

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision: Denied

Appeal Number: 2308492

Decision Date: 10/17/2023

Hearing Date: 10/16/2023

Hearing Officer: Alexis Demirjian

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Meghan Adie, Tewksbury MEC

Interpreter:



*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:	Over 65; Over Assets
Decision Date:	10/17/2023	Hearing Date:	10/16/2023
MassHealth's Rep.:	Meghan Adie	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 August 14, 2023, MassHealth denied the appellant's application for MassHealth benefits because MassHealth determined that had more countable assets than MassHealth allows. (see 130 CMR 520.004 and Exhibit 1). The appellant filed this appeal in a timely manner on September 11, 2023. (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal before the Board of Hearings. (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits due to having more countable assets than MassHealth allows.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 520.004, in determining that the appellant had assets over \$2000.

Summary of Evidence

MassHealth testified that on August 2, 2023, they received the appellant's senior application for benefits. MassHealth processed the application on August 9, 2023. While reviewing the application, MassHealth discovered the existence of four bank accounts with the appellant's name on them which totaled \$93,403.53 in assets. The accounts also named another individual, who was determined to be the appellant's daughter at hearing. MassHealth determined that the appellant may be eligible for Health Safety Net coverage.

The appellant testified that she is over aged 65 and the money in the bank accounts belong to her. The appellant reiterated numerous times that the money does not belong to her daughter. The appellant argued that she has numerous medical conditions, thus her assets should not be considered and MassHealth should cover her based on physical ailments.

In response to the appellant's testimony, MassHealth informed the appellant that she may apply for coverage through the Health Connector because the appellant does not receive Medicare coverage. Additionally, the appellant may submit a new application for coverage and submit a disability supplement to determine whether she is eligible for CommonHealth.

The appellant may be eligible for CommonHealth if she is a resident of Massachusetts, and a disabled adult who works 40 hours or more a month or is currently working and have worked at least 240 hours in the 6 months immediately before the month of the application. MassHealth decides if you are disabled according to the standards set by federal and state law.

Findings of Fact

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

1. Appellant is over age 65 and did not submit a disability supplement with her application. (Ex. 4; Testimony).
2. The appellant has assets that exceed the \$2,000 limit. (Exhibit 1; Testimony).

Analysis and Conclusions of Law

The appellant has the burden "to demonstrate the invalidity of the administrative determination." Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228 (2007).

The regulations at 130 CMR 515.000 through 520.000 provide the requirements for MassHealth eligibility for persons aged 65 and older. (130 CMR 515.002).

Pursuant to 130 CMR 520.003 (A) (1), 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 \$2000 for individuals.

Here the appellant acknowledged that she has assets in excess of the \$2000 limit. Thus, she does not qualify for MassHealth Standard, Family Assistance, or Limited based on this fact.

With respect to her assertion that she has disability that may render her eligible for services, the appellant needs to file a new application with a disability supplement that must be evaluated by UMASS and must meet other criteria including working 40 hours per month.

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.

Alexis Demirjian
Hearing Officer
Board of Hearings

cc:

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