

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



|                  |                   |                |            |
|------------------|-------------------|----------------|------------|
| Appeal Decision: | Denied            | Appeal Number: | 2416541    |
| Decision Date:   | 12/17/2024        | Hearing Date:  | 11/25/2024 |
| Hearing Officer: | Susan Burgess-Cox |                |            |

Appearance for Appellant:



Appearance for MassHealth:

Alyshia Guertin-Aguirre



*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

|                           |                                   |                          |                            |
|---------------------------|-----------------------------------|--------------------------|----------------------------|
| <b>Appeal Decision:</b>   | Denied                            | <b>Issue:</b>            | Eligibility; Excess Assets |
| <b>Decision Date:</b>     | 12/17/2024                        | <b>Hearing Date:</b>     | 11/25/2024                 |
| <b>MassHealth's Rep.:</b> | Alyshia Guertin-Aguirre           | <b>Appellant's Rep.:</b> | ██████                     |
| <b>Hearing Location:</b>  | All Parties Appeared by Telephone | <b>Aid Pending:</b>      | 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 September 6, 2024, MassHealth determined that the appellant has more countable assets than MassHealth Standard or Limited benefits allow. (130 CMR 520.003; 130 CMR 520.004; Exhibit 1). The appellant filed a timely appeal on October 28, 2024. (130 CMR 610.015; Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth determined that the appellant has more countable assets than MassHealth Standard or Limited benefits allow. (130 CMR 520.003; 130 CMR 520.004).

### Issue

Whether MassHealth was correct in determining that the appellant has more countable assets than MassHealth Standard or Limited benefits allow.

## **Summary of Evidence**

The appellant is a disabled adult over the age of 65 with a monthly income of \$1,259 from the Social Security Administration. In September 2024, MassHealth determined that the appellant is not eligible for MassHealth Standard or Limited because she has more countable assets than MassHealth allows for those programs. The MassHealth representative noted that the appellant's eligibility for MassHealth changed when she turned 65 as MassHealth looks at assets in determining eligibility for MassHealth Standard for individuals 65 years of age or older.

The MassHealth representative testified that the appellant has 10 bank accounts and a vehicle that the agency considered in determining eligibility. The notice states that the appellant has assets totaling \$318,737.90. Prior to the hearing, the appellant presented documents regarding the assets at issue. Upon reviewing the documents, MassHealth determined that the appellant had countable assets totaling \$198,628. The MassHealth representative testified that this still exceeds the program limit of \$2,000.

The MassHealth representative testified that there are no asset limits for the Medicare Savings Program or MassHealth CommonHealth. The MassHealth representative testified that the appellant is eligible for the Medicare Savings Program. The MassHealth representative testified that to be eligible for MassHealth CommonHealth, an individual over 65 needs to show that they are working at least 40 hours each month or meet a deductible unless they were enrolled in MassHealth CommonHealth for at least ten years prior to turning 65. The MassHealth representative testified that the appellant does not meet any of the eligibility requirements for MassHealth CommonHealth.

The appellant testified that she is not working. The appellant did not dispute the fact that she has over \$2,000 in assets. The appellant did not agree with the asset amount listed on the notice and wanted MassHealth to provide a subsequent notice regarding the current asset calculation that she would be entitled to appeal as well. The appellant argued that MassHealth unfairly inflated the asset amount but still acknowledged that her assets exceed the program limit of \$2,000.

## **Findings of Fact**

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

1. The appellant is a disabled adult over the age of 65 with a monthly income of \$1,259.
2. The appellant has over \$2,000 in assets.
3. At the time of the decision on appeal, MassHealth calculated assets totaling \$318,737.90.

4. As of the day of the hearing, MassHealth determined that the appellant had assets totaling \$198,628.
5. The appellant is not working.

## **Analysis and Conclusions of Law**

MassHealth administers and is responsible for the delivery of health-care services to MassHealth members. (130 CMR 515.002). The regulations governing MassHealth at 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for noninstitutionalized persons aged 65 or older, institutionalized persons of any age, persons who would be institutionalized without community-based services, as defined by Title XIX of the Social Security Act and authorized by M.G.L. c. 118E, and certain Medicare beneficiaries. (130 CMR 515.002). The appellant in this case aged 65 or older. Therefore, the regulations at 130 CMR 515.000 through 522.000 apply to this case. (130 CMR 515.002).

Pursuant to 130 CMR 520.003(A)(1), the total value of countable assets owned by or available to individuals applying for or receiving MassHealth Standard, Family Assistance, or Limited may not exceed \$2,000 for an individual. Countable assets are all assets that must be included in the determination of eligibility. (130 CMR 520.007). At the time of the eligibility decision, the appellant's assets exceeded the program limit of \$2,000. During the course of the appeal, MassHealth adjusted the total asset amount based upon information submitted by the appellant. The appellant's assets still exceed the program limit of \$2,000. The decision made by MassHealth regarding eligibility for MassHealth Standard is correct.

As noted at the hearing, individuals not eligible for MassHealth Standard may still be eligible to have MassHealth pay their Medicare premium if they qualify for a Medicare Savings Program (MSP). Effective November 24, 2023, MassHealth offers MSP coverage to: Qualified Medicare Beneficiaries (QMB), Specified Low-Income Medicare Beneficiaries (SLMB), and Qualifying Individuals (QI).

Pursuant to 30 CMR 519.010(A), the Medicare Savings Program (MSP) for Qualified Medicare Beneficiaries (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;
- (3) Effective until February 29, 2024, have countable assets less than or equal to two times the amount of allowable assets for Medicare Savings Programs as identified by the Centers for Medicare and Medicaid Services. Each calendar year, the allowable asset limits shall be made available on MassHealth's website. Effective March 1, 2024, MassHealth will disregard all assets or resources when determining eligibility for MSP-only benefits; and

- (4) meet the universal requirements of MassHealth benefits in accordance with 130 CMR 503.000 : Health Care Reform: MassHealth: Universal Eligibility Requirements or 130 CMR 517.000 : MassHealth: Universal Eligibility Requirements, as applicable.

MassHealth was correct in determining that the appellant is eligible for the MSP for QMB coverage as her income is less than 190% of the federal poverty level.

Under the MSP for QMB, MassHealth pays for Medicare Part A and Part B premiums, and deductibles and coinsurance under Medicare Parts A and B. (130 CMR 519.010(B)).

As noted by the MassHealth representative at hearing, as a disabled adult over the age of 65, the appellant may be eligible for MassHealth CommonHealth. Pursuant to 130 CMR 519.012(A)(1), MassHealth CommonHealth for working disabled adults is available to community residents 65 years of age and older if they are: permanently and totally disabled; employed at least 40 hours per month, or if employed less than 40 hours per month, have been employed at least 240 hours in the six-month period immediately preceding the month of receipt of the application or MassHealth's eligibility review; a citizen; and ineligible for MassHealth Standard. The appellant did not provide testimony or evidence of working at least 40 hours each month or being employed at least 240 hours in the six-month period immediately preceding the month of the eligibility review. Therefore, the appellant is not eligible for MassHealth CommonHealth at this time. As noted at hearing, if the appellant is able to provide MassHealth with evidence of working at least 40 hours each month, MassHealth can review the records and reconsider her eligibility.

This appeal is denied as all the eligibility decisions made by MassHealth are correct.

## **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.

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Susan Burgess-Cox  
Hearing Officer  
Board of Hearings

assHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129