

# Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2408407
<b>Decision Date:</b>	6/27/2024	<b>Hearing Date:</b>	06/24/2024
<b>Hearing Officer:</b>	Christopher Jones		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Shana Sullivan – Quincy HCR



*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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Community; Under-65; Income
<b>Decision Date:</b>	6/27/2024	<b>Hearing Date:</b>	06/24/2024
<b>MassHealth's Rep.:</b>	Shana Sullivan	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Telephonic	<b>Aid Pending:</b>	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 April 9, 2024, MassHealth denied the appellant's application for MassHealth benefits because her income is above the eligibility threshold. (Exhibit 1; 130 CMR 506.007.) The appellant filed this appeal in a timely manner on May 28, 2024. (Exhibit 2; 130 CMR 610.015(B).) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

### Action Taken by MassHealth

MassHealth denied the appellant's application for benefits because her income was over 133% of the federal poverty level.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 506.007, in determining that the appellant's income was too high to qualify for any MassHealth benefits.

### Summary of Evidence

The appellant completed a telephonic application in April 2024, reporting a household size of one, and gross weekly income of \$964 from unemployment benefits. MassHealth's representative

testified that this income put the appellant at 327.83% of the federal poverty level. The federal poverty level for an individual is \$1,255 per month.

The appellant felt it was wrong for MassHealth to deny her benefits when her unemployment benefits were going to end in August. She did agree, however, with the gross weekly benefit amount. MassHealth's representative explained that the agency makes income determinations based on current income, not anticipated yearly income. She suggested that the appellant call back within 10 days of there being a change in any eligibility factors, and MassHealth would redetermine her eligibility. The appellant testified that she had cancer. MassHealth's representative explained that if she had breast or cervical cancer, that may affect her eligibility. The appellant did not identify the form of cancer she had, and she chose to leave the hearing call.

## Findings of Fact

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

- 1) The appellant has a household of one, and she receives gross weekly income of \$964 from unemployment benefits. (Testimony by MassHealth's representative; Exhibit 2.)
- 2) The appellant has an unspecified cancer. (Testimony by the appellant.)

## Analysis and Conclusions of Law

MassHealth offers a variety of coverage types based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below the relevant financial thresholds. Financially, members under the age of ■ who seek MassHealth CarePlus benefits must usually have countable income under 133% of the federal poverty level. (130 CMR 505.008(A).) However, individuals with breast or cervical cancer may become eligible for MassHealth Standard with income at or below 250% percent of the federal poverty level. (130 CMR 505.002(F).) Further, disabled adults between the ages of ■ and ■ can qualify for the CommonHealth program, regardless of their income by paying a monthly premium.<sup>1</sup> (See 130 CMR 505.004(B)-(C), 506.009.)

For individuals under the age of ■ countable unearned income includes "the total amount of taxable income" a member receives "after allowable deductions on the U.S Individual Tax Return," and specifically includes "social security benefits." (130 CMR 506.003(B).) Monthly income is derived by multiplying average weekly income by 4.333, and "[f]ive percentage points of the current federal poverty level (FPL) is subtracted from the applicable household total countable

---

<sup>1</sup> MassHealth no longer requires disabled members under the age of ■ to meet a one-time deductible or work 40 hours per month. (EOM 23-28 (Dec. 2023).)

income to determine eligibility of the individual under the coverage type with the highest income standard.” (130 CMR 506.007(A).).

The federal poverty level for a household of one in 2024 is \$1,225 per month. Five percent of the federal poverty level is \$62.75. The appellant’s income for eligibility purposes is \$4,114.26 per month, which is equivalent to 327.8% of the federal poverty level for a household of one.<sup>2</sup> Because the appellant’s income is over 133% of the federal poverty level, MassHealth was correct that she is ineligible for CarePlus coverage. (130 CMR 505.008.).

This appeal is DENIED.<sup>3</sup>

## **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.

---

Christopher Jones  
Hearing Officer  
Board of Hearings

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

---

<sup>2</sup>  $\$964 * 4.333 = \$4,177.012 - 62.75 = 4,114.262 / 1255 = \$3,278.$

<sup>3</sup> The appellant’s current income is also too high to qualify for Standard for Individuals with Breast or Cervical Cancer. However, if she feels this condition is disabling, she can complete a disability supplement. If she is deemed disabled, she may be eligible to purchase CommonHealth coverage for a monthly premium.