

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Approved in part; Denied in part	Appeal Number:	2410479
Decision Date:	9/16/2024	Hearing Date:	08/16/2024
Hearing Officer:	Scott Bernard		

Appearance for Appellant:
Pro se via telephone

Appearance for MassHealth:
Katie Burgess via telephone



*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:	Approved in part; Denied in part	Issue:	Under 65/Income/Downgrade Standard & Buy-In to CommonHealth
Decision Date:	9/16/2024	Hearing Date:	08/16/2024
MassHealth's Rep.:	Katie Burgess	Appellant's Rep.:	<i>Pro se</i>
Hearing Location:	Taunton MassHealth Enrollment Center	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 June 25, 2024 MassHealth notified the appellant that she would start receiving MassHealth CommonHealth on June 15, 2024, but that her MassHealth Standard would end after July 9, 2024. (See 130 CMR 505.002; 505.004; 506.007; and Exhibit (Ex.) 1). The appellant filed this appeal in a timely manner on July 3, 2024 and received aid pending appeal. (See 130 CMR 610.015(B) and Ex. 2). Denial of assistance is valid grounds for appeal. (See 130 CMR 610.032).

Action Taken by MassHealth

MassHealth informed the appellant that her coverage would change from MassHealth Standard to MassHealth CommonHealth on June 15, 2024 and that her MassHealth Standard would end after July 9, 2024.

Issue

Whether the appellant is eligible for more comprehensive MassHealth coverage.

Summary of Evidence

An eligibility worker from the Taunton MassHealth Enrollment Center (MEC) and the appellant both attended the hearing by telephone.

The MassHealth representative testified to the following. The appellant is under 65 years old and lives in a household of one. (Testimony; Ex. 3). The appellant is a non-tax filer. (Testimony). From December 13, 2023 through July 9, 2024, the appellant was eligible for MassHealth Standard with the Medicare Savings Plan/Buy-In. (Testimony; Ex. 3). The appellant's gross monthly income (GMI) was \$1,566.99 from Social Security, which is 119.86% of the federal poverty level (FPL) for the appellant's household size of one. (Testimony). The income limit for MassHealth Standard for a household of one is \$1,670 per month, which is 133% of the FPL. (Testimony).

On June 25, 2024, Social Security directly updated the MassHealth computer system. (Testimony). Social Security reported that the appellant's monthly income had increased to \$1,735. (Testimony). The countable portion of the appellant's income was now equal to 133.25% of the FPL. (Testimony). The appellant's GMI therefore exceeded the income limit for MassHealth Standard. (Testimony; Ex. 1). The appellant is disabled, however, and therefore was eligible for MassHealth CommonHealth as a disabled non-working adult. (Testimony; Ex. 3).

The appellant testified that she understood MassHealth's position in regard to the income determination. (Testimony). She did not dispute that her Social Security had increased to \$1,735 per month. (Testimony). The appellant also did not object to receiving MassHealth CommonHealth. (Testimony). The appellant, however, was concerned that MassHealth would no longer pay her Medicare Part B premium. (Testimony). The appellant stated that because she has a fixed income, it would be especially difficult for her to make ends meet after losing \$170 per month from her Social Security check. (Testimony).

Findings of Fact

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

1. The appellant is under 65 years old and lives in a household of one. (Testimony; Ex. 3).
2. The appellant is a non-tax filer. (Testimony).
3. From December 13, 2023 through July 9, 2024, the appellant was eligible for MassHealth Standard with the Medicare Savings Plan/Buy-In. (Testimony).
4. The appellant's GMI was \$1,566.99 from Social Security, which is 119.86% of the FPL for a household of one. (Testimony).

5. The income limit for MassHealth Standard for a household of one is \$1,670 per month, which is 133% of the FPL. (Testimony).
6. On June 25, 2024, there was a system update directly from Social Security which reported that the appellant's Social Security, and therefore her GMI, had increased to \$1,735. (Testimony).
7. The countable portion of the appellant's income was now equal to 133.25% of the FPL. (Testimony).
8. The appellant's GMI exceeds the income limit to receive MassHealth Standard. (Testimony; Ex. 1).
9. The appellant is disabled, however, and therefore is eligible for MassHealth CommonHealth as a disabled non-working adult. (Testimony; Ex. 3).

Analysis and Conclusions of Law

Financial eligibility for coverage types that are determined using the Disabled Adult household rules is determined by comparing the sum of all countable income less deductions for the individual's household with the applicable income standard for the specific coverage type. (130 CMR 506.007(A)). MassHealth will construct a household for each individual who is applying for or renewing coverage; different households may exist within a single family, depending on the family members' familial and tax relationships to each other. (130 CMR 506.007(A)(1)).

Once the individual's household is established, financial eligibility is determined by using the total of all countable monthly income for each person in that individual's household. Income of all the household members forms the basis for establishing an individual's eligibility. (130 CMR 506.007(A)(2)).

A household's countable income is the sum of the gross income of every individual included in the individual's household with the exception of children and tax dependents who are not expected to be required to file a return. (130 CMR 506.007(A)(2)(a)). Countable income includes earned income (not applicable in this appeal) and unearned income (described below) less deductions¹. (130 CMR 506.007(A)(2)(b)). Unearned income is the total amount of taxable

¹ Neither the MassHealth representative nor the appellant stated that any deductions were applicable here but they are described in 130 CMR 506.003(D) and are as follows: student loan interest; educator expenses; reservist/performance artist/fee-based government official expenses; health savings account; moving expenses, for the amount and populations allowed under federal law; one-half self-employment tax; self-employment retirement account; penalty on early withdrawal of savings; alimony paid to a former spouse for individuals with alimony agreements finalized on or before December 31, 2018 (those finalized after December 31, 2018, or pre-existing agreements /modified after December 31, 2018, are not deductible); individual retirement account (IRA); scholarships, awards, or fellowships used solely for

income that does not directly result from the individual's own labor after allowable deductions on the U.S Individual Tax Return and 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. (130 CMR 506.003(B)).

Once MassHealth determines a household's countable income, it then determines what percentage of the federal poverty level that income is and subtracts five percentage points from that number. (130 CMR 506.007(A)(3)). This adjusted income is then compared to the federal poverty level to determine the individual's eligibility. (Id.).

A disabled adult 21 through 64 years old is eligible for MassHealth Standard coverage if they are permanently and totally disabled; have household modified adjusted gross income that is less than or equal to 133% of the FPL; are a citizen or a qualified noncitizen; and utilize available health insurance benefits and must enroll in that health insurance if it is available at no greater cost to the member than they would pay without access to health insurance, or if purchased by MassHealth. (130 CMR 505.002(E)(1)).

The appellant meets the categorical criteria for MassHealth Standard for disabled adults from 21 through 64 years old. The income limit for MassHealth Standard 133% of the FPL, which is \$1,670 per month for a household of one. The appellant's the gross monthly household income is \$1,735, which is 138.25% of the FPL for a household of one. After deducting five percentage points from this raw figure, the appellant's countable income is equal to 133.25% of the FPL. Since the appellant's countable income exceeds 133% of the FPL, the appellant is not financially eligible for MassHealth Standard at this time.

A disabled adult 21 through 64 years old is eligible for MassHealth CommonHealth if they are permanently and totally disabled; ineligible for MassHealth Standard; are a citizen; meet a one-time-only deductible or have modified adjusted gross income that is less than or equal to 200% of the FPL and provide verification that they are HIV positive; and utilize available health insurance benefits and must enroll in that health insurance if it is available at no greater cost to the member than they would pay without access to health insurance, or if purchased by MassHealth. (130 CMR 505.004(C)). MassHealth will also pay the cost of monthly Medicare Part B premiums² on behalf of members who are eligible for CommonHealth and who have modified adjusted gross income that is less than or equal to 135% of the FPL. (130 CMR 505.004(L)(1)). If MassHealth determines the member is eligible for this benefit, it begins on the first day of the month following the date of the MassHealth eligibility determination and may be retroactive up to three months prior to the date

educational purposes; student loan interest; and other deductions described in the Tax Cut and Jobs Act of 2017, Public Law 115-97 for as long as those deductions are in effect under federal law.

² in accordance with the Medicare Savings Program as described in 130 CMR 519.010: Medicare Savings Program (MSP) – Qualified Medicare Beneficiaries (QMB) and 519.011: Medicare Saving Program (MSP) – Specified Low Income Medicare Beneficiaries and Qualifying Individuals.

the application was received by MassHealth. (130 CMR 505.004(L)(2)).

The appellant does meet the categorical criteria for MassHealth CommonHealth described above. This is consistent with MassHealth's eligibility determination. The record also shows that the countable portion of the appellant's income is 133.25% of the FPL. Since the appellant is both eligible for CommonHealth and has modified adjusted gross income that is less than or equal to 135% of the FPL, the appellant should also have been determined eligible for CommonHealth with MSP/Buy-In.

For the above stated reasons, the appeal is DENIED IN PART with respect to the appellant's continued eligibility for MassHealth Standard but APPROVED IN PART with respect to her eligibility for CommonHealth with MSP/Buy-In.

Order for MassHealth

After removing Aid Pending, approve the appellant for CommonHealth starting on June 15, 2024 as well as MSP starting on July 1, 2024.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Scott Bernard
Hearing Officer
Board of Hearings

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