

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2304933
Decision Date:	7/19/2023	Hearing Date:	07/17/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via telephone:

Pro se

Appearance for MassHealth:

Via telephone:

Thelma Lizano, Charlestown MEC



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

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Eligibility
Decision Date:	7/19/2023	Hearing Date:	07/17/2023
MassHealth's Rep.:	Thelma Lizano	Appellant's Rep.:	Pro se
Hearing Location:	Charlestown MassHealth Enrollment Center – Remote	Aid Pending:	No

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 June 5, 2023, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that the appellant's income exceeds the limit for MassHealth. (Exhibit 1). The appellant filed this appeal in a timely manner on June 14, 2023 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.008, in determining that the appellant's income exceeds the limit for MassHealth.

Summary of Evidence

The MassHealth representative and appellant both appeared at hearing via telephone. The MassHealth representative testified that the appellant is under the age of 65 and has a household size of one. The MassHealth representative stated that the appellant receives \$516 per week in unemployment benefits and \$391.27 per week from a part-time job, putting his gross monthly income at \$3,931.20, or 318% of the Federal Poverty Level (FPL). The income limit for MassHealth CarePlus for a non-disabled person under the age of 65 is 133% of the FPL, which is \$1,616 gross per month for a household of one.

The appellant testified that the unemployment figure was accurate, but he only takes home something in the \$200s for his part-time job, which he works 15 hours per week. He lost his regular job in the beginning of the year, along with his health insurance. He has some medical issues that he needs to take care of. He explained that he contacted the Health Connector but he is being refused coverage there because it is not open enrollment season.

The MassHealth representative explained that the appellant was eligible for a Health Connector plan and the loss of his job and employer-sponsored health insurance was a qualifying event; however, one typically needs to enroll with the Health Connector within 60-days of such a qualifying event.

The appellant responded that he lost his job and insurance in the beginning of the year, four to five months ago, but he did not apply for health insurance through the Health Connector until recently because there were a lot going of other things going on. Now, when he tried to apply for the Health Connector, it is not allowing him to enroll.

Findings of Fact

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

1. The appellant is under the age of 65 and lives in a household of one (Testimony and Exhibit 4).
2. On June 5, 2023, MassHealth notified the appellant that he was over the allowable income limit to qualify for MassHealth (Exhibit 1).
3. The appellant's gross monthly income totals \$3,931.20, made up of unemployment benefits and earnings from a part-time job (Testimony).
4. 133% of the Federal Poverty Level for a household of one is \$1,616 (Testimony).

5. On June 14, 2023, the appellant timely appealed the notice (Exhibit 2).

Analysis and Conclusions of Law

The Board of Hearings has limited jurisdiction to redress complaints. Particularly, the Board of Hearings may only redress disputes arising from MassHealth determinations.¹ See 130 CMR 610.032. Here, based on the notice under appeal dated June 5, 2023, the only MassHealth related dispute is whether MassHealth correctly denied the appellant's application for MassHealth benefits because his income exceeded MassHealth limits.

MassHealth offers a variety of benefits based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below a certain financial threshold.

The MassHealth coverage types are set forth at 130 CMR 505.001(A) as follows:

- (1) Standard for pregnant women, children, parents and caretaker relatives, young adults,² disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) CommonHealth for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) CarePlus for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) Family Assistance for children, young adults, certain noncitizens and persons who are HIV positive who are not eligible for MassHealth Standard, CommonHealth, or CarePlus;
- (5) Small Business Employee Premium Assistance for adults or young adults who
 - (a) work for small employers;
 - (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus;
 - (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and

¹ Certain other limited areas of jurisdiction exist within the Board of Hearings that are not based upon MassHealth decisions or decisions by MassHealth contractors, such as decisions by a nursing facility to discharge or transfer a resident. See 130 CMR 610.032(C). Any authority regarding Health Connector decisions is specifically limited to those matters the Health Connector has delegated to the Board of Hearings. At the moment, no such delegation exists. See 130 CMR 610.032(A).

² "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

- (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage;
- (6) Limited for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (7) Senior Buy-in and Buy-in for certain Medicare beneficiaries.

Categorically, the appellant is eligible for CarePlus; however, under 130 CMR 505.008(A)(2)(c), the income limit for CarePlus coverage is 133% of the FPL. For a household of one, that limit is \$1,616 per month. The appellant's most recently verified gross monthly income is \$3,931.20, or 318% of the FPL. Based on this figure, he is over the income limit for MassHealth CarePlus benefits. For these reasons, the MassHealth decision is correct and the appeal is denied.

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.

Alexandra Shube
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129