

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Dismissed	Appeal Number:	2308973
Decision Date:	12/20/2023	Hearing Date:	10/26/2023
Hearing Officer:	Kimberly Scanlon		

Appearance for Appellant:

Via telephone

Pro se

Appearance for MassHealth:

Via telephone

Elizabeth Nickoson



*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:	Dismissed	Issue:	Eligibility; Under 65; Over income
Decision Date:	12/20/2023	Hearing Date:	10/26/2023
MassHealth's Rep.:	Elizabeth Nickoson	Appellant's Rep.:	<i>Pro se</i>
Hearing Location:	Taunton MassHealth Enrollment Center Room 2 (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 22, 2023, MassHealth notified the Appellant that her benefits were downgraded from MassHealth Standard to CommonHealth because MassHealth determined that the Appellant is over the income limits to receive Standard coverage. (130 CMR 505.002-9; Exhibit 1). The Appellant filed this appeal in a timely manner on September 5, 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 downgraded from MassHealth Standard to CommonHealth because she was over the allowable income limits.

Issue

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

Summary of Evidence

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: the Appellant is a household of one (1) and she is a non-tax filer. The Appellant's reported income received from employment amounts to a monthly total of \$ 2,599.80, which places her at 208.98 percent of the Federal Poverty Level. The Appellant is under the age of 65 and has been eligible to receive MassHealth CommonHealth benefits as of August 11, 2023. (Exhibit 1). The MassHealth representative explained that the Appellant was previously eligible for MassHealth Standard benefits. The reason for the downgrade is because when MassHealth received the Appellant's renewal application, her reported income was over 133 percent of the Federal Poverty Level. She further explained that the Appellant's income, for a household of one (1), cannot exceed \$ 1, 616.00 per month to be eligible for MassHealth Standard benefits. The MassHealth representative testified that the Appellant's benefits were protected through COVID, however, said protections ended in April of 2023.

The Appellant appeared at the hearing telephonically and testified that she submitted additional documentation to MassHealth indicating that she currently resides with a joint tenant who does not earn any income. The Appellant explained that she mistakenly reported her household as a size of one (1). The MassHealth representative inquired whether the Appellant was legally married to the person that she resides with. In response, the Appellant testified that they were not married. The MassHealth representative explained that her roommate would not be added to her case because they are not married. Therefore, the Appellant accurately reported her household size.

As to employment, the Appellant explained that she is employed for approximately 33 hours per week. The MassHealth representative made inquiry as to the Appellant's hourly wage. The Appellant testified that she grosses \$ 15.50 per hour, or \$ 511.50 per week. The MassHealth representative updated the Appellant's income information and testified that the Appellant's eligibility for MassHealth CommonHealth benefits remain unchanged because she is still over the income limit for MassHealth Standard benefits. However, the Appellant's monthly premium decreased from \$ 40.00 to \$ 25.00 per month, beginning next month. The Appellant expressed her appreciation for the decrease in the monthly premium assessed.¹

Findings of Fact

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

1. The Appellant is under the age of 65. (Testimony; Exhibit 3).

¹ The MassHealth representative explained that the Appellant should pay the current bill of \$ 40.00 that she received because the updated amount will not take affect until the following month.

2. On or about August 22, 2023, MassHealth downgraded the Appellant's MassHealth benefits from Standard to CommonHealth, with a \$ 40.00 monthly premium assessed. (Exhibit 1).
3. The Appellant timely appealed on or about September 5, 2023. (Exhibit 2).
4. The Appellant's hours of employment average to approximately 33 hours per week. (Testimony).
5. The Appellant currently grosses approximately \$ 511.50 per week. (Testimony).
6. The Appellant still qualifies for MassHealth CommonHealth coverage. (Testimony).
7. The Appellant's monthly premium decreased from \$ 40.00 to \$ 25.00, beginning in November. (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 relating to her coverage and deduction of her monthly premium. 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.

Kimberly Scanlon
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

