



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
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MassHealth  
Eligibility Letter 158  
January 1, 2007

**TO:** MassHealth Staff

**FROM:** Beth Waldman, Medicaid Director *BW*

**RE:** **Annual Change to the Federal Standard Maintenance Allowance**

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This letter transmits revised regulations about the annual increase to the federal standard maintenance allowance from \$1,604 to \$1,650. The revision to 130 CMR 520.026(C)(2) was inadvertently omitted from Eligibility Letter 154, which changed this figure in the minimum-monthly-maintenance-needs allowance at 130 CMR 520.026(B)(1)(a).

These emergency regulations are effective July 1, 2006.

**MANUAL UPKEEP**

<u>Insert</u>	<u>Remove</u>	<u>Trans. By</u>
520.026 (2 of 5)	520.026 (2 of 5)	E.L. 145

Trans. by E.L. 158

**MASSHEALTH  
FINANCIAL ELIGIBILITY**

**Chapter 520  
Page 520.026**

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(c) a dependent parent — a parent of either spouse who lives with the community spouse and who is claimed as a dependent by either spouse for income-tax purposes under the Internal Revenue Code; and

(d) a dependent sibling — a brother or sister of either spouse (including a half-brother or half-sister) who lives with the community spouse and who is claimed as a dependent by either spouse for income-tax purposes under the Internal Revenue Code.

(2) The deduction for family-maintenance needs is one-third of the amount by which the federal standard maintenance allowance exceeds the monthly gross income of the family member. The federal standard maintenance allowance is \$1,650.

(D) Deductions for Maintenance of a Former Home.

(1) MassHealth 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.

(E) Deductions for Health-Care Coverage and Other Incurred Expenses.

(1) Health-Insurance Premiums or Membership Costs. The MassHealth agency allows a deduction for current health-insurance premiums or membership costs when payments are made directly to an insurer or a managed-care organization.

(2) Incurred Expenses.

(a) After the applicant is approved for MassHealth, the MassHealth agency will allow deductions for the applicant's necessary medical and remedial-care expenses. These expenses must not be payable by a third party. These expenses must be for medical or remedial-care services recognized under state law but not covered by MassHealth.

(b) These expenses must be within reasonable limits as established by the MassHealth agency. The MassHealth agency considers expenses to be within reasonable limits provided they are:

(i) not covered by the MassHealth per diem rate paid to the long-term-care facility; and

(ii) certified by a treating physician or other medical provider as being medically necessary.