

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2403790
Decision Date:	6/6/2024	Hearing Date:	04/10/2024
Hearing Officer:	Emily Sabo		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Raybryana Dasher, Taunton 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:	Community Eligibility; Over 65
Decision Date:	6/6/2024	Hearing Date:	04/10/2024
MassHealth's Rep.:	Raybryana Dasher	Appellant's Rep.:	Pro se
Hearing Location:	Taunton MassHealth Enrollment Center (Telephone)	Aid Pending:	Yes

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 February 28, 2024, MassHealth stated that the Appellant was eligible for Senior Buy-In and that the Appellant's MassHealth Standard coverage would end because her income is too high.¹ See 130 CMR 519.002, 130 CMR 519.010, and Exhibit 1. The Appellant filed this appeal in a timely manner on March 12, 2024. See 130 CMR 610.015(B) and Exhibit 2. Denial of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth found that the Appellant was eligible for Senior Buy-In and that the Appellant no longer qualified for MassHealth Standard because her income is too high.

Issue

¹ The notice refers to the Appellant's income or assets, but at the hearing, the MassHealth representative clarified that the Appellant is under the \$2,000 asset limit.

The appeal issue is whether MassHealth was correct in determining that the Appellant is not eligible for MassHealth Standard due to her income.

Summary of Evidence

The hearing was held telephonically. The MassHealth representative testified that the Appellant is over the age of [REDACTED] and has a household size of one. The MassHealth representative testified that the Appellant's household income is \$2,203/monthly from Social Security. The MassHealth representative testified that to qualify for MassHealth Standard, the household income must be 100% or less of the federal poverty level, which equals \$1,255/monthly for a household of one. The MassHealth representative also stated that the Appellant could request a clinical assessment from an elder services organization, to see if the Appellant would qualify for a frail elder waiver under 130 CMR 519.007(B).

The Appellant verified her identity. The Appellant did not dispute her monthly income. The Appellant testified that the increase in her Social Security income was due to the deaths of her first and second husbands, who she lost under tragic circumstances. The Appellant was very upset by the prospect of her coverage ending and stated that she wanted to continue with her current Commonwealth Care Alliance coverage. The Appellant explained that the Commonwealth Care Alliance staff understands her and her health needs. The Appellant stated that it was unfair for her to lose her health coverage at her age. The Appellant stated that she is behind on her rent payments and is concerned about her other expenses if her Commonwealth Care Alliance coverage ends.

Findings of Fact

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

1. The Appellant is over the age of [REDACTED]. Testimony and Exhibit 4.
2. The Appellant has a household size of one. Testimony.
3. The Appellant has a monthly household income of \$2,203. Testimony and Exhibit 1.

Analysis and Conclusions of Law

I am sorry for the Appellant's frustration and challenges. However, to the extent that these arguments pertain to the legality of the applicable regulations, it is beyond the scope of the hearing officer's decision-making authority. MassHealth Fair Hearing regulations state, in

pertinent part:

the hearing officer must not render a decision regarding the legality of federal or state law including, but not limited to, the MassHealth regulations. If the legality of such law or regulations is raised by the appellant, ***the hearing officer must render a decision based on the applicable law or regulation as interpreted by the MassHealth agency.*** Such decision must include a statement that the hearing officer cannot rule on the legality of such law or regulation and must be subject to judicial review in accordance with 130 CMR 610.092.

130 CMR 610.082(C)(2) (emphasis added)

In evaluating financial eligibility for MassHealth Standard, the regulations at 130 CMR 519.005 provide:

519.005: Community Residents ■ Years of Age and Older

(A) Eligibility Requirements. Except as provided in 130 CMR 519.005(C),² noninstitutionalized individuals ■ years of age and older may establish eligibility for MassHealth Standard coverage provided they meet the following requirements:

(1) the countable-income amount, as defined in 130 CMR 520.009: Countable-income Amount, of the individual or couple is less than or equal to 100% of the federal poverty level;

and

(2) the countable assets of an individual are \$2,000 or less, and those of a married couple living together are \$3,000 or less.

(B) Financial Standards Not Met. Except as provided in 130 CMR 519.005(C), individuals whose income, assets, or both exceed the standards set forth in 130 CMR 519.005(A) may establish eligibility for MassHealth Standard by reducing their assets in accordance with 130 CMR 520.004: Asset Reduction, meeting a deductible as described at 130 CMR 520.028: Eligibility for a Deductible through 520.035: Conclusion of the Deductible Process, or both.

130 CMR 519.005(A), (B) (emphasis added)

The MassHealth regulations at 130 CMR 501.001 define the federal poverty level as, “income standards issued annually in the *Federal Register* to account for the last calendar year's increase in prices as measured by the Consumer Price Index.” For 2024, the *Federal Register* states that the federal poverty level for a household of one is \$1,255 monthly.

² 130 CMR 519.005(C) details the eligibility requirements for parents or caretaker relatives of a child younger than ■ years old.

Therefore, because there is no dispute that the Appellant's household income is \$2,203 monthly, which is greater than 100% of the federal poverty level or \$1,255, the Appellant is not financially eligible for MassHealth Standard unless she meets the deductible provided for in 130 CMR 519.005(B). 130 CMR 519.005(A)(1). Accordingly, the Appellant is not financially eligible for MassHealth Standard and MassHealth did not err in sending out the February 28, 2024, notice.

The appeal is denied.

Order for MassHealth

None. End Aid Pending.

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.

Emily Sabo
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780