

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2312079
Decision Date:	01/04/2024	Hearing Date:	01/02/2024
Hearing Officer:	Kimberly Scanlon		

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

Appearance for MassHealth:  
*Via telephone*  
Nicole Conrad



*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>	Denied	<b>Issue:</b>	Eligibility; Over 65; Over asset
<b>Decision Date:</b>	01/04/2024	<b>Hearing Date:</b>	01/02/2024
<b>MassHealth's Rep.:</b>	Nicole Conrad	<b>Appellant's Rep.:</b>	<i>Pro se</i>
<b>Hearing Location:</b>	Taunton 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 October 31, 2023, MassHealth notified the Appellant that she is not eligible for MassHealth benefits because MassHealth determined that she is over the allowable asset limits. The notice further stated that the Appellant is eligible for Health Safety Net coverage beginning on August 1, 2023. (130 CMR 520.003; 520.004; Exhibit 1). The Appellant filed this appeal in a timely manner on November 22, 2023. (130 CMR 610.015(B); Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

### Action Taken by MassHealth

MassHealth notified the Appellant that she is not eligible for MassHealth benefits because she is over the allowable asset limits.

## Issue

The appeal issue is whether MassHealth was correct in determining that the Appellant is over the allowable asset limits to qualify for MassHealth benefits.

## Summary of Evidence

The MassHealth representative appeared at the hearing *via* telephone and testified as follows: the Appellant is over the age of 65 and her household is comprised of a family of one (1) residing in the community. In August of 2023, MassHealth received the Appellant's senior renewal application. Upon receipt, MassHealth processed the Appellant's application and subsequently requested additional information. In October of 2023, MassHealth processed the additional information submitted and verified the Appellant's income and assets which resulted in the denial notice on appeal (Exhibit 1). The MassHealth representative explained that the notice also informs the appellant that she is eligible for Health Safety Net coverage as of August 1, 2023. *Id.*

With respect to the Appellant's verified income, the MassHealth representative testified that the Appellant receives \$ 1,648.90 in Social Security benefits per month and \$ 0.02 per month in self-employment income. Further, the Appellant's assets are comprised of a bank account with a balance of \$ 11,421.00 and a retirement account with a balance of \$ 217,895.13. MassHealth then determined that the Appellant is over the allowable asset (and income) limits to receive MassHealth benefits.

The Appellant appeared at the hearing telephonically and expressed her confusion about the eligibility process. She turned 65 in 2022 and sent in all requested information. It was not until she received the October MassHealth notice (which she stated she did not receive until November 6, 2023) that she learned that she no longer had MassHealth coverage. She is unclear what the Health Safety Net, which became effective on August 1, covers. She stated that between August and November, she was seen by various medical providers, and has an uncovered bill for one of the appointments (\$91.36). The Appellant explained that she understands the reason for denial due to assets but wonders why she was not notified prior to the beginning of November.

The MassHealth representative responded and explained that, on August 17, 2023, MassHealth notified the appellant that her MassHealth benefits would terminate on August 31, 2023 because she failed to return an eligibility review form. (Exhibit 6). The appellant stated that she never received this notice. Had she known her coverage had terminated, she would not have made appointments with medical providers. The Appellant explained that it is important for her to have firsthand knowledge of her medical coverage given her present health condition. The MassHealth representative noted that the address on the August 17, 2023 notice is the appellant's present address.

## Findings of Fact

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

1. The Appellant is over the age of 65. (Exhibit 6).
2. On or about August 17, 2023, MassHealth notified the appellant that her MassHealth benefits would terminate on August 31, 2023 because she failed to return an eligibility review form; this notice is addressed to the appellant at her current address.
3. There is no evidence that MassHealth did not send the August 17, 2023 notice.
4. On or about October 31, 2023, MassHealth notified the Appellant that she was over the allowable asset limits to qualify for MassHealth benefits. (Exhibit 1).
3. The Appellant filed an appeal on November 22, 2023. (Exhibit 2).
4. The Appellant's current assets exceed \$2,000.00; the appellant's current income exceeds \$1,215. (Testimony; Exhibit 5).

## Analysis and Conclusions of Law

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). A non-institutionalized person aged 65 and older may establish eligibility for MassHealth Standard coverage if the countable income is less than or equal to 100% of the Federal Poverty Level, and the countable assets of an individual are \$2,000.00 or less. (130 CMR 519.005). The Appellant's verified assets exceed \$2,000.00 and as a result, is not eligible for MassHealth Standard coverage. The Appellant is eligible for Health Safety Net coverage. (Exhibit 3). There is no evidence that MassHealth erred in its determination here, and the Appellant would need to verify assets at or below \$2,000.00 and meet a six-month deductible before MassHealth eligibility can be established. (130 CMR 520.028).

The appellant's central argument is not about her whether she is currently eligible for MassHealth benefits. Rather, the appellant argues that she was not notified that her benefits were ending, and that because of this, she incurred medical bills she otherwise would not have. MassHealth disputes this argument and maintains that, on August 17, 2023, it notified her that her benefits would end on August 31, 2023. (Exhibit 6). Because the appellant did not file a timely appeal of this notice, the Board does not have jurisdiction to address it (130 CMR 610.015).<sup>1</sup>

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<sup>1</sup> Per 130 CMR 610.015(B)(2)(C), a member has 120 days from date of MassHealth agency action to file an

The appeal is denied.

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

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appeal when the MassHealth agency fails to send written notice of the action. Here, there is no evidence that the MassHealth agency failed to send written notice of the action. The address on the notice is accurate and there is no evidence that MassHealth received any returned mail.