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**Online Guide Transmittal 2024-18**  
**March 6, 2024**

**To:** Department of Transitional Assistance Staff

**From:** Sarah Stuart, Associate Commissioner for Local Implementation and Special Populations  
*KIP for SS*

**Re:** **SNAP: System Enhancements Related to Medical Deduction (Phase One)**

**Overview**

In June 2022, Online Guide Transmittal (OLGT) [2022-49](#) outlined the provisions of the Standard Medical Deduction (SMD) waiver. Under the SMD waiver, elderly and/or disabled clients can self-declare medical expenses if the total monthly amount is less than (or equal to) \$190 and have the SMD of \$155 applied to the SNAP calculation.

To support these efforts, maximize households' total SNAP benefits, and streamline the medical expense process for eligibility staff, BEACON Medical Expense/Health Insurance pages will undergo significant enhancements. These enhancements will also repair various system defects and make it easier for staff to apply existing regulations related to medical expenses.

In addition, related enhancements will be made to the DTA Connect My Info page (detailed in [OLGT 2024-17](#)).

The Department will deliver these enhancements in multiple phases. This will be Phase One and is anticipated to be available BEACON beginning March 8, 2024. Enhancements made in subsequent phases will be detailed in future OLGs.

## **Purpose**

The purpose of this Online Guide Transmittal is to advise staff about the upcoming BEACON enhancements to support the SNAP Medical Deduction, and the corresponding updates to the Online Guide. In addition, this OLG is being released early to allow staff advanced notice of the changes. Pertinent OLG pages related to the SMD waiver and non-recurring medical expenses will also be released early for staff to review in advance. The remaining OLG pages will be directly deployed into the OLG for March 8, 2024.

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## **Phase One Changes**

Phase One includes the following enhancements and procedural updates:

- The Health Insurance page now includes an updated dropdown list of insurers, new fields for Amount and Frequency, restrictions on selecting multiple benefit types for one insurer, and a fix that ensures health insurance records create a VC-1 item.
  - The Medical Expense page now includes a new dropdown list of medical types and subtypes to align with the Medical Expense Flyer, Out-of-Pocket Medical Expense Form, and the enhancements to the DTA Connect “My Info” page.
  - The Medical Expense page now includes Yes-No radio buttons for indicating whether an expense is recurring or nonrecurring. BEACON will automatically complete this field based on the selection in the Frequency dropdown. BEACON will select Yes only if the listed Frequency is “One Time.”
  - For a nonrecurring medical expense, there are now fields for indicating the start date, end date, and the number of months over which the expense is prorated. To flag an expense as non-recurring, the Frequency now includes the selection: One Time.
  - A new dropdown item, SMD Verified, was added to the Medical Expense and Health Insurance pages to allow for the application of the SMD in a specific instance.
  - BEACON will automatically remove nonrecurring medical expenses prior to end date and notice the client when there is a change in SNAP benefit.
  - TPL Amount and TPL Frequency was removed from the Medical Expense page. The page also no longer includes the radio buttons for Allowable Cash and Allowable Amounts (TAFDC, EAEDC, and EA).
  - Fixed various system defects that had resulted in incorrect rounding, misapplying the medical deduction to ineligible household members, and the EBC calculation not capturing insurance premiums entered under certain categories.
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**Phase One  
Changes  
(Continued)**

- “Self-Declaration” is now included in the list of verification options for the Health Insurance and the Medical Expense items in the BEACON Verification tab.
  - Staff can now use the Letter Request feature to centrally mail a client the Out-of-Pocket Medical Expenses form.
  - Staff may now consider non-recurring medical expenses incurred over the last 36 months, rather than only 12 months.
  - Clients may opt to average non-recurring medical expenses for up to 36 months, rather than for up to 24 months.
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**Implementation**

To align with the recalculations for SSA COLA and 2024 Federal Poverty Guidelines (effective February 1, 2024), all existing SNAP clients with medical expenses on record were recalculated using the correct rounding rules. If the recalculation impacted any client’s benefit level (most likely due to the change in the way BEACON rounds the medical costs), they received a standard calculation notice informing them of the change in benefit amount for February’s issuance cycle.

With the implementation of these enhancements, BEACON will convert existing medical expense records to fit the updated mapping of the Medical Expense/Health Insurance pages as much as possible. However, the updated mapping will inevitably leave certain data fields incomplete or obsolete for some existing medical expense/health insurance records. For example, as Subtype is a new field in the Medical Expense page and was not collected before the enhancements, the Subtype for existing medical records will default to “Not Applicable.”

BEACON will not allow staff to update any medical expenses that were entered before the current enhancements. If the client is reporting (verbally to a case manager, through DPC or on their recertification) a change to an existing medical expense that does not include a Subtype, that record will need to be ended and a new one created with entries in all the required fields. Please note, clients will still be able to update existing medical expense records with no Subtype through the DTA Connect “My Info” page. This prevents additional barriers for clients and potential duplication of medical expenses.

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**Implementation  
(Continued)**

**Example:** A client has an existing record with the old “Prescriptions/Medication” Type of \$40 per month. After the BEACON conversion takes place, the Type will remain the same and the Subtype will display as “Not Applicable”. The client calls the assistance line and self-declares that their prescriptions are now \$60 per month. The case manager must end the existing record and add a new record with “Pharmacy” Type, “Prescriptions” Subtype, Amount \$60, and Frequency Monthly.

In the Health Insurance page, the Benefit Types MEDEX Sapphire, Core, and Bronze will not be available for selection unless “Medicare Supplement (Medigap)” is selected for Insurer.

For active health insurance records, the new Frequency field will display “Monthly” and the existing amount in the *Monthly premium amount* field will display in the new Amount field.

Lastly, BEACON will prompt staff to end all existing health insurance records with multiple benefit types and to re-enter them as separate records for each insurer and benefit type combination.

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**New Online  
Guide Pages**

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Standard Medical Deduction Waiver

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**Revised Online  
Guide Pages**

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Medical Expense Deduction During Review Periods

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Entering Medical Expense Data in BEACON

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**Revised Online  
Guide Pages  
(Continued)**

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Entering Health Insurance Data in BEACON

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Health Insurance Costs

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** How to Discuss Medical Expenses with Clients

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Transportation Related Costs

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Overview of Medical Expense Deduction

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Medicare Part C and Part D (Formerly “Medicare Part C”)

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**Revised Online  
Guide Pages  
(Continued)**

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Medical Expenses Claimed by Subsidized Housing Tenants

**Topic:** SNAP  
**Book:** Certification Types  
**Chapter:** Simplified Reporting  
**Page:** Simplified Reporting Recertification

**Topic:** SNAP  
**Book:** Certification Types  
**Chapter:** Simplified Reporting  
**Page:** Simplified Reporting – Interim Report

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Non-Recurring Medical Expenses

**Topic:** SNAP  
**Book:** Expenses and Deductions  
**Chapter:** Health Insurance/Medical Expenses  
**Subchapter:** Medical Expenses  
**Page:** Out of Pocket Medical Expenses

**Topic:** COVID-19  
**Page:** Standard Medical Deduction Waiver

**Topic:** Business Process (BP)  
**Book:** Procedures  
**Chapter:** Document Handling  
**Page:** Saving Documents as PDF

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**Questions**

If you have any policy or procedural questions, after conferring with the appropriate TAO personnel, please have your Systems Information Specialists or TAO management email them to [DTA.Procedural Issues](#).

Systems issues should be directed to the Systems Support Help Desk.

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