

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2412956
<b>Decision Date:</b>	10/10/2024	<b>Hearing Date:</b>	09/16/2024
<b>Hearing Officer:</b>	Alexandra Shube		

**Appearance for Appellant:**



**Appearances for MassHealth:**

*Via Teams Videoconference:*

Michael Rossi, Quincy MEC

Roxana Noriega, Premium Assistance



*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>	Under 65; Premium Assistance; Eligibility - Income
<b>Decision Date:</b>	10/10/2024	<b>Hearing Date:</b>	09/16/2024
<b>MassHealth's Reps.:</b>	Michael Rossi; Roxana Noriega	<b>Appellant's Rep.:</b>	██████
<b>Hearing Location:</b>	Quincy Harbor South Remote	<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 August 19, 2024, MassHealth informed the appellant that it had stopped her Premium Assistance payments (Exhibit 1). The appellant filed this appeal in a timely manner on August 20, 2024 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth stopped the appellant's Premium Assistance payments.

### Issue

The appeal issue is whether MassHealth was correct in determining that the appellant no longer qualifies for MassHealth Premium Assistance payments.

## Summary of Evidence

The MassHealth representative, Premium Assistance representative, and appellant all appeared at hearing via Teams videoconference. The MassHealth representative testified as follows: in May 2024, the appellant, who is under the age of 65 and has a household size of one, was approved for MassHealth CarePlus; however, she updated her income in August 2024 and MassHealth determined she was over the income limit for MassHealth benefits.<sup>1</sup> The appellant 's most recently verified gross monthly income was \$2,441, which was 189.53% of the Federal Poverty Level (FPL). The MassHealth representative explained that to qualify for MassHealth benefits, the income limit for a non-disabled adult under the age of 65 is 133% of the FPL, or \$1,670 gross per month for a household size of one. The Premium Assistance representative explained that because the appellant no longer qualifies for MassHealth benefits, she is not eligible to receive MassHealth Premium Assistance payments. Therefore, on August 19, 2024, MassHealth notified the appellant that it had stopped her Premium Assistance payments. This is the notice under appeal.

The appellant testified that she has multiple sclerosis (MS). She wants to be able to keep her employer-sponsored insurance and the same doctors who have been part of her care team for a long time, but her employer-sponsored insurance is too expensive without Premium Assistance. It is \$300 out-of-pocket and she can't afford that. The Health Connector plans were even more expensive than her employer-sponsored plan. She stated that her income has decreased since she updated it in August. She nets about \$1,094 every two weeks, but understood that her gross income (which she did not have at hearing) would be more and based on the net income alone, she would still be over the income limit to qualify for MassHealth benefits.

The MassHealth representative recommended that the appellant fill out the Adult Disability Supplement and submit it to Disability Evaluation Services (DES) for evaluation. Currently, there is no verified disability in MassHealth's system. If she is determined disabled by DES she may qualify for MassHealth CommonHealth and become eligible for Premium Assistance payments again. She should also update MassHealth with any changes in income.

## 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 with a household size of one who is no longer MassHealth eligible (Testimony and Exhibit 4).

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<sup>1</sup> On August 19, 2024, in a separate notice than the one under appeal, MassHealth notified the appellant of the downgrade in her coverage from MassHealth CarePlus plus Premium Assistance, to the Health Safety Net because she no longer meets the income requirements. See Exhibit 5. This notice also informed her that MassHealth stopped her Premium Assistance payments. This notice was not appealed.

2. Through a notice dated August 19, 2024, MassHealth informed the appellant that it had stopped her Premium Assistance payments. This is the notice under appeal. (Testimony and Exhibit 1).
3. On August 20, 2024, the appellant timely appealed the notice (Exhibit 4).
4. In a separate notice also dated August 19, 2024, MassHealth informed the appellant that her coverage was being downgraded from MassHealth CarePlus plus Premium Assistance to the Health Safety Net because she no longer meets the income requirements for MassHealth benefits (Exhibit 6).
5. The appellant's most recently verified gross monthly income is \$2,441, which was 189.53% of the FPL (Testimony and Exhibit 6).
6. To qualify for MassHealth benefits as a non-disabled adult, the appellant's income would have to be at or below 133% of the FPL, or \$1,670 gross per month for a household of one (Testimony).
7. The appellant testified that her income has decreased since she verified it in August, but acknowledged that it was still over the allowable limit. Currently, she nets about \$1,094 every two weeks (she did not have her gross income available at hearing). (Testimony).
8. The appellant has MS, but had not yet submitted the Adult Disability Supplement to DES for a disability determination and there is no verified disability in MassHealth's system (Testimony).
9. The appellant wants to keep her employer-sponsored insurance plan, but she cannot afford the out-of-pocket cost without Premium Assistance payments (Testimony).
10. A person must be an active MassHealth member to be eligible for Premium Assistance payments (Testimony).

## **Analysis and Conclusions of Law**

At issue is whether MassHealth correctly terminated the appellant's Premium Assistance payments. To determine that, it is necessary to first address whether MassHealth correctly determined that the appellant is no longer eligible for MassHealth benefits.

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,<sup>2</sup> 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, the appellant is eligible for CarePlus; however, under 130 CMR 505.008(A)(2)(c), the income limit for CarePlus coverage is 133% of the FPL. For a household of one, that limit is \$1,670 gross per month. The appellant's most recently verified gross monthly income is \$2,441, or 189.53% of the FPL. Based on this figure, MassHealth correctly determined that the appellant is not eligible for MassHealth CarePlus benefits. While the appellant has MS, she has not yet been determined disabled by DES and there is no verified disability in MassHealth's system. For that reason, she is not eligible for MassHealth CommonHealth at this time; however, she is encouraged to submit the Adult Disability Supplement to DES for review.

Through its Premium Assistance program, MassHealth provides financial assistance to eligible MassHealth members that have access to private health insurance, to help cover the cost of their health insurance premiums. See 130 CMR 506.012(A). As the appellant is not an active

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<sup>2</sup> "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

MassHealth member, she does not qualify for MassHealth Premium Assistance payments.

For these reasons, MassHealth's determination is correct and the appeal is 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.

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Alexandra Shube  
Hearing Officer  
Board of Hearings

cc:

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

Premium Assistance