

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



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|-------------------------|-----------------|------------------------|------------|
| Appeal Decision: | Denied | Appeal Number: | 2404690 |
| Decision Date: | 07/12/2024 | Hearing Date: | 05/03/2024 |
| Hearing Officer: | Alexandra Shube | Record Open to: | 05/31/2024 |

Appearance for Appellant:



Appearance for MassHealth:

Via telephone:

Fabienne Jeanniton, 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

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|---------------------------|--|--------------------------|---------------------------------------|
| Appeal Decision: | Denied | Issue: | Eligibility; Under 65; Over Income |
| Decision Date: | 07/12/2024 | Hearing Date: | 05/03/2024 |
| MassHealth's Rep.: | Fabienna Jeanniton | Appellant's Rep.: | Pro se |
| Hearing Location: | Tewksbury MassHealth Enrollment Center Remote | 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 March 8, 2024, MassHealth notified the appellant that her coverage would change from MassHealth Standard to Health Safety Net due to a change in circumstances (Exhibit 1). The appellant filed this appeal in a timely manner on or around March 25, 2024 (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).

The record was held open for the appellant until May 31, 2024.

Action Taken by MassHealth

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

Issue

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

Summary of Evidence

The appellant and the MassHealth representative appeared at hearing via telephone. The MassHealth representative testified as follows: the appellant, who is under the age of 65 with a household size of four, completed a renewal application which MassHealth received on March 8, 2024. Based on the income reported (\$68,416.52 gross annually or \$2,631 every two weeks), the appellant's household modified adjusted gross income (MAGI) was 214.28% of the Federal Poverty Level (FPL). The income limit for a non-disabled adult under the age of 65 to qualify for MassHealth Standard benefits is 133% of the FPL, or \$41,496 gross per year (or \$3,458 gross per month) for a household of four. Therefore, MassHealth determined that the appellant was over the income limit for MassHealth benefits and notified her on March 8, 2024 that her benefits would change from MassHealth Standard to the Health Safety Net, with Standard benefits terminating on April 30, 2024 and the Health Safety Net taking effect on February 27, 2024. The notice also stated that the appellant's benefits had been temporarily protected for a specific reason, such as the Public Health Emergency, which had now ended. This is the notice under appeal.

The MassHealth representative explained that due to the Covid Public Health Emergency, the appellant remained on MassHealth Standard, despite being over the income limit. When the Public Health Emergency ended, the appellant's eligibility and income were re-evaluated, resulting in the change in coverage. One of the appellant's children remains on MassHealth Standard because she gets the benefit through Social Security. The other child's coverage has changed from MassHealth Standard to MassHealth Family Assistance with a \$20 per month premium.

The appellant testified that the income is not necessarily accurate because the income reported was based on last year's income which included a large amount of overtime. That overtime is not guaranteed this year. Usually, her spouse, the only one working in the household, grosses less than \$2,000 every two weeks. The appellant has ADHD, PTSD, anxiety, mood disorder/bipolar and is currently dealing with glaucoma and gallbladder issues. She stated that she is only appealing her MassHealth coverage and noted that Family Assistance works for her child. She understood that she is over the income limit to qualify, but just needed a little additional time to get on her husband's employer-sponsored insurance plan which she cannot enroll in until July.

The MassHealth representative explained that the appellant could update her income with MassHealth Customer Service by providing her husband's most recent pay stubs. She also explained MassHealth CommonHealth as a possibility if the appellant is deemed disabled. She would have to fill out the Adult Disability Supplement, which Disability Evaluation Services (DES)

would then review. The MassHealth representative stated she would mail the Disability Supplement to the appellant for her consideration. She also provided the appellant with the number for Premium Assistance. The appellant's MassHealth Standard benefits are protected by aid pending during the appeal process.

The record in the appeal was left open until May 31, 2024 for the appellant to update her income with MassHealth and complete the Disability Supplement, if she chose to do so. As of July 3, 2024, MassHealth did not receive any update regarding the household's income and had no record of a disability determination from DES.

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 four (Testimony and Exhibit 4).
2. On March 8, 2024, MassHealth notified the appellant that her coverage would change from MassHealth Standard to the Health Safety Net due to a change in circumstances (Testimony and Exhibit 1).
3. Based on the appellant's most recently verified income of \$68,416.52 gross annually (or \$2,631 every two weeks), her MAGI was 214.28% of the FPL (Testimony and Exhibit 1).
4. To qualify for MassHealth benefits, the appellant's income would have to be at or below 133% of the FPL, or \$41,496 gross annually (or \$3,438 gross monthly) for a household of four (Testimony).
5. On March 25, 2024, the appellant timely appealed the notice (Exhibit 2).
6. The income reported included overtime which her husband would not necessarily get this year, but the appellant understood she was over the income limit at this time. She was looking to keep her MassHealth Standard benefits until she could enroll in her husband's employer-sponsored plan in July. (Testimony).
7. The appellant's MassHealth Standard benefits were protected by aid pending throughout the appeal process (Testimony).
8. The record was held open until May 31, 2024 for the appellant to update her income with MassHealth and submit the Adult Disability Supplement (Testimony and Exhibit 5).
9. As of July 3, 2024, MassHealth did not receive any update regarding the household's income

and had no record of a disability determination from DES (Exhibit 5).

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
 - (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, as a parent of children under the age 19, the appellant is eligible for MassHealth Standard; however, under 130 CMR 505.002(C)(1), the income limit for that coverage type is 133% of the FPL. For a household of four, that limit is \$41,496 gross annually (or \$3,458 gross monthly). The appellant's most recently verified gross annual income is \$68,416.52, or 214.28% of the FPL.

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

The appellant was given additional time to update her income but did not do so. Based on this figure, she is over the income limit for MassHealth Standard benefits and MassHealth's determination was correct.²

For these reasons, the appeal is denied.³

Order for MassHealth

None, other than to discontinue 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.

Alexandra Shube
Hearing Officer
Board of Hearings

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

² The appellant may potentially 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 inquiries concerning Health Safety Net to 877-910-2100.