

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2307750
Decision Date:	09/27/2023	Hearing Date:	09/26/2023
Hearing Officer:	Thomas J. Goode		

Appearance for Appellant:  
Pro se

Appearance for MassHealth:  
Lindsey Carney, Tewksbury 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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Eligibility
<b>Decision Date:</b>	09/27/2023	<b>Hearing Date:</b>	09/26/2023
<b>MassHealth's Rep.:</b>	Lindsey Carney	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Remote	<b>Aid Pending:</b>	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 Appellant's application for MassHealth benefits because MassHealth determined that assets exceed program limits (130 CMR 520.003, 520.004 and Exhibit 1). Appellant filed this appeal in a timely manner on August 31, 2023 (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 Appellant's application for MassHealth benefits because MassHealth determined that assets exceed program limits.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.003, 520.004 in denying Appellant's MassHealth application because assets exceed program limits.

## Summary of Evidence

The MassHealth representative testified that Appellant had been receiving MassHealth Standard coverage while he was under 65 years of age. A MassHealth Senior Application was submitted by Appellant on July 10, 2023. Appellant is a household size of one person over 65 years of age, living in the community with no disability reported. An asset verification match on June 1, 2023 showed a bank account in Appellant's name with \$35,823. Because assets exceed \$2,000, the application was denied. Appellant is eligible for Health Safety Net.

Appellant confirmed that his assets held in a bank account total \$35,823. Appellant testified that he is receiving care for glaucoma through a private practice and needs coverage to continue until treatment is completed. Appellant added that he has Medicare, but it does not completely cover treatment.

## Findings of Fact

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

1. Appellant had been receiving MassHealth Standard coverage while he was under 65 years of age.
2. Appellant is over 65 years of age and lives in the community.
3. A MassHealth Senior Application was submitted by Appellant on July 10, 2023.
4. Appellant is a household size of one person with no disability reported.
5. Appellant's assets held in a bank account total \$35,823.

## Analysis and Conclusions of Law

### 130 CMR 519.005: Community Residents 65 Years of Age and Older

(A) Eligibility Requirements. Except as provided in 130 CMR 519.005(C)<sup>1</sup>, noninstitutionalized individuals 65 years of age and older may establish eligibility for MassHealth Standard coverage provided they meet the following requirements:

- (1) the countable-income amount, as defined in 130 CMR 520.009: *Countable-Income Amount*, of the individual or couple is less than or equal to 100% of the federal poverty level; and

---

<sup>1</sup> This section applies to parents and caretaker relatives of children younger than 19 years old.

(2) the countable assets of an individual are \$2,000 or less, and those of a married couple living together are \$3,000 or less.<sup>2</sup>

Appellant is a household size of one person living in the community with no disability reported, and assets that exceed \$2,000. Therefore, MassHealth correctly denied Appellant's July 10, 2023 Senior Application by notice dated July 10, 2023.

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.

---

Thomas J. Goode  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876

---

<sup>2</sup> See also 130 CMR 520.003: Asset Limit (A) The total value of countable assets owned by or available to individuals applying for or receiving MassHealth Standard, Family Assistance, or Limited may not exceed the following limits: (1) for an individual — \$2,000; and (2) for a couple living together in the community where there is financial responsibility according to 130 CMR 520.002(A)(1) — \$3,000.