

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2416074
Decision Date:	01/21/2025	Hearing Date:	11/20/2024
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:



Appearance for MassHealth:

Jamie Zalucki



*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 Over 65; Community
Decision Date:	01/21/2025	Hearing Date:	11/20/2024
MassHealth's Rep.:	Jamie Zalucki	Appellant's Rep.:	██████
Hearing Location:	Springfield MEC	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 October 8, 2024, MassHealth informed Appellant that her coverage would change from MassHealth Standard to Senior Buy-In because her income exceeds the eligibility limit for Standard ([Exhibit A](#)). The notice also indicated that Appellant could establish eligibility for Standard by meeting a deductible of \$7,806.00 every six months ([Exhibit A](#)). Appellant filed for an appeal in a timely manner on October 17, 2024 ([Exhibit A](#)). Eligibility determinations constitute valid grounds for appeal (see, 130 CMR 610.032(A)).

Action Taken by MassHealth

MassHealth determined Appellant is eligible for Senior Buy-In, but not Standard benefits, although she could re-establish eligibility for Standard by meeting a deductible every six months.

Issue

Whether MassHealth properly applied the controlling regulation(s) to accurate facts when it determined Appellant is eligible for Senior Buy-In, but not Standard benefits, although she could re-establish eligibility for Standard by meeting a deductible every six months.

Summary of Evidence

Both parties appeared by telephone.

The MassHealth representative testified that Appellant is a non-disabled adult, over the age of 65, who resides in the community in a household of one with monthly gross countable income of \$1,843.00. The MassHealth representative explained that Appellant's gross countable monthly income exceeds 100% of the federal poverty level for a household of one (\$1,255.00) which is the applicable income limit for MassHealth Standard. Accordingly, to become eligible for MassHealth Standard, Appellant would need to meet a deductible every six months. Based on Appellant's current income, the deductible amount is \$7,806.00. The MassHealth representative further testified that Appellant is eligible for the Senior Buy-In program which means MassHealth will be paying the Medicare premium that would otherwise be deducted from her monthly Social Security check.

Appellant and her representative testified that Appellant's [REDACTED] also resides in her home. In response, the MassHealth representative explained that adult children are not counted as part of the household.

Appellant testified that she has not been receiving her monthly Social Security income because she owed the Social Security Administration \$18,000.00. She explained that checks stopped in January 2024 but should be starting again in November 2024.

Appellant testified that she would like her MassHealth Standard benefits to continue because they are covering some ongoing dental procedures. She questioned whether her Standard benefits were still in place while this appeal was pending. The hearing officer explained that she did not receive AID PENDING status, although after looking over the file and Appellant's Fair Hearing Request, he believed that AID PENDING status should have placed, forestalling the termination of Standard benefits until the appeal decision issued. After the hearing, the hearing officer consulted with the Board of Hearings which agreed that AID PENDING should have placed. The Board placed the AID PENDING restoring Appellant's Standard benefits with no gap in coverage.

Findings of Fact

Based on a preponderance of the evidence, this record supports the following findings:

1. Appellant is a non-disabled adult, over the age of 65, who resides in the community in a household of one.
2. Appellant has monthly gross countable income of \$1,843.00.
3. Appellant's gross countable monthly income exceeds 100% of the federal poverty level for a household of one.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). On this record, Appellant has not met her burden.

Eligibility for MassHealth Standard for community-based individuals over the age of 65 is based solely on an applicant's gross countable income and total countable assets. The rules are clear, unambiguous and are applied equally to all. No consideration is given to expenses or individual circumstances other than the gross income and assets. Appellant did not dispute the income figures cited by MassHealth.

This record shows that Appellant is a non-disabled, community-based individual whose income exceeds the income standard of 100% of the federal poverty level for a household of one (\$1,255.00 as of the action date). Accordingly, MassHealth was correct in determining that Appellant is not income eligible for the MassHealth Standard program at this time (130 CMR 519.005(A)(1) and 520.009).

Appellant did not dispute her eligibility for the Senior Buy-In program or her six-month deductible to re-establish eligibility for Standard.

On this record, there is no basis in fact and/or law to overturn MassHealth's determination. For the foregoing reasons, the appeal is DENIED.

Order for MassHealth

Remove AID PENDING and proceed with determination of October 8, 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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

[REDACTED]

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186