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PI-19-01
REF: PI-18-01

PROGRAM INSTRUCTION

TO: Aging Services Access Points Executive Directors
Aging Services Access Points Program Managers

FROM: Secretary Alice F. Bonner 

DATE: January 15, 2019

RE: Revised Cost Share Table for the Home Care Program

Purpose:

This Program Instruction (PI) transmits the Financial Eligibility Guidelines that take effect on March 1, 2019 for the Home Care Program, and sets out the voluntary co-payment, cost sharing, and over-income co-payment schedules.

Background:

The U.S. Social Security Administration announced a 2.8 percent Cost of Living Adjustment (COLA) increase on October 11, 2018 for calendar year 2019. Accordingly, monthly Social Security and SSI benefits will increase 2.8 percent in calendar year 2019.

As required under 651 CMR 3.04(4)(b), the Executive Office of Elder Affairs (EOEA) has adjusted the Financial Eligibility Guidelines to incorporate the COLA 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. Aging Services Access Points (ASAPS) will continue to have the ability to waive and reduce fees based on hardships that impact the consumer's ability to pay in accordance with 651 CMR 3.06(1).

Effective Date:

The effective date of this Program Instruction is March 1, 2019.

Contact:

If you have questions about this PI, please contact Shannon Philbrick, Home Care Program Coordinator at: Shannon.Philbrick@massmail.state.ma.us.

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

Issue Date: 1/15/19

Effective Date: 3/01/19

VOLUNTARY CO-PAYMENT:

Family size	Annual Gross Income	Voluntary Monthly Co-Payment
1	\$12,646 or less	\$10.00
2	\$17,030 or less	\$18.00

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>		
\$12,647	-	\$15,242	\$10.00	\$17,031	-	\$21,007	\$18.00
\$15,243	-	\$17,984	\$13.00	\$21,008	-	\$25,250	\$23.00
\$17,985	-	\$19,864	\$27.00	\$25,251	-	\$27,386	\$52.00
\$19,865	-	\$21,285	\$39.00	\$27,387	-	\$29,517	\$78.00
\$21,286	-	\$22,704	\$49.00	\$29,518	-	\$31,654	\$92.00
\$22,705	-	\$24,119	\$69.00	\$31,655	-	\$33,792	\$110.00
\$24,120	-	\$25,541	\$90.00	\$33,793	-	\$35,922	\$120.00
\$25,542	-	\$26,955	\$125.00	\$35,923	-	\$38,061	\$139.00
\$26,956	-	\$28,410	\$141.00	\$38,062	-	\$40,199	\$152.00

COST SHARING FOR OVER INCOME:

<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>		
\$28,411	-	\$30,783	50%	\$40,200	-	\$41,560	50%
\$30,784	-	\$33,092	55%	\$41,561	-	\$43,866	55%
\$33,093	-	\$35,402	60%	\$43,867	-	\$46,179	60%
\$35,403	-	\$37,710	65%	\$46,180	-	\$48,486	65%
\$37,711	-	\$40,017	70%	\$48,487	-	\$50,794	70%
\$40,018	-	\$42,330	75%	\$50,795	-	\$53,102	75%
\$42,331	-	\$44,634	80%	\$53,103	-	\$55,412	80%
\$44,635	-	\$46,944	85%	\$55,413	-	\$57,720	85%
\$46,945	-	\$49,257	90%	\$57,721	-	\$60,028	90%
\$49,258	-	\$51,563	95%	\$60,029	-	\$62,340	95%
\$51,564	-	and over	100%	\$62,341	-	and over	100%