Office of Medicaid **BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision: Appeal Number: Denied 2305798

08/21/2023 **Hearing Date:** 08/14/2023 **Decision Date:**

Hearing Officer: Mariah Burns

Appearance for Appellant:

Appearance for MassHealth: Pro se

Tewksbury Janine Monico, MassHealth

Enrollment Center



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 - Income

Decision Date: 08/21/2023 **Hearing Date:** 08/14/2023

MassHealth's Rep.: Janine Monico Appellant's Rep.: Pro se

Hearing Location: 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 July 10, 2023, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that her income exceeds the regulatory limit. See 130 CMR 519.005(A) and Exhibit 1. The appellant filed this appeal in a timely manner on July 17, 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 senior benefits.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 519.005, in calculating the appellant's income as a single household and determining that it exceeds 100% of the federal poverty level (FPL).

Summary of Evidence

The appellant is a single adult over the age of 65 and appeared at the hearing by telephone.

Page 1 of Appeal No.: 2305798

MassHealth was represented by a worker from the Tewksbury MassHealth Enrollment Center (MEC) who also appeared telephonically.

The MassHealth worker testified that the appellant has a countable monthly income of \$2346.67. As she is over the age of 65, she would be entitled to senior benefits if her monthly income was less than or equal to 100% of the FPL. 2023 MassHealth Income Standards currently set 100% of the FPL at \$1215.00 of monthly income.

The appellant testified that she has a —-year-old child who is financially dependent on the appellant and is claimed on the appellant's taxes. The appellant expressed confusion as to why her dependent child is not included in her household calculation. The MassHealth worker reported that a child of or older may not be included in an applicant's household, even if the child is claimed on the applicant's taxes.

Findings of Fact

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

- 1. The appellant is a single adult over the age of 65. Testimony, Exhibit 4.
- 2. The appellant currently earns \$2346.67 in countable monthly income and possesses under \$2000.00 in countable assets. Testimony, Exhibit 1 at 3.
- 3. The appellant resides with her year old daughter whom she claims on her taxes. Testimony.
- 4. On July 10, 2023, MassHealth issued a notice denying the appellant's application for MassHealth senior benefits due to the appellant's income exceeding the monthly limit. Exhibit 1.
- 5. The appellant filed a timely appeal on July 17, 2023. Exhibit 2.
- 6. The appellant does not challenge MassHealth's calculation of her income. Testimony.

Analysis and Conclusions of Law

MassHealth administers and is responsible for delivery of healthcare benefits to MassHealth members. See 130 CMR 515.002. Eligibility for MassHealth benefits differs depending on an applicant's age. 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for non-institutionalized persons aged 65 or older, institutionalized persons of any age, persons who would be institutionalized without community-based services, as, and

Page 2 of Appeal No.: 2305798

certain Medicare beneficiaries. 130 CMR 515.002(B). As the appellant is over 65 years old, she is subject to the requirements of the provisions of Volume II. 130 CMR 515.002.

For a noninstitutionalized senior to qualify for MassHealth Standard, they must meet the financial eligibility requirements of 130 CMR 519.005(A). Specifically, their countable income must be less than or equal to 100% of the FPL and assets must be under \$2000 for a single person or \$3000 for a married couple. *Id.*

At hearing, the appellant argued that her —-year-old daughter should be included in her household size when calculating her monthly income. However, the income of senior applicants is not typically calculated using the Modified Adjusted Gross Income (MAGI), and senior applicants are only entitled to such consideration if they are the parents or caretakers of children younger that 19 years old. *See* 519.005(C)(1)and(3). Thus, the appellant's daughter cannot be included in her household size for purposes of MassHealth's income calculation.

The MassHealth worker testified, and MassHealth income standards confirm, that 100% of the federal poverty level for a single person is \$1215.00 in monthly income.¹ The appellant does not dispute that her monthly income totals \$2346.67. MassHealth therefore correctly calculated the appellant's income in determining her eligibility of MassHealth. As her income exceeds 100% of the FPL, the appellant is not eligible for MassHealth Standard benefits.² The appeal is thereby 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.

¹ https://www.mass.gov/doc/2023-masshealth-income-standards-and-federal-poverty-guidelines-0/download.

² There is no evidence in the record that the appellant is categorically eligible for any other senior benefits offered by MassHealth.

Mariah Burns Hearing Officer Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290

Page 4 of Appeal No.: 2305798