

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2308249
Decision Date:	10/04/2023	Hearing Date:	09/27/2023
Hearing Officer:	Sara E. McGrath		

Appearances for Appellant:



Appearances for MassHealth:

Liz Nickoson, Taunton MassHealth



*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:	Denied	Issue:	Eligibility; Income
Decision Date:	10/04/2023	Hearing Date:	09/27/2023
MassHealth Rep.:	Liz Nickoson	Appellant Rep.:	Pro se
Hearing Location:	Board of Hearings (Remote)		

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 August 25, 2023, MassHealth notified the appellant that she is not eligible for MassHealth benefits (Exhibit 1). The appellant filed a timely appeal on September 12, 2023 (Exhibit 1). The denial of assistance is valid grounds for appeal (130 CMR 610.032(A)).

Action Taken by MassHealth

MassHealth notified the appellant that she is not eligible for MassHealth benefits.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant is not eligible for MassHealth benefits?

Summary of Evidence

The MassHealth representative appeared at the hearing by telephone and testified in summary as follows: The appellant is a single adult tax filer who is under the age of 65. She had been eligible for MassHealth CarePlus coverage from October 14, 2018 through August 23, 2023. On August 25, 2023, the appellant completed an eligibility review by phone and verified her income at \$2,339 per month, or 187.58% of the federal poverty level. Because this income exceeds 133% of the federal poverty level for a household of one (\$1,616 per month), the appellant is no longer financially eligible for MassHealth CarePlus. On August 25, 2023, MassHealth notified the appellant that she is not eligible for MassHealth benefits, and that effective August 15, 2023, she is temporarily eligible for Health Safety Net coverage, and is also eligible for a ConnectorCare plan through the Massachusetts Health Connector (Exhibit 1).

The appellant appeared at the hearing by telephone. She stated that her take home pay is much less than the gross amount of her paycheck, and she cannot afford to pay for health insurance. She has many expenses, including increased rent. She also had many health issues, both physical and psychological, and she takes multiple medications. Without health insurance, these medications are incredibly expensive. She has enrolled with a ConnectorCare plan, Tufts Health Direct, but she cannot afford the \$55.65 monthly premium.

Findings of Fact

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

1. The appellant is a single adult tax filer who is under the age of 65.
2. The appellant had been eligible for MassHealth CarePlus coverage from October 14, 2018 through August 23, 2023.
3. On August 25, 2023, the appellant completed an eligibility review by phone and verified her income at \$2,339 per month, or 187.58% of the federal poverty level.
4. On August 25, 2023, MassHealth notified the appellant that she is not eligible for MassHealth benefits, and that effective August 15, 2023, she is temporarily eligible for Health Safety Net coverage, and is also eligible for a ConnectorCare plan through the Massachusetts Health Connector.
5. On September 12, 2023, the appellant timely appealed MassHealth's determination.

Analysis and Conclusions of Law

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 adults¹, 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
 - (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.

Under 130 CMR 505.008(A)(2)(c), for adults between the ages of 21 and 64, the income limit for MassHealth CarePlus is 133% of the federal poverty level. The appellant's income is at 187.58% of the federal poverty level. Because the appellant's income is over the limit for MassHealth CarePlus, MassHealth's action was consistent with the applicable regulations.

This appeal is denied.

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

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.

Sara E. McGrath
Hearing Officer
Board of Hearings

cc: Taunton MassHealth Enrollment Center