

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2308574
Decision Date:	12/18/2023	Hearing Date:	10/25/2023
Hearing Officer:	Christopher Jones		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Patrick George - Tewksbury HCR



*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:	Under-65; Eligibility; Income
Decision Date:	12/18/2023	Hearing Date:	10/25/2023
MassHealth's Rep.:	Patrick George	Appellant's Rep.:	Pro se
Hearing Location:	Remote	Aid Pending:	YES

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 September 5, 2023, MassHealth downgraded the appellant's coverage from MassHealth Standard to Health Safety Net because the appellant's household income no longer met the income requirements for coverage. (Exhibit 1; 130 CMR 505.002; 506.001 - .004.) The appellant filed this appeal in a timely manner on September 19, 2023, and her benefits are protected pending the outcome of this appeal. (Exhibit 2; 130 CMR 610.015(B); 610.036.) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

The Board of Hearings initially dismissed this appeal on September 25, 2023, because it did not have the notice that generated the appeal. (Exhibits 2; 3.) Once the correct notice was located, this appeal was scheduled for hearing. (Exhibits 4; 5.)

Action Taken by MassHealth

MassHealth terminated the appellant's MassHealth Standard because the appellant's income is higher than the income threshold.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002 and 506.003-506.004, in determining that the appellant's household income was too high to qualify for

MassHealth Standard.

Summary of Evidence

The appellant is under the age of 65 and has a household of two. MassHealth's eligibility representative explained that the appellant had been protected on the MassHealth Standard coverage during the Federal Public Health Emergency for Covid-19 ("FPHE"). That protection ended in April, and the appellant was sent a renewal application. The appellant submitted income verifications as part of this renewal showing that she received employment income of \$1,368 every two weeks. MassHealth calculated her monthly income to be equivalent to 175.3% of the federal poverty level for a household of two, and she was found eligible for health insurance subsidies through the Health Connector and the Health Safety Net. The appellant had also indicated that she had a disability in her application, and MassHealth sent her a disability supplement to fill out.

The appellant testified that she only works about 19 hours per week, and that she had a brain tumor removed last year and was continuing to undergo treatment. She testified that she had already completed the disability supplement, but that it was undergoing review. She also related a series of confusing conversations she had with MassHealth and Board of Hearings representatives with regards to her ongoing coverage. The appellant's MassHealth Standard benefits were confirmed to be continuing pending the conclusion of this appeal through a protection placed by the Board of Hearings. It was further explained that the appellant would receive a new notice regarding her eligibility after her disability supplement had been reviewed, and that notice would need to be separately appealed.

Findings of Fact

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

- 1) The appellant is under the age of 65 and has a household of two. (Testimony by MassHealth's representative.)
- 2) The appellant completed a renewal application following the end of the FPHE and verified income of \$1,368 every two weeks. (Testimony by MassHealth's representative.)
- 3) MassHealth terminated her MassHealth Standard coverage for having excess income, but the appellant's benefits are protected pending the outcome of this appeal. (Exhibits 1; 4; 6; and testimony by MassHealth's representative.)

Analysis and Conclusions of Law

MassHealth offers a variety of coverage types based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below the relevant financial thresholds. Financially, members under the age of 65 who seek MassHealth Standard or CarePlus benefits must have countable income under 133% of the federal poverty level. (130 CMR 505.002(E), 505.008(A).) However, disabled adults between the ages of 19 and 64 can qualify for the CommonHealth program, regardless of their income, by meeting either a one-time deductible or working for 40 hours a month. (See 130 CMR 505.004(B)-(C), 506.009.)

For individuals under the age of 65, countable unearned income includes "the total amount of taxable income" a member receives "after allowable deductions on the U.S Individual Tax Return," and specifically includes "social security benefits." (130 CMR 506.003(B).) Monthly income is derived by multiplying average weekly income by 4.333, and "[f]ive percentage points of the current federal poverty level (FPL) is subtracted from the applicable household total countable income to determine eligibility of the individual under the coverage type with the highest income standard." (130 CMR 506.007(A).)

The federal poverty level for a household of two in 2023 is \$1,644 per month. Five percent of the federal poverty level is \$82.20. The appellant's income for eligibility purposes is \$2,881.57, which is equivalent to 175.3% of the federal poverty level for a household of two. Because the appellant's income is over 133% of the federal poverty level, MassHealth was correct that she is ineligible for CarePlus or Standard coverage. This appeal is DENIED.

If the appellant is found to be disabled, she may become eligible for the CommonHealth benefits. This benefit provides comprehensive insurance to disabled adults with income over the limits for MassHealth Standard. Members must satisfy a deductible or work at least 40 hours per month, and they may also be assessed a monthly premium. (See 130 CMR 505.004; 506.011.)

Order for MassHealth

Remove Aid Pending.

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.

Christopher Jones
Hearing Officer
Board of Hearings

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