

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2401984
Decision Date:	4/29/2024	Hearing Date:	03/12/2024
Hearing Officer:	Marc Tonaszuck		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Kim McFarland

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

Appeal Decision:	Denied	Issue:	Eligibility – Under 65 Years of Age
Decision Date:	4/29/2024	Hearing Date:	03/12/2024
MassHealth's Rep.:	Kim McFarland	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center	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 01/22/2024, MassHealth informed the appellant that he was not eligible for MassHealth benefits because his income exceeds the program limits. Through the same notice, MassHealth informed the appellant that is eligible for Health Safety Net and a Health Connector plan (130 CMR 505.002 - .009, 506.001 - .004; Exhibit 1). The appellant filed a timely appeal on 02/08/2024 (130 CMR 610.015(B) and Exhibit 2). Denial of benefits is valid grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth denied the appellant's application for MassHealth benefits.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant is not eligible for MassHealth benefits.

Summary of Evidence

Both the MassHealth representative and the appellant appeared at the fair hearing telephonically. The MassHealth representative testified that a recent eligibility review showed that the appellant is a member of a household of four people, including his wife and two children who are under 19 years of age. The appellant is under the age of 65, as is his wife. The family has gross monthly income that is \$5,083.00, which equates to 195% of the federal poverty limit (FPL).

The MassHealth representative testified that in order to be eligible for MassHealth benefits, the parent of a child under 19 years of age must have income that is less than 133% of the FPL, or \$3,458 per month. Because the household's income exceeds 133% of the FPL, the appellant was determined to be eligible for the Health Safety Net and he was referred to the Health Connector.

The appellant appeared at the fair hearing telephonically and was assisted by an [REDACTED] interpreter. He stated he understood the MassHealth representative's testimony and had nothing to add.

Findings of Fact

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

1. The appellant is between the ages of 19 and 64 and he lives with his wife and two children who are under 19 years of age (Testimony).
2. For the purposes of MassHealth eligibility, the appellant is counted as part of a household of 4 (Testimony).
3. The family has gross monthly income of \$5,083.00, which equates to 195% of the federal poverty limit (Testimony).
4. 133% of the federal poverty limit for a household of 4 is \$3,458.00 per month (03/2024).
5. On 01/22/2024, MassHealth informed the appellant that he was not eligible for MassHealth benefits because his income exceeds the program limits. Through the same notice, MassHealth informed the appellant that is eligible for Health Safety Net and a Health Connector plan (Exhibit 1).
6. The appellant filed a timely appeal on 02/08/2024 (Exhibit 2).
7. A fair hearing was held on 03/12/2024. The appellant appeared telephonically, as did the MassHealth representative (Exhibit 3).

Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 505.001 address MassHealth coverage types as follows:

The MassHealth coverage types are the following:

- (1) MassHealth Standard - for people who are pregnant, children, parents and caretaker relatives, young adults, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health (DMH) members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) MassHealth CommonHealth - for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) MassHealth CarePlus - for adults 21 through 64 years old who are not eligible for MassHealth Standard;
- (4) MassHealth Family Assistance - for children, young adults, certain noncitizens and persons who are HIV positive who are not eligible for MassHealth Standard, MassHealth CommonHealth, or MassHealth CarePlus;
- (5) MassHealth Limited - for certain lawfully present immigrants as described in 130 CMR 504.003(A): Lawfully Present Immigrants, nonqualified PRUCOLs, and other noncitizens as described in 130 CMR 504.003: Immigrants; and
- (6) MassHealth Medicare Savings Programs (MSP, also called Senior Buy-in and Buy-in) for certain Medicare beneficiaries.

Regulations at 130 CMR 505.002(C) address eligibility for MassHealth Standard benefits as the parent of a child under 19, as follows:

(C) Eligibility Requirements for Parents and Caretaker Relatives.

- (1) A parent or caretaker relative of a child younger than 19 years old is eligible for MassHealth Standard coverage if
 - (a) ***the modified adjusted gross income of the MassHealth MAGI household is less than or equal to 133% of the federal poverty level (FPL);***
 - (b) the individual is a citizen as described at 130 CMR 504.002: U.S. Citizens or a qualified noncitizen as described in 130 CMR 504.003(A)(1): Qualified Noncitizens; and
 - (c) 1. the parent lives with their children, and assumes primary responsibility for the child's care in the case of a parent who is separated or divorced, has custody of their children, or have children who are absent from home to attend school; or
2. the caretaker relative lives with children to whom they are related by blood, adoption, or marriage (including stepsiblings), or is a spouse or former spouse of one of those relatives, and assumes primary responsibility for the child's care, if neither parent lives in the home.
- (2) The parent or caretaker relative complies with 130 CMR 505.002(M).

(Emphasis added.)

MassHealth determined that the appellant is not eligible for MassHealth Standard benefits because the household's income exceeds the guidelines for that benefit. MassHealth determined that the household's gross monthly income is \$5,083.00. The appellant is counted as a member of a household of four people, including his wife and two children who are under 19 years of age. In order to be income-eligible for MassHealth Standard benefits as the parent of a child who is under 19 years of age, the family's gross monthly income cannot be more than 133% of the FPL, or \$3,458.00.

The appellant did not dispute the family's income or household size. Accordingly, he has presented no information to show MassHealth's decision to deny his benefits is incorrect. MassHealth's determination is supported by the material facts in the hearing record, as well as the relevant regulations. This appeal is therefore denied.

Appellant can direct any inquiries concerning Health Safety Net to 877-910-2100. Health Connector questions can be addressed by calling 1-877-623-6765. Additionally, if the appellant's income or household size changes, he should contact MassHealth for a new determination of benefits.

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.

Marc Tonaszuck
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104