverage is available to Medicare beneficiaries who
  - (1) are entitled to hospital benefits under Medicare Part A;
  - (2) have a countable income amount (including the income of the spouse with whom he or she lives) that is less than or equal to 190% of the federal poverty level;

MassHealth correctly determined the appellant is over the income limit for MassHealth Standard and the deductible to establish his eligibility was properly calculated. MassHealth also correctly determined the appellant's income is less than 190% of the FPL (\$1,883.00) and he is eligible for Senior Buy-In benefits.<sup>2</sup> The regulations controlling income eligibility are unambiguous and must

Medicaid would generally not lose their coverage unless they voluntarily withdrew, moved out of state, or passed away. These continuous coverage requirements ended April 01, 2023. The Eligibility Operations Memorandum (EOM) 23-18 directs MassHealth to review members eligibility to ensure they still qualify for MassHealth benefits. Eligibility Operations Memorandum 23-18 MassHealth Policy Updates to Support Return to Normal Business Operations (April 01, 2023 - March 31, 2024).

<sup>&</sup>lt;sup>2</sup> 130 CMR 519.011(B).

be applied to all individuals.

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.

Brook Padgett Hearing Officer Board of Hearings

cc: MassHealth representative: Taunton MEC

Page 4 of Appeal No.: 2412671