# Office of Medicaid BOARD OF HEARINGS

#### **Appellant Name and Address:**



Appeal Decision: Dismissed Appeal Number: 2303836

**Decision Date:** 6/9/2023 **Hearing Date:** 06/08/2023

Hearing Officer: Paul C. Moore

Appearance for Appellant:

Pro se (by telephone)

Appearance for MassHealth:

Monica Ramirez, Quincy MassHealth

Enrollment Center (by telephone)



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

## APPEAL DECISION

Appeal Decision: Dismissed Issue: Eligibility

Decision Date: 6/9/2023 Hearing Date: 06/08/2023

MassHealth Rep.: Monica Ramirez Appellant Rep.: Pro se

**Hearing Location:** Board of Hearings

(remote)

## Authority

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

#### Jurisdiction

By a notice dated May 3, 2023, MassHealth apprised the appellant that she is not eligible for MassHealth benefits because her income is too high, and that her coverage would terminate on May 17, 2023 (Exh. 1). The appellant filed a timely appeal of this notice with the Board of Hearings on May 10, 2023 (Exh. 2). Denial or termination of assistance is valid grounds for appeal to BOH (130 CMR 610.015).

#### Action Taken by MassHealth

MassHealth determined that the appellant's income is too high for her to continue to qualify for MassHealth.

#### Issue

The issue on appeal is whether MassHealth correctly determined that the appellant no longer qualifies for MassHealth.

#### **Summary of Evidence**

A MassHealth representative from the Quincy MassHealth Enrollment Center testified by

Page 1 of Appeal No.: 2303836

telephone that the appellant, who is under age 65, has been enrolled in MassHealth CarePlus since 2020, and that her coverage was protected during the Covid-19 public health emergency. In May, 2023, MassHealth updated the appellant's countable income, and determined that the appellant is no longer eligible for coverage due to excess income (Testimony, Exh. 1).

The hearing officer called the appellant at the appointed hearing time, 11 am on June 8, 2023. The appellant stated that she was not aware of an appeal hearing. When asked if she wanted to proceed with the appeal hearing, the appellant stated, "no," and hung up on the hearing officer.

# **Findings of Fact**

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

- 1. The appellant is under age 65 and lives in the community.
- 2. Since 2020, the appellant was enrolled in MassHealth CarePlus (Testimony).
- 3. In May, 2023, MassHealth updated the appellant's countable income (Testimony, Exh. 1).
- 4. By a notice dated May 3, 2023, MassHealth apprised the appellant that she is not eligible for MassHealth benefits because her income is too high, and that her coverage would terminate on May 17, 2023 (Exh. 1).
- 5. The appellant filed a timely appeal of this notice with the Board of Hearings on May 10, 2023 (Exh. 2).
- 6. The hearing officer called the appellant at the time appointed for the appeal hearing, 11 am on June 8, 2023, and the appellant indicated she did not wish to proceed with the appeal.

# **Analysis and Conclusions of Law**

Regarding MassHealth CarePlus, 130 CMR 505.008(A) states as follows:

Overview.

\_

<sup>&</sup>lt;sup>1</sup> Pursuant to MassHealth Eligibility Operations Memo number 20-09, "MassHealth Response to Coronavirus Disease 2019 (COVID-19)," effective April 7, 2020, "MassHealth will protect coverage for all individuals who have Medicaid coverage as of March 18, 2020, and for all individuals newly approved for coverage during the COVID-19 outbreak national emergency, and through the end of the month in which such national emergency period ends. These members will not lose coverage or have a decrease in benefits during this time period" (emphasis added).

- (1) 130 CMR 505.008 contains the categorical requirements and financial standards for MassHealth CarePlus. This coverage type provides coverage to adults 21 through 64 years of age.
- (2) Persons eligible for MassHealth CarePlus Direct Coverage are eligible for medical benefits, as described in 130 CMR 450.105(B): MassHealth CarePlus and 130 CMR 508.000: Health Care Reform: MassHealth: Managed Care Requirements and must meet the following conditions.
- (a) The individual is an adult 21 through 64 years of age.
- (b) The individual is a citizen, as described in 130 CMR 504.002: U.S. Citizens, or a qualified noncitizen, as described in 130 CMR 504.003(A)(1): Qualified Noncitizens.
- (c) The individual's modified adjusted gross income of the MassHealth MAGI household is less than or equal to 133% of the federal poverty level.
- (d) The individual is ineligible for MassHealth Standard.
- (e) The adult complies with 130 CMR 505.008(C).
- (f) The individual is not enrolled in or eligible for Medicare Parts A or B.

...

#### (Emphasis added)

The appellant's MassHealth CarePlus coverage was maintained by MassHealth during the Covid-19 public health emergency. The national public health emergency ended on May 11, 2023.

Pursuant to the Fair Hearing Rules at 130 CMR 610.035(A):

The BOH will dismiss a request for a hearing when (2) the request is withdrawn by the appellant.

When reached by the hearing officer, the appellant stated she did not wish to proceed with the appeal; the hearing officer treats this as a request to withdraw this appeal.

Therefore, pursuant to 130 CMR 610.035(A)(2), this appeal is DISMISSED.

#### Order for MassHealth

None.

# **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.

Paul C. Moore Hearing Officer Board of Hearings

cc: Morgan Burns, Appeals Coordinator, Quincy MEC

Page 4 of Appeal No.: 2303836