

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2409463
Decision Date:	8/29/2024	Hearing Date:	07/31/2024
Hearing Officer:	Christine Therrien		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Joanne Marin, Springfield



*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
Decision Date:	8/29/2024	Hearing Date:	07/31/2024
MassHealth's Rep.:	Joanne Marin	Appellant's Rep.:	Pro se
Hearing Location:	Springfield MassHealth Enrollment Center Telephonic		

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 5/31/24, MassHealth terminated the appellant's MassHealth Standard benefits because MassHealth determined that she was over the income limit. (130 CMR 506.007 and Exhibit 1). The appellant filed this appeal timely on 6/13/24. (130 CMR 610.015(B) and Exhibit 2). Termination of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth terminated the appellant's MassHealth Standard benefits.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 506.007, in determining that the appellant was over income for MassHealth Standard.

Summary of Evidence

The appellant appealed a notice dated 5/31/24, stating that MassHealth terminated her MassHealth Standard and she was determined eligible for Health Safety Net as of 5/21/24 because her income is over the income limit for Standard. The MassHealth representative testified that the appellant called on 5/31/24 to make changes to her household and updated her income. The appellant's child is no longer a tax dependent. The MassHealth representative testified that the appellant reported a disability. The MassHealth representative testified that a disability supplement was mailed out to the appellant to determine eligibility for CommonHealth, but Disability Evaluation Services has not made a determination yet. The MassHealth representative testified that the appellant has a household of 1 with a household income of \$1,558.53 every two weeks, which is 241.80% of the 2024 federal poverty level. The MassHealth representative testified that 133% of the federal poverty level is the maximum to qualify for MassHealth. For a family of 1, this is \$1,669 a month. The appellant also qualifies for a Connector Care Plan Type 3a.

The appellant testified that she mailed the disability supplement to [REDACTED] (Disability Evaluation Services), but did not know the date. The appellant testified that she is insulin-dependent and has been hospitalized three times.

Findings of Fact

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

1. The appellant is a MassHealth member under age [REDACTED] who lives in a household of one.
2. On 5/31/24, MassHealth terminated the appellant's MassHealth Standard and she was determined eligible for Health Safety Net as of 5/21/24 because her income is over the income limit for Standard.
3. On 5/31/24, the appellant called MassHealth and updated her income and household size.
4. The appellant has a household income of \$1,558.53 every two weeks, which is 241.80% of the 2024 federal poverty level.
5. 133% of the federal poverty level is the maximum to qualify for MassHealth. For a family of 1 this is \$1,669 a month.
6. The appellant reported a disability, and a disability supplement was mailed out to the appellant to determine eligibility for CommonHealth.
7. The appellant mailed the disability supplement to Disability Evaluation Services. Disability Evaluation Services has not made a determination as of the date of the hearing.

8. The appellant also qualifies for a Connector Care Plan Type 3a.

Analysis and Conclusions of Law

130 CMR 505.000 explains the categorical requirements and financial standards that must be met to qualify for a MassHealth coverage type. As described in 130 CMR 505.001(A), the MassHealth coverage types are as follows:

- (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 [REDACTED] 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.

The rules of financial responsibility and calculation of financial eligibility are detailed in 130 CMR 506.000. (130 CMR 505.001). The financial eligibility for various MassHealth coverage types is determined by comparing the household group's monthly gross income with the applicable income standards for the specific coverage. (130 CMR 506.003).¹ While the appellant is between

¹ 130 CMR 506.003: Countable Household Income. Countable household income includes earned income described in 130 CMR 506.003(A) and unearned income described in 130 CMR 506.003(B), less deductions described in 130 CMR 506.003(D). (A) Earned Income. (1) Earned income is the total amount of taxable compensation received for work or services performed less pretax deductions. Earned income may include wages, salaries, tips, commissions, and bonuses. (2) Earned taxable income for the self-employed is the total amount of taxable annual income from self-employment after deducting annual business expenses listed or allowable on a U.S. Individual Tax Return. Self-employment income may be a profit or a loss (3) Earned income from S-Corporations or Partnerships is the total amount of taxable annual profit (or loss) after deducting business expenses listed or allowable on a U.S. Individual Tax Return. (4) Seasonal income or other reasonably predictable future income is taxable income derived from an income source that may fluctuate during the year. Annual gross taxable income is divided by 12 to obtain a monthly taxable gross income with the following exception: if the applicant or member has a disabling illness or accident during or after the seasonal employment or other reasonably predictable future income period that

■■■■■ years of age, she is not pregnant, does not have breast cancer or cervical cancer, is not a parent living with a child under the age of ■■■■ does not have HIV, and has not yet met the MassHealth disability rules. Accordingly, the appellant is not categorically eligible for any MassHealth coverage type.

The appellant's income is too high for MassHealth eligibility, but she is eligible for a plan through the Health Connector.

This appeal is denied.

Appellant can direct any questions about Health Connector plans to 1-877-MA-ENROLL (1-877-623-6765), or inquiries concerning Health Safety Net to 877-910-2100.

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

prevents the person's continued or future employment, only current taxable income will be considered in the eligibility determination. (B) Unearned Income. (1) Unearned income is the total amount of taxable income that does not directly result from the individual's own labor after allowable deductions on the U.S Individual Tax Return. (2) Unearned income may include, but is not limited to, social security benefits, railroad retirement benefits, pensions, annuities, certain trusts, interest and dividend income, state or local tax refund for a tax you deducted in the previous year, and gross gambling income. (C) Rental Income. Rental income is the total amount of taxable income less any deductions listed or allowable on an applicant's or member's U.S. Individual Tax Return.

Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Christine Therrien
Hearing Officer
Board of Hearings

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center