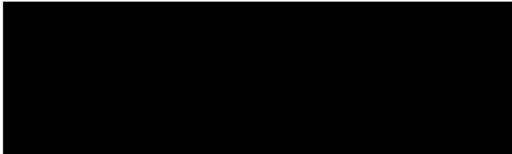


**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



**Appeal Decision:** Denied

**Appeal Number:** 2202257

**Decision Date:** 5/19/22

**Hearing Date:** 04/27/2022

**Hearing Officer:** Sara E. McGrath

**Appearances for Appellant:**



**Appearances for MassHealth:**

Georges Jorcelin, Charlestown MassHealth



*Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Office of Medicaid  
Board of Hearings  
100 Hancock Street  
Quincy, MA 02171*

## APPEAL DECISION

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility
<b>Decision Date:</b>	5/19/22	<b>Hearing Date:</b>	04/27/2022
<b>MassHealth Rep.:</b>	Georges Jorcelin	<b>Appellant Rep.:</b>	Pro se
<b>Hearing Location:</b>	Board of Hearings (Remote)		

### Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

### Jurisdiction

Through a notice dated March 2, 2022, MassHealth notified the appellant that she is not eligible for MassHealth benefits (Exhibit 1). The appellant filed a timely appeal on March 24, 2022 (Exhibit 1). The denial of assistance is a valid ground for appeal (130 CMR 610.032(A)).

### Action Taken by MassHealth

MassHealth notified the appellant that she is not eligible for MassHealth benefits.

### Issue

The appeal issue is whether MassHealth was correct in determining that the appellant is not eligible for MassHealth benefits?

## **Summary of Evidence**

The MassHealth representative appeared at hearing by telephone and testified in summary as follows: The appellant has two cases pending in MassHealth's computer system. One case, the older of the two, shows an active MassHealth Standard benefit that is currently protected during the public health emergency related to the COVID-19 pandemic.<sup>1</sup> The appellant qualified for this coverage by reporting that she is a medically frail individual. The second case was created when the appellant submitted a MassHealth application on March 2, 2022. On that application, the appellant reported income of \$620 per week, which corresponds to monthly income that equals 232.22% of the federal poverty level for a household size of one. The MassHealth representative explained that this monthly income exceeds the MassHealth program limits, but would allow the appellant to enroll in a ConnectorCare plan through the Massachusetts Health Connector (Type 3B).

The appellant appeared at hearing by telephone, and explained that she is single and lives alone. She is solely responsible for rent, and cannot find a cheaper housing option. She has many additional expenses, including food, toiletries, transportation, and other miscellaneous needs. She also has a car payment, automobile insurance premium expenses, and gas expenses. Further, she receives daily outpatient treatment, as well as regular counseling sessions, all of which would cost over \$500 per month, even with a ConnectorCare plan. She explained that she does not incur costs for any entertainment, such as cable television. She cannot afford all of these expenses and really needs MassHealth coverage. The appellant submitted a letter and verification of some of her expenses (Exhibit 1).

## **Findings of Fact**

Based on a preponderance of the evidence, I find the following facts:

1. The appellant is currently receiving MassHealth Standard coverage as a medically frail individual; this coverage is being protected during the public health emergency related to the COVID-19 pandemic.
2. The appellant is a single individual with no dependents.
3. On March 2, 2022, the appellant submitted a MassHealth application and reported income of \$620 per week; this income corresponds to monthly income that equals 232.22% of the federal poverty level for a household size of one.
4. On March 2, 2022, MassHealth notified the appellant that she is not eligible for MassHealth benefits.

---

<sup>1</sup> The MassHealth representative stated that the public health emergency has been extended through July 2022, but that the specific end date has not been determined.

5. On March 24, 2022, the appellant filed an appeal with the Board of Hearings.

### **Analysis and Conclusions of Law**

130 CMR 505.002(J) sets forth all of the eligibility requirements for MassHealth Standard for individuals who are medically frail, and provides as follows:

(J) Eligibility Requirements for Individuals Who Are Medically Frail. An individual who is medically frail is eligible for MassHealth Standard if the individual

- (1) is younger than 65 years old;
- (2) is medically frail as defined at 130 CMR 505.008(F);
- (3) has modified adjusted gross income of the MassHealth MAGI household of less than or equal to 133% of the federal poverty level;
- (4) is a citizen as described at 130 CMR 504.002: U.S. Citizens or qualified noncitizen as described at 130 CMR 504.003(A)(1): Qualified Noncitizens; and
- (5) has been determined to meet the eligibility criteria for MassHealth CarePlus and has elected to receive MassHealth Standard benefits.

The appellant has not demonstrated that her modified adjusted gross income is less than or equal to 133% of the federal poverty level. The appellant did not dispute MassHealth's determination that her monthly household income equals 232.22% of the federal poverty level. Because this amount exceeds 133% of the federal poverty level, the appellant is not eligible for MassHealth Standard coverage (130 CMR 520.002(J)(3)). The appellant has also not demonstrated that she is eligible for any other MassHealth coverage type at this time (130 CMR 505.000). The appellant has not demonstrated that MassHealth's determination was made in error.<sup>2</sup>

This appeal is denied.

### **Order for MassHealth**

None.

---

<sup>2</sup> MassHealth's determination here does not affect her active MassHealth Standard coverage that will stay in effect during the public health emergency.

## **Notification of Your Right to Appeal to Court**

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

---

Sara E. McGrath  
Hearing Officer  
Board of Hearings

cc: Charlestown MassHealth Enrollment Center