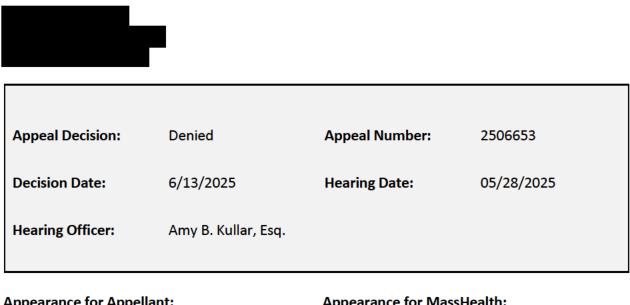
Office of Medicaid **BOARD OF HEARINGS**

Appellant Name and Address:



Appearance for Appellant: Pro se

Appearance for MassHealth:

Yenlinh Vu, Quincy MassHealth Enrollment Center



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:	Community eligibility – over 65; Deductible
Decision Date:	6/13/2025	Hearing Date:	05/21/2025
MassHealth's Rep.:	Yenlinh Vu	Appellant's Rep.:	Pro se
Hearing Location:	Quincy MassHealth Enrollment Center Room 2	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 March 5, 2025, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant's income was too high, and also apprised the appellant that he can meet a deductible in order to qualify for MassHealth. *See* Exhibit 1, 130 CMR 519.002, 130 CMR 519.010. The appellant filed this appeal in a timely manner on April 28, 2025. *See* 130 CMR 610.015(B) and Exhibit 2. Denial of assistance is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth determined that the appellant was not eligible for MassHealth Standard benefits because MassHealth determined that the appellant's income and/or assets were too high. Exhibit 1.

lssue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 519.000 and 130 CMR

520.000, in determining that the appellant was not eligible for MassHealth Standard benefits because MassHealth determined that his income and/or assets were too high, but that he can meet a six-month deductible in order to qualify for MassHealth. Exhibit 1.

Summary of Evidence

The MassHealth representative testified that the appellant is an adult over the age of 65, who lives in a household of one, and there was no disability attributed to the appellant. Testimony. The MassHealth representative testified that the MassHealth system detected an increase in the appellant's Social Security income this year, which subsequently raised the appellant's deductible amount.¹ A notice was sent to the appellant on March 5, 2025, relaying this information. Exhibit 1. The appellant will be able to keep his benefits so long as he pays the new deductible amount.

The appellant testified that the notice he received from MassHealth was indecipherable, and he was confused as to why the deductible was raised. The appellant testified that his Social Security income is \$1,900.00, and his rent is \$1,300.00, and with the raise in the deductible, he does not have enough money to pay his rent. The MassHealth representative responded by going over the numbers presented in the notice sent from MassHealth on March 5, 2025, to ensure the math was correct. The appellant's total unearned income is \$1,964.00. The appellant's monthly deductible for the months of November 2024 through April 2025 is \$1,442.00 per month, totaling \$8,652.00. Exhibit 1. The appellant confirmed that the numbers looked correct and did not provide any evidence that the total sum found by MassHealth was incorrect. The appellant remained confused as to why his Social Security income went up. It was explained to the appellant that MassHealth is based on federal Medicaid regulations, and the cost of living allowance Social Security increase ("COLA") goes up every year, raising the Federal Poverty Level (FPL) limit for MassHealth benefits. Testimony.

The appellant testified that he had an issue with the processing of his appeal. The appellant testified a MassHealth case worker called the appellant twice and left messages both times without leaving a phone number for the appellant to call back. The appellant stated he later got a call from Beth Israel Deaconess Medical Center with the MassHealth caseworker, and the caseworker allegedly attempted to intimidate the appellant out of appealing the MassHealth decision.² The appellant was offended by this and stated that it made it appear like the "deck is stacked against" him. Testimony. The MassHealth representative present at the hearing was not the same worker who called him prior to the appeal.

¹ A "deductible" is defined at 130 CMR 515.001 as the total dollar amount of incurred medical expenses that an applicant whose income exceeds MassHealth income standards must be responsible for before the applicant is eligible for MassHealth, as described at 130 CMR 520.028: Eligibility for a Deductible.

² The appellant did not recall the name of the MassHealth caseworker who called him.

Findings of Fact

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

- 1. The appellant is over age 65, lives in a one-person household, and is not disabled. Exhibit 1; Testimony.
- The appellant has a monthly income of \$1,964.00 derived from Social Security benefits. Exhibit 1; Testimony.
- 3. For 2025, 100% of the Federal Poverty Level (FPL) is \$1,304.00 a month for a household of 1. (2025 MassHealth Income Standards and Federal Poverty Guidelines).
- 4. For 2025, the Income Standard of the FPL is \$522.00 a month for a household of 1. (2025 MassHealth Income Standards and Federal Poverty Guidelines).
- 5. Based off the appellant's unearned total income and the Income Standard of the FPL for the household size, the deductible for the appellant is \$1,442.00. Exhibit 1.

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." <u>Andrews v. Division of Medical Assistance</u>, 68 Mass. App. Ct. 228. See also, <u>Fisch</u> v. <u>Board of Registration in Med.</u>, 437 Mass. 128, 131 (2002); <u>Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn.</u>, 11 Mass. App. Ct. 333, 334 (1981); <u>Haverhill Mun.</u> <u>Hosp. v. Commissioner of the Div. of Med. Assistance</u>, 45 Mass. App. Ct. 386, 390 (1998).

The regulations promulgated at 130 CMR 515.000 through 520.000 provide the requirements for MassHealth eligibility for persons aged 65 and older. (130 CMR 515.002). A Community Resident aged 65 and older may establish eligibility for MassHealth Standard coverage if the countable income is less than or equal to 100% of the Federal Poverty Level pursuant to 130 CMR 519.005:

519.005: Community Residents 65 Years of Age or Older

(A) Eligibility Requirements. Except as provided in 130 CMR 519.005(C), noninstitutionalized individuals 65 years of age and older may establish eligibility for MassHealth Standard coverage provided they meet the following requirements:

(1) the countable income amount, as defined in 130 CMR 520.009: Countable-income Amount, of the individual or couple is less than or equal to 100% of the federal poverty level; and (2) the countable assets of an individual are \$2,000 or less, and those of a married couple living together are \$3,000 or less.

(B) Financial Standards Not Met. 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: Asset Reduction, meeting a deductible as described at 130 CMR 520.028: Eligibility for a Deductible through 520.035: Conclusion of the Deductible Process, or both.

For 2025, 100% of the FPL for a household of one is \$1,304.00 per month. The appellant's gross unearned income totals \$1,984.00 per month. This exceeds 100% of the FPL for 2025. Pursuant to 130 CMR 520.013(A), a deduction is applied:

520.013: Community Unearned-income Deductions

In addition to business expenses described at 130 CMR 520.010, the MassHealth agency allows the deductions listed below from the total gross unearned income. These deductions do not apply to the income of a community spouse described at 130 CMR 520.026(B). The deductions allowed from the total gross unearned income are the following:

(A) a deduction of \$20 per individual or married couple; or

(B) in determining eligibility for MassHealth Standard, a deduction that is equivalent to the difference between the applicable MassHealth deductible-income standard at 130 CMR 520.030 and 133% of the federal poverty level. This deduction includes, and is not in addition to, the \$20 disregard.

(1) This deduction from gross unearned income is allowed only for persons who

(a) are 65 years of age and older;

(b) are receiving personal-care attendant services paid for by the MassHealth agency, or have been determined by the MassHealth agency, through initial screening or by prior authorization, to be in need of personal-care attendant services; and

(c) prior to applying the deduction at 130 CMR 520.013(B), have countable income that is over 100% of the federal poverty level.

(2) The MassHealth agency will redetermine eligibility without this deduction if

(a) after 90 days from the date of the MassHealth agency eligibility approval notice, the person is not receiving personal-care attendant services paid for by the MassHealth agency or has not submitted, upon request from the MassHealth agency, proof of efforts to obtain personal-care attendant services paid for by the MassHealth agency; or

(b) the MassHealth agency denies the prior-authorization request for personal-care attendant services.

(3) If countable income, prior to applying the deduction at 130 CMR 520.013(B), is greater than 133% of the federal poverty level, eligibility is determined under 130 CMR 519.005(B): Financial Standards Not Met.

The appellant's countable unearned income, once the \$20 deduction is applied, calculates to \$1,964.00, which exceeds 100% of the FPL for a household for 2025. The appellant is not financially eligible for MassHealth Standard at this time, based on countable income.

The appellant, as a community-based individual, whose countable-income amount exceeds the 100% federal poverty level income standards, is eligible for a deductible pursuant to 130 CMR 520.028(B). The deductible period is a six-month period that starts on the first day of the month of application or may begin up to three months before the first day of the month of applicant is eligible for this period of retroactive eligibility only if the applicant incurred medical expenses covered by MassHealth and was otherwise eligible. (130 CMR 520.029)

The method of derivation of a deductible is codified within the regulations at 130 CMR 520.030:

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 DEDUCTIBLE-INCOME STANDARDS			
Number of	Monthly-Income Standard for	Monthly-Income	
Persons	Community Residents	Standard for Long-	
		term-care-facility	
		<u>Residents</u>	
1	\$522	\$72.80	
2	\$650		

The appellant's countable income for the deductible calculation is \$1,964.00. The MassHealth Income Standard applicable to an individual age 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 6 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 the appellant's countable income exceeds the MassHealth Income Standard. 130 CMR 520.030. In the present case, the appellant's countable income of \$1,964.00, as calculated above, exceeds the MassHealth income standard of \$522.00. *This total (\$1,964.00 - \$522) equates to \$1,442.00.* This amount is multiplied by 6 to determine the 6-month deductible of \$8,652.00. Exhibit 1.

Pursuant to the regulations, the appellant is responsible for \$8,652.00 of incurred medical expenses for the 6-month deductible period of November 2024 to April 2025 before eligibility for MassHealth Standard can be established. Based upon this record, the appellant has not met the burden, by a preponderance of evidence, to show the invalidity of the administrative determination of MassHealth.

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.

Amy B. Kullar, Esq. Hearing Officer Board of Hearings

cc: MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171