

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2306140
Decision Date:	10/05/2023	Hearing Date:	08/23/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:
Via telephone:
Pro se

Appearance for MassHealth:
Via telephone:
Dominique Correa, Springfield 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; Under 65; Over income
Decision Date:	10/05/2023	Hearing Date:	08/23/2023
MassHealth's Rep.:	Dominique Correa	Appellant's Rep.:	Pro se
Hearing Location:	Springfield 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 July 2, 2023, MassHealth notified the appellant that his coverage would change from MassHealth CarePlus to Health Safety Net, effective June 22, 2023, due to a change in circumstances (Exhibit 1). The appellant filed this appeal in a timely manner on July 24, 2023 (see 130 CMR 610.015(B) and Exhibit 2). Termination and/or reduction of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth informed the appellant that his coverage would change from MassHealth CarePlus to the Health Safety Net, effective June 22, 2023.

Issue

The appeal issue is whether MassHealth was correct in downgrading the appellant from MassHealth CarePlus to the Health Safety Net.

Summary of Evidence

The MassHealth representative appeared at hearing via telephone and testified as follows: the appellant, who is under the age of 65 with a household size of one, completed a renewal application. He verified his employment income at \$1,380 gross every two weeks, or about \$2,990 gross per month. This put him at 222% of the Federal Poverty Level (FPL). The income limit to qualify for MassHealth Standard or 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. On July 2, 2023, MassHealth determined that he was over the income limit for MassHealth CarePlus and his coverage would change to the Health Safety Net. He is also eligible for a Health Connector Care Type 3A plan with a premium tax credit. His MassHealth CarePlus benefits are protected during the appeal process by aid pending.

The appellant appeared via telephone and testified as follows: he is not disputing his gross income which is accurate as testified to by MassHealth. But there other factors he wanted MassHealth to consider. First, he believed that he qualified for MassHealth based on his health conditions and illnesses. He is a recovering alcoholic and has cirrhosis of the liver and diabetes. Second, with his current income and health conditions, he cannot afford the copays for his prescriptions and doctors appointments. He applied for Social Security Disability and believes he was found disabled.

The MassHealth representative explained that if he was deemed disabled, he may qualify for MassHealth CommonHealth with a monthly premium, but currently he is not shown as disabled in the MassHealth system. It looked like he was first found disabled in January 2018 and was eligible for MassHealth CommonHealth at that time, but was only receiving \$500 per month in unemployment then. The last time MassHealth made a disability determination for the appellant was March 1, 2019. He was found disabled but only for one year, which meant that MassHealth would have to re-evaluate his disability status every year. He was up for a review of his disability status on April 29, 2020, but that did not happen due to the Covid-19 Public Health Emergency (PHE). Under the PHE, the appellant remained on MassHealth CarePlus, despite being over the income limit and not having the disability review. When the PHE ended, the appellant's eligibility was re-evaluated and resulted in the notice under appeal. MassHealth explained that he could fill out the Adult Disability Supplement to be considered for MassHealth CommonHealth.

The appellant argued that but for the Covid-19 PHE, he would have been afforded the opportunity to recertify his disability, but was not given that chance. He understood that his current benefits would be protected during the appeal process and he would fill out the Adult Disability Supplement as soon as possible.

Findings of Fact

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

1. The appellant is under the age of 65 with a household size of one (Testimony and Exhibit 4).
2. On July 2, 2023, MassHealth notified the appellant that his coverage would change from MassHealth CarePlus to the Health Safety Net due to a change in circumstances (Testimony and Exhibit 1).
3. The appellant's income is \$1,380 gross every two weeks, or \$2,990 gross per month, which put him at 222% of the Federal Poverty Level (Testimony and Exhibit 1).
4. The appellant did not dispute his income level (Testimony).
5. To qualify for MassHealth benefits, the appellant's income would have to be at or below 133% of the Federal Poverty Level, or \$1,616 for a household of one (Testimony).
6. On July 24, 2023, the appellant timely appealed the notice (Exhibit 2).
7. Based on his income, the appellant is currently eligible for a Health Connector Care Type 3A plan with a premium tax credit (Testimony).
8. On March 1, 2019, MassHealth made a one-year disability determination which was up for review on April 29, 2020. That review never happened due to the Covid-19 PHE (Testimony).

Analysis and Conclusions of Law

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,¹ 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);

¹ "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

- (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
 - (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 \$2,990, or 222% 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.²

Order for MassHealth

None.

² The appellant may also be eligible for MassHealth CommonHealth, pending his submission and MassHealth's review of the Adult Disability Supplement; however, that determination (and the lack of an earlier recertification of his disability status due to the Covid-19 PHE) is outside the scope of this appeal.

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: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104