



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth

Eligibility Operations Memo 24-06

DATE: May 2024

TO: MassHealth Eligibility Operations Staff

FROM: Heather Rossi, Deputy Chief Operating Officer, Eligibility Policy and Implementation

**RE: Process for Requesting a Hardship Waiver for a Period of Ineligibility
Due to a Disqualifying Transfer of Resources**

Background

In accordance with federal Medicaid law and guidance, MassHealth may waive a period of ineligibility due to a disqualifying transfer of resources if a period of ineligibility would cause the applicant or member undue hardship by putting them at risk of serious deprivation.

MassHealth regulations at 130 CMR 520.019(L) provide the requirements and process criteria for a hardship waiver request.

This memo provides updates to the submission process and the MassHealth review of a request for a hardship waiver.

Submission Process

Requests for hardship waivers must meet the following criteria.

- Requests must be submitted within 15 days of the date of the MassHealth notice that informed the applicant or member of a period of ineligibility.
- The submission must be made by the applicant, member, or their duly appointed Authorized Representative.
- A nursing facility may also file a request with the express written consent of the nursing facility resident or their Authorized Representative, or by the Appeal Representative at the hearing held on the disqualifying transfer.
- The request must include a completed [MassHealth Request for a Hardship Waiver of a Period of Ineligibility](#). The request must include all documentation to be considered in support of the hardship waiver request.
- Mail the request to MassHealth Enrollment Center, PO Box 4405, Taunton, MA 02780-0968 or fax it to (857) 323-8300.

MassHealth Review

The Hardship Committee will review the request to determine if

- the request was received on time;
- the request was submitted by an authorized individual; and
- the circumstances outlined in the request and the supporting documentation meet any or all requirements of 130 CMR 520.019(L).

Notice of Decision

MassHealth will make a decision about a hardship waiver within 30 calendar days of receipt of the written request or within 30 days of the hearing decision about the period of ineligibility, whichever is later. MassHealth may extend this 30-day period if additional documentation or information is requested or if extenuating circumstances, as determined by MassHealth, require additional time.

Notice of the decision will be mailed to the applicant or member, their duly appointed Authorized Representative, and, if appropriate, the individual who requested the hardship waiver.

Appeal Rights

If a waiver is denied, the applicant or member may request an administrative hearing pursuant to 130 CMR 610.000.

The nursing facility resident's request for consideration of undue hardship does not limit their right to request a fair hearing for reasons other than undue hardship.

Additional Information

There are no previous, related EOMs about the hardship waiver process.

This EOM provides subregulatory guidance related to 130 CMR 520.019(L) and the request for a Waiver of the Period of Ineligibility Due to Undue Hardship.

Questions

If you have questions about this memo, please have your MEC designee contact the Policy Hotline.