Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2408211	
Decision Date:	7/29/2024	Hearing Date:	07/01/2024	
Hearing Officer:	Mariah Burns	Record Open to:		
Appearance for Appellant:		Appearance for MassHealth:		
Pro se		Yesenia Henriquez Enrollment Center	, Quincy MassHealth	

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:	Under 65; Eligibility; Immigration
Decision Date:	7/29/2024	Hearing Date:	07/01/2024
MassHealth's Rep.:	Yesenia Henriquez	Appellant's Rep.:	Pro se
Hearing Location:	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 May 16, 2024, MassHealth approved the appellant for MassHealth Limited benefits. Exhibit 1. The appellant filed this appeal in a timely manner on May 22, 2024. *See* 130 CMR 610.015(B) and Exhibit 2. Challenging agency action regarding scope and amount of assistance is valid grounds for appeal. *See* 130 CMR 610.032(5).

Action Taken by MassHealth

MassHealth found that the appellant was eligible only for MassHealth Limited benefits.

Issue

The appeal issue is whether MassHealth was correct in determining that the appellant is ineligible for benefits beyond MassHealth Limited.

Summary of Evidence

The appellant is an adult under the age of 65 who resides in a household of one. He was assisted by a Portuguese speaking interpreter secured by the Board of Hearings. The MassHealth

representative is a worker from the Quincy MassHealth Enrollment Center. All parties appeared by telephone. The following is a summary of the testimony given and the evidence provided at hearing:

The appellant applied for MassHealth, and on May 16, 2024, was approved for MassHealth Limited benefits. MassHealth reported that, although the appellant has no income, legal immigration status was unable to be verified for the appellant, hence the approval for Limited. As of the date of hearing, the appellant has provided no documents to show that he is present in the United States legally.

The appellant reported that he is unable to provide documentation showing that he has legal status here in the United States. He stated that he has considerable health issues and is unable to pay for the cost of his care.

Findings of Fact

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

1. The appellant is an adult under the age of 65. Testimony, Exhibit 4.

2. The appellant applied for MassHealth benefits and on May 16, 2024, MassHealth generated a notice approving the appellant for MassHealth Limited benefits due to the agency's inability to verify the appellant's legal immigration status. Testimony, Exhibit 1.

4. The appellant submitted a timely notice of appeal on May 22, 2024. Exhibit 2.

5. The appellant is unable to provide any documentation to demonstrate that he is present in the United States legally. Testimony.

6. The appellant is financially eligible for MassHealth Limited. Testimony, Exhibit 1.

Analysis and Conclusions of Law

Certain noncitizens may qualify for MassHealth benefits, depending on their legal status. The MassHealth regulations at 130 CMR 504.003 detail the circumstances in which these applicants may receive benefits. These regulations are divided into four different categories: Lawfully Present Immigrants (504.003(A)), Protected Noncitizens (504.003(B)), Nonqualified Persons Residing under Color of Law (504.003(C)), and Other Noncitizens (504.003(D)).

Within the category of Lawful Present Immigrant, there exist three separate categories: Qualified Noncitizen (504.003(A)(1)), Qualified Noncitizens Barred (504.003(A)(2)), and Qualified Individuals

Lawfully Present (504.003(A)(3)). There is no documentation in the record to support that the appellant is a Qualified Noncitizen, Qualified Noncitizen Barred, or a Qualified Individual Lawfully Present pursuant to 130 CMR 504.003(A)).

Further, there is no evidence that the appellant was receiving medical assistance or CommonHealth on June 30, 1997, thus he cannot be considered a Protected Noncitizen pursuant to 504.003(B).

There is no documentary evidence that the appellant is Nonqualified Persons Residing under Color of Law based on the myriads of options contained within 504.003(C).

The appellant reported that he is unable to provide any documentation to demonstrate that he is present in the United States legally. He provided no argument, nor was I able to find regulatory support, that his immigration status qualifies him as anything but an Other Noncitizen. The appellant is therefore an Other Noncitizen pursuant to 130 CMR 504.003(D).

Other Noncitizens may receive the following coverage pursuant to 130 CMR 504.006(D):

(1) MassHealth Standard, if they are pregnant and meet the categorical requirements and financial standards as described in 130 CMR 505.002: MassHealth Standard;

(2) MassHealth Limited, if they meet the categorical requirements and financial standards as described in 130 CMR 505.006: MassHealth Limited; and

(3) Children's Medical Security Plan, if they are children younger than 19 years old and meet the categorical requirements and financial standards as described in 130 CMR 522.004: Children's Medical Security Plan (CMSP).

Because the appellant is not pregnant, nor is he a child under the age of 19, he is only categorically eligible for MassHealth Limited benefits. Because he meets the income requirement under 130 CMR 505.006, MassHealth rightly determined that the appellant is eligible for MassHealth Limited under the regulations. I therefore find no error with the issuance of the May 16, 2024 notice.

For the foregoing reasons, the appeal is hereby 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.

Mariah Burns Hearing Officer Board of Hearings

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator, 100 Hancock Street, 6th Floor, Quincy, MA 02171