

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2413450
Decision Date:	11/19/2024	Hearing Date:	10/4/2024
Hearing Officer:	Cynthia Kopka		

Appearances for Appellant:



Appearance for MassHealth:

Lynn Bloomquist, 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:	Long-term care, Patient-Paid amount
Decision Date:	11/19/2024	Hearing Date:	10/4/2024
MassHealth's Rep.:	Lynn Bloomquist	Appellant's Reps.:	Daughter and facility representative
Hearing Location:	Tewksbury (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

By notices dated August 15, 2024, and August 28, 2024, MassHealth approved Appellant's long-term care application effective March 4, 2024, with a patient paid amount (PPA) of \$2,280.02 for March 2024 and \$3,535.02 beginning April 2024. Exhibits 1, 4. Appellant filed this appeal in a timely manner on August 29, 2024. Exhibit 2. 130 CMR 610.015(B). Challenging the scope of assistance is a valid basis for appeal. 130 CMR 610.032.

Action Taken by MassHealth

MassHealth approved Appellant's long-term care application effective March 4, 2024, with a PPA of \$2,280.02 for March 2024, and \$3,535.02 beginning April 2024.

Issue

The appeal issue is whether MassHealth was correct in determining that Appellant did not qualify for a home maintenance needs allowance.

Summary of Evidence

The MassHealth representative appeared by phone and testified as follows. MassHealth received Appellant's long-term care application on December 13, 2023. Appellant, who is over the age of 65, admitted to the facility on [REDACTED] 2024, and requested this as the coverage start date. On August 15, 2024, MassHealth approved Appellant's application effective [REDACTED] 2024. Exhibit 1. This notice calculated Appellant's patient-paid amount (PPA) at \$3,535.02. *Id.* On August 28, 2024, MassHealth deducted \$1,255 from the March 2024 PPA, as Appellant was still in her home at the time of admission. Exhibit 4 at 30-33. The MassHealth representative testified that Appellant was not eligible for a six-month home maintenance needs allowance because the SC-1 form indicated that Appellant would remain in the facility longer than six months. *Id.* at 2. Additionally, on December 20, 2023, [REDACTED] the local elder services agency, screened Appellant for long-term care, not short-term care. *Id.* at 3.

Appellant's representatives appeared by phone and testified as follows. Appellant and her family had difficulty finding a nursing home with availability for Appellant. During the time Appellant waited for an open bed, Appellant's family resided with her in Appellant's apartment to provide care. When Appellant was admitted to the facility, Appellant's family paid rent for an additional two months (April and May 2024) to sort through Appellant and her late spouse's belongings, which had accumulated for over [REDACTED] years. Appellant's family seeks an abatement of the PPA of \$2,000 to cover the \$1,000 monthly rent for this period. Appellant's family was unaware of the difference between short-term and long-term at the time Appellant was screened in December 2023. The facility representative testified that she tried to have [REDACTED] adjust the screen, but too much time had passed by the time of MassHealth's approval. Appellant is currently still residing in the facility and doing well in the supportive environment.

Findings of Fact

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

1. MassHealth received Appellant's long-term care application on December 13, 2023.
2. On December 20, 2023, Appellant was screened eligible for long-term care by [REDACTED] Exhibit 4 at 3.
3. Appellant admitted to the facility on [REDACTED] 2024 and requested this as the coverage start date. *Id.* at 2.
4. The SC-1 form indicated that Appellant would remain in the facility longer than six months. *Id.*
5. On August 15, 2024, MassHealth approved Appellant's application effective [REDACTED] 2024, with PPA of \$3,535.02. Exhibit 1.

6. On August 28, 2024, MassHealth notified Appellant that her March 2024 PPA would be \$2,280.02, after deducting \$1,255. Exhibit 4 at 30.
7. On August 28, 2024, MassHealth notified Appellant that her PPA would increase to \$3,535.02 beginning April 2024. *Id.* at 32.
8. Appellant filed this timely appeal on August 29, 2024. Exhibit 2.
9. In 2024, the monthly FPL for a household of one was \$1,255.

Analysis and Conclusions of Law

Appellant seeks relief from MassHealth's calculation of the PPA for the two-month period (April and May 2024) that she paid rent on her former home after her admission.

In calculating the PPA, the regulations allow certain deductions to be made from an institutionalized member's income. 130 CMR 520.009. These deductions are listed at 130 CMR 520.026, which states that "[g]eneral income deductions must be taken in the following order: a personal-needs allowance; a spousal-maintenance-needs allowance; a family-maintenance-needs allowance for qualified family members; **a home-maintenance allowance**; and health-care coverage and incurred medical and remedial-care expenses" (emphasis added). The personal-needs allowance, \$72.80 per month, is set by regulation. 130 CMR 520.025.

The regulation regarding the home maintenance needs allowance is found at 130 CMR 520.026(D) (emphasis added):

(D) Deductions for Maintenance of a Former Home.

- (1) The MassHealth agency allows a deduction for maintenance of a home **when a competent medical authority certifies in writing that a single individual, with no eligible dependents in the home, is likely to return home within six months after the month of admission.** This income deduction terminates at the end of the sixth month after the month of admission regardless of the prognosis to return home at that time.
- (2) The amount deducted is the 100 percent federal-poverty-level income standard for one person.

Eligibility Operations Memo (EOM) 23-16 prohibits applicants or nursing facilities from requesting that a screening nurse change the nursing facility clinical approval of a level of care conversion screening so that the applicant can get a home maintenance needs allowance.

Here, Appellant was screened eligible for long-term, not short-term care, by [REDACTED] on December 20, 2023. Additionally, the SC-1 form submitted with the application indicated that Appellant's anticipated length of stay at the facility would be more than six months. Based on these facts, Appellant is not eligible for a home maintenance needs allowance to cover her rent for April and May 2024. Accordingly, 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.

Cynthia Kopka
Hearing Officer
Board of Hearings

[REDACTED]

[REDACTED]

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