

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2312188
Decision Date:	1/19/2024	Hearing Date:	12/26/2023
Hearing Officer:	Alexandra Shube		

Appearance for Appellant:

Via telephone:

Pro se



Appearance for MassHealth:

Via telephone:

Ryan Bond, Tewksbury MEC



*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:	Eligibility; Under 65; Over income
Decision Date:	1/19/2024	Hearing Date:	12/26/2023
MassHealth's Rep.:	Ryan Bond	Appellant's Rep.:	Pro se Spouse
Hearing Location:	Tewksbury MassHealth Enrollment Center 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 October 11, 2023, MassHealth notified the appellant that her coverage would change from MassHealth CarePlus to Health Safety Net, effective October 1, 2023, due to a change in circumstances (Exhibit 1). The appellant filed this appeal in a timely manner on November 27, 2023 (see 130 CMR 610.015(B) and Exhibit 2). Termination and/or reduction of assistance is valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth informed the appellant that her coverage would change from MassHealth CarePlus to the Health Safety Net.

Issue

The appeal issue is whether MassHealth was correct in downgrading the appellant from MassHealth CarePlus to the Health Safety Net.

Summary of Evidence

The appellant, her spouse, and the MassHealth representative appeared at hearing via telephone. The MassHealth representative testified as follows: the appellant, who is under 65 years of age with a household size of two, completed a renewal application on October 11, 2023. She and her spouse file taxes jointly. Based on her gross monthly income of \$1,698 (verified by an October 20, 2023 pay stub from a September pay period) and her spouse's gross monthly income of \$1,081, the total gross monthly household income is \$2,779. This put her at 164.2% of the Federal Poverty Level (FPL). The income limit to qualify for MassHealth CarePlus for a non-disabled person under the age of 65 is 133% of the FPL, which is \$2,186 gross per month for a household of two. On October 11, 2023, MassHealth issued the notice informing the appellant that she was over the income limit for MassHealth CarePlus and her coverage would change to the Health Safety Net. The notice informed her that her CarePlus coverage would end on November 30, 2023, and Health Safety Net was effective as of October 1, 2023. The appellant is also eligible for a Connector Care Type 2B plan through the Health Connector.

The appellant testified that she works part-time and her husband is retired. They both have a lot of medical issues, including diabetes, and cannot afford the Health Connector plan, especially the prescription costs. Her husband had open heart surgery two months ago. She has an expensive mortgage and a lot of bills. The pay stub that MassHealth used included a lot of overtime due to the holiday season, which goes through December. She would not have a more typical pay stub to provide for a few weeks.

The MassHealth representative stated that the appellant could submit updated pay stubs when she has them. He also explained MassHealth CommonHealth as a possibility if the appellant is deemed disabled. They would have to fill out the Adult Disability Supplement, which Disability Evaluation Services (DES) would then review. Based on available information, it appeared that the appellant has begun the process, but there is no disability determination yet.

Findings of Fact

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

1. The appellant is under the age of 65 with a household size of two (Testimony and Exhibit 4).

2. On October 11, 2023, MassHealth notified the appellant that her coverage would change from MassHealth CarePlus to the Health Safety Net due to a change in circumstances (Testimony and Exhibit 1).
3. The household's gross monthly income is \$2,779, which puts her at 164.2% of the Federal Poverty Level (Testimony and Exhibit 1).
4. The appellant did not dispute her income, but stated it did include overtime (Testimony).
5. To qualify for MassHealth CarePlus benefits, the appellant's income would have to be at or below 133% of the Federal Poverty Level, or \$2,186 for a household of two (Testimony).
6. On November 27, 2023, the appellant timely appealed the notice (Exhibit 2).
7. Based on her household income, the appellant is currently eligible for a Connector Care Type 2B plan through the Health Connector (Testimony).
8. The appellant has not been determined disabled (Testimony).

Analysis and Conclusions of Law

MassHealth offers a variety of benefits based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below a certain financial threshold.

The MassHealth coverage types are set forth at 130 CMR 505.001(A) as follows:

- (1) Standard for pregnant women, children, parents and caretaker relatives, young adults,¹ disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) CommonHealth for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) CarePlus for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) Family Assistance for children, young adults, certain noncitizens and persons who are HIV positive who are not eligible for MassHealth Standard, CommonHealth, or CarePlus;
- (5) Small Business Employee Premium Assistance for adults or young adults who

¹ "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

- (a) work for small employers;
- (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus;
- (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and
- (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage;
- (6) Limited for certain lawfully present immigrants as described in 130 CMR 504.003(A), nonqualified PRUCOLs and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (7) Senior Buy-in and Buy-in for certain Medicare beneficiaries.

Categorically, the appellant is eligible for CarePlus; however, under 130 CMR 505.008(A)(2)(c), the income limit for CarePlus coverage is 133% of the FPL. For a household of two, that limit is \$2,186 per month. The appellant's most recently verified gross monthly income is \$2,779, or 164.2% of the FPL. Based on this figure, she is over the income limit for MassHealth CarePlus benefits.² For these reasons, the MassHealth decision is correct and the appeal is denied.³

Order for MassHealth

None.

² The appellant may qualify for MassHealth CommonHealth in the future, pending her submission and MassHealth's review of the Adult Disability Supplement; however, that determination is outside the scope of this appeal.

³ The appellant can direct any questions about Health Connector plans to 1-877-MA-ENROLL (1-877-623-6765), or inquiries concerning Health Safety Net to 877-910-2100.

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.

Alexandra Shube
Hearing Officer
Board of Hearings

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