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PI-14-02  
REF: PI 13-02  
PI-11-13

**PROGRAM INSTRUCTION**

TO: Aging Service Access Point Executive Directors  
FROM: Ann L. Hartstein *ALH*  
DATE: January 29, 2014  
RE: Revised Cost Share Table for the Home Care Program

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**Purpose:**

*This Program Instruction (PI) transmits the Financial Eligibility Guidelines that take effect on February 1, 2014 for the Home Care Program, and sets out the voluntary co-payment, cost sharing, and Respite Care co-payment schedules.*

**Background:**

The U.S. Social Security Administration recently announced a 1.5 percent Cost of Living Allowance (COLA) increase from calendar year 2013. Accordingly, monthly Social Security and SSI benefits will increase 1.5 percent in calendar year 2014.

As required under 651 CMR 3.03(3)(a), the Executive Office of Elder Affairs (EOEA) has adjusted the Financial Eligibility Guidelines to incorporate the COLA percentage increase. By increasing these Financial Eligibility Guidelines, EOEA will prevent any unintended

displacement of consumers who would otherwise become ineligible due to increases in family income.

**Revised Co-payment and Cost Share Schedule:**

EOEA will continue to request a voluntary donation from consumers whose income does not exceed the amounts set forth in the Voluntary Copayment section of the Financial Eligibility Guidelines. MassHealth members with any coverage type whose income is at or below 300% of Supplemental Security Income Federal Benefit Rate (SSI FBR) are exempt from all co-payments, including voluntary co-payments. ASAPS will continue to have the ability to waive and reduce fees based on hardships that impact the consumer's ability to pay.

**Effective Date:**

The effective date of this Program Instruction is February 1, 2014.

**Contact:**

If you have questions about this PI, please contact Mary DeRoo, Director of Home and Community Programs at [Mary.deroo@ma.state.us](mailto:Mary.deroo@ma.state.us).

**MASSACHUSETTS HOME CARE PROGRAM  
VOLUNTARY CO-PAYMENT AND COST SHARING SCHEDULES**

Issue Date: 2/1/14

Effective Date: 2/1/14

**VOLUNTARY CO-PAYMENT:**

<u>Family size</u>	<u>Annual Gross Income</u>	<u>Voluntary Monthly Co-Payment</u>
1	\$11,682 or less	\$ 9.00
2	\$15,743 or less	\$ 17.00

**COST SHARING FOR HOME CARE:**

<u>One Person</u>		<u>Monthly</u>		<u>Two Person Family</u>		<u>Monthly</u>	
<u>Annual Gross Income</u>		<u>Co-payment</u>		<u>Annual Gross Income</u>		<u>Co-payment</u>	
\$11,683 -	\$14,251	\$	9.00	\$15,744 -	\$19,640	\$	17.00
\$14,252 -	\$16,814	\$	12.00	\$19,641 -	\$23,607	\$	21.00
\$16,815 -	\$18,571	\$	25.00	\$23,608 -	\$25,605	\$	48.00
\$18,572 -	\$19,900	\$	36.00	\$25,606 -	\$27,597	\$	72.00
\$19,901 -	\$21,227	\$	45.00	\$27,598 -	\$29,595	\$	85.00
\$21,228 -	\$22,550	\$	63.00	\$29,596 -	\$31,594	\$	101.00
\$22,551 -	\$23,879	\$	83.00	\$31,595 -	\$33,586	\$	110.00
\$23,880 -	\$25,202	\$	115.00	\$33,587 -	\$35,584	\$	128.00
\$25,203 -	\$26,561	\$	130.00	\$35,585 -	\$37,583	\$	140.00

**COST SHARING FOR RESPITE CARE:**

<u>One Person</u>		<u>Monthly</u>		<u>Two Person Family</u>		<u>Monthly</u>	
<u>Annual Gross Income</u>		<u>Co-payment</u>		<u>Annual Gross Income</u>		<u>Co-payment</u>	
\$26,562 -	\$28,781		50%	\$37,584 -	\$38,855		50%
\$28,782 -	\$30,940		55%	\$38,856 -	\$41,012		55%
\$30,941 -	\$33,099		60%	\$41,013 -	\$43,174		60%
\$33,100 -	\$35,257		65%	\$43,175 -	\$45,331		65%
\$35,258 -	\$37,414		70%	\$45,332 -	\$47,489		70%
\$37,415 -	\$39,576		75%	\$47,490 -	\$49,648		75%
\$39,577 -	\$41,731		80%	\$49,649 -	\$51,807		80%
\$41,732 -	\$43,890		85%	\$51,808 -	\$53,965		85%
\$43,891 -	\$46,051		90%	\$53,966 -	\$56,123		90%
\$46,052 -	\$48,208		95%	\$56,124 -	\$58,284		95%
\$48,209	and over		100%	\$58,285 -	and over		100%