

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Dismissed	<b>Appeal Number:</b>	2308835
<b>Decision Date:</b>	12/18/2023	<b>Hearing Date:</b>	10/24/2023
<b>Hearing Officer:</b>	Kimberly Scanlon		

**Appearance for Appellant:**  
*Via telephone*  
*Pro se*

**Appearance for MassHealth:**  
*Via telephone*  
Sophia Beauport-Lafontant

**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

<b>Appeal Decision:</b>	Dismissed	<b>Issue:</b>	Eligibility; Over 65; Over income
<b>Decision Date:</b>	12/18/2023	<b>Hearing Date:</b>	10/24/2023
<b>MassHealth's Rep.:</b>	Sophia Beauport-Lafontant	<b>Appellant's Rep.:</b>	<i>Pro se</i>
<b>Hearing Location:</b>	Charlestown MassHealth Enrollment Center - Room 2 (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 September 13, 2023, MassHealth notified the Appellant that her benefits were downgraded from MassHealth Standard to Senior Buy In because MassHealth determined that she was over the allowable income limits. (130 CMR 519.002; 519.010; Exhibit 1). The Appellant filed this appeal in a timely manner on September 22, 2023. (130 CMR 610.015(B); Exhibit 2). Reduction of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth notified the Appellant that her benefits were being downgraded from MassHealth Standard to Senior Buy In because she was over the allowable income limits.

### Issue

The appeal issue is whether MassHealth was correct in downgrading the Appellant's MassHealth

benefits due to her income.

## Summary of Evidence

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: the Appellant's application was received and processed in September of 2023. On September 13, 2023, MassHealth downgraded the Appellant's MassHealth benefits because her income was over the allowable limit. (Exhibit 1). The Appellant receives \$ 1,236.00 per month in social security benefits. Although there is an unearned income disregard of \$ 20.00, which brings her total monthly income to \$ 1,216.00, the Appellant is still over the income limit to receive MassHealth Standard benefits by \$ 1.00. The Appellant currently qualifies for MassHealth Senior Buy In benefits, which is financial assistance to pay for Medicare Part A and Part B premiums and deductibles. The Appellant also qualifies for Health Safety Net coverage, which is medical coverage at hospitals and community centers only.

The Appellant appeared at the hearing telephonically and testified through an interpreter. She explained that she needs dental and eye coverage, and transportation if possible. In response, the MassHealth representative explained that for dental, eye and transportation services to be covered, she would need to meet the income guidelines for MassHealth Standard coverage. She testified that the Appellant mentioned in her paperwork submission that she has a disability. The MassHealth representative explained that an alternative method to obtain MassHealth Standard coverage that the Appellant may qualify for with her income is to apply for a Frail Elder Waiver. To do so, the MassHealth representative explained that the Appellant would need to contact her local elder services agency (██████████ Elder Services) to have an assessment conducted.<sup>1</sup> The MassHealth representative testified that the income limit for the Frail Elder Waiver program is \$ 2,742.00 which the Appellant would qualify for with her current income. She further testified that the Appellant must meet the asset limit of \$ 2,000.00 as well to qualify for the Frail Elder Waiver program. The Appellant expressed her appreciation for the information given.

## Findings of Fact

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

1. The Appellant is over the age of 65. (Exhibit 3).
2. On September 13, 2023, MassHealth notified the Appellant that her benefits were being downgraded because she was over the allowable income limit. (Exhibit 1).
3. The Appellant timely appealed on September 22, 2023. (Exhibit 2).

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<sup>1</sup> The telephone number for ██████████

4. The Appellant's monthly gross income is \$ 1,236.00. (Testimony).
5. The Appellant qualifies for Senior Buy In benefits. (Testimony; Exhibit 1).
6. The Appellant qualifies for Health Safety Net coverage at hospitals and community health centers. (Testimony).
7. The Appellant may qualify for MassHealth Standard coverage if she is approved for a Frail Elder Waiver. (Testimony).

## **Analysis and Conclusions of Law**

MassHealth may make an adjustment in the matters at issue before or during an appeal period. (See, 130 CMR 610.051(B)). If the parties' adjustment resolves one or more of the issues in dispute in favor of the Appellant, the hearing officer, by written order, may dismiss the appeal in accordance with 130 CMR 610.035 as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement in favor of the appellant. *Id.*

With respect to 130 CMR 610.035, the Board of Hearings will dismiss a hearing when....

- (1) the request is not received within the time frame specified in 130 CMR 610.015;
- (2) the request is withdrawn by the appellant;
- (3) the sole issue is one of state or federal law requiring automatic change in assistance for classes of members;
- (4) the stated reason for the request does not constitute grounds for appeal as set forth in 130 CMR 610.032. Without limiting the generality of the foregoing, except as provided in 130 CMR 610.032(A)(11), no provider decision or action including, but not limited to, a provider determination about whether or the extent to which a service is medically necessary constitutes an appealable action hereunder;
- (5) the stated reason for the hearing request is outside the scope of 130 CMR 610.000 as set forth in 130 CMR 610.003;
- (6) BOH has conducted a hearing and issued a decision on the same appealable action arising out of the same facts that constitute the basis of the request;
- (7) the party requesting the hearing is not an applicant, member, or resident as defined in 130 CMR 610.004;
- (8) BOH learns of an adjustment or action that resolves all of the issues in dispute between the parties;
- (9) BOH learns that the applicant or member has passed away prior to the date of filing and there is no full compliance with 130 CMR 610.016(B) within ten days of a BOH request;
- (10) BOH learns that the applicant or member has passed away prior to the date of filing and scheduling a hearing and is not informed until the date of the hearing and there is no full

compliance with 130 CMR 610.016(B); or  
(11) the appellant fails to appear at a scheduled hearing.

....

(130 CMR 610.035(A)).

In the present case, the Appellant was satisfied with the explanation given by the MassHealth representative. Because the appeal issue has been resolved in the Appellant's favor, there is nothing left to dispute before the hearing officer. For the above-stated reasons, this appeal is dismissed. Any subsequent MassHealth notices issued to the Appellant may be separately appealed.

## **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.

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Kimberly Scanlon  
Hearing Officer  
Board of Hearings

cc:

MassHealth Representative: Nga Tran, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129