

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2416572
<b>Decision Date:</b>	12/3/2024	<b>Hearing Date:</b>	11/29/2024
<b>Hearing Officer:</b>	Scott Bernard		

**Appearance for Appellant:**  
*Pro se via telephone*

**Appearance for MassHealth:**  
Monica Ramirez (Quincy MEC) *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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Community Eligibility-Under 65-Income
<b>Decision Date:</b>	12/3/2024	<b>Hearing Date:</b>	11/29/2024
<b>MassHealth's Rep.:</b>	Monica Ramirez	<b>Appellant's Rep.:</b>	<i>Pro se</i>
<b>Hearing Location:</b>	Quincy Harbor South	<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 September 5, 2024, MassHealth informed the appellant that he did not qualify for assistance because "the income for this person is too high." (See 130 CMR 506.007(B); 502.003 and Exhibit (Ex.) 1). The appellant filed this appeal in a timely manner on October 4, 2024. (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 determined the appellant was not eligible for MassHealth because his income exceeded the income limit for MassHealth benefits.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 506.007 and 502.003, in determining that the appellant's income exceeded the income limit to be eligible to receive MassHealth benefits.

## Summary of Evidence

An eligibility worker from the Quincy MassHealth Enrollment Center (MEC), and the appellant both attended the hearing in person.

The MassHealth representative testified to the following. The appellant is an individual under the age of 65 years old, who is living in a household of one. (Testimony; Ex. 3). The appellant had been receiving MassHealth CarePlus coverage, which ended on March 13, 2024. (Testimony; Ex. 3). On September 5, 2024, the appellant submitted a renewal application with updated income information. (Testimony). The appellant reported that his gross yearly income was \$63,170, which calculates to a gross monthly income (GMI) of \$5,264.17, or 414.46% of the federal poverty level (FPL) for a household of one. (Testimony). The income limit for a household of one to be eligible for CarePlus is \$1,670 per month or \$20,040 per year, which is 133% of the FPL. (Testimony).

The MassHealth representative spoke with the appellant several times prior to the hearing regarding the reason for the denial. (Testimony). The appellant explained that he had always been enrolled in MassHealth and was informed that his coverage would continue indefinitely while on parole. (Testimony). However, the MassHealth representative clarified that this was not the case. (Testimony). The MassHealth representative explained that, as of April 1, 2023, MassHealth provides continuous eligibility for Medicaid-eligible members under age 65 who are released from jail or prison for up to 12 months, starting from the release date and ending at the close of the 12th month. (Testimony; Ex. 5). If eligibility is determined after release but before the 12-month period concludes, continuous eligibility lasts from the determination date until the last day of the 12th month following release. (Testimony). The MassHealth representative stated that EOM 24-02 was the source of this policy. (Testimony; Ex. 5). MassHealth received the appellant's certificate of parole on May 15, 2024, indicating his release from incarceration on [REDACTED] 2021. (Testimony). Under MassHealth's continuous eligibility rules, the appellant also did not qualify for benefits. (Testimony).

The appellant testified to the following. The appellant insisted that under the Massachusetts General Laws, while he was on parole MassHealth had to continue covering him. (Testimony). The appellant stated that he was told not to answer any questions concerning his household or income, and therefore did not verify whether the information the MassHealth representative relayed concerning his household size or income was correct. (Testimony).

## Findings of Fact

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

1. The appellant is an individual under the age of 65 years old, who is living in a household of one. (Testimony; Ex. 3).

2. The appellant had been receiving MassHealth CarePlus coverage, which ended on March 13, 2024. (Testimony; Ex. 3).
3. On September 5, 2024, the appellant submitted a renewal application with updated income information. (Testimony).
4. The appellant reported that his gross yearly income was \$63,170, which meant his GMI was \$5,264.17, or 414.46% of the FPL for a household of one. (Testimony).
5. The income limit for a household of one to be eligible for CarePlus is \$1,670 per month or \$20,040 per year, which is 133% of the FPL. (Testimony).
6. The appellant has been on parole from incarceration since [REDACTED] 2021. (Testimony).
7. The MassHealth continuous eligibility rules for members released from jail or prison do not apply to the appellant since it has been more than 12 months since the date he was released. (Testimony; Ex. 5).

## Analysis and Conclusions of Law

Financial eligibility for coverage types that are determined using the MassHealth MAGI 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 506.006(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 (described below) and unearned income (not applicable in this appeal) less deductions<sup>1</sup>. (130 CMR 506.007(A)(2)(b)). Earned income is the total amount of taxable

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<sup>1</sup> 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

compensation received for work or services performed less pretax deductions. (130 CMR 506.003(A)(1)). Earned income may include wages, salaries, tips, commissions, and bonuses. (Id.).

In determining monthly income, the MassHealth agency multiplies average weekly income by 4.333. ((130 CMR 506.007(A)(2)(c)). 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.).

MassHealth CarePlus provides coverage for adults aged 21 to 64, with specific eligibility criteria detailed in 130 CMR 505.008. To qualify for MassHealth CarePlus Direct Coverage, individuals must: be aged 21-64, be a U.S. citizen or qualified noncitizen, have a household income not exceeding 133% of the federal poverty level, be ineligible for MassHealth Standard, utilize available health insurance benefits or enroll if no cost or purchased by MassHealth, and not be enrolled in Medicare Parts A or B. (130 CMR 505.008(A),(C)).

The appellant meets the categorical criteria for MassHealth CarePlus. The income limit for CarePlus for a household of one is \$1,670 per month, which is equal to 133% of the FPL for that household size. The appellant's GMI is \$5,264.17, which is 419.46% 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 414.46% of the FPL. Unfortunately, since this countable income exceeds 133% of the FPL, the appellant does not qualify financially for CarePlus.

The appellant is also not eligible for MassHealth coverage under the continuous eligibility rules for members released from jail or prison. As of April 1, 2023, MassHealth has provided continuous eligibility for Medicaid-eligible members released from jail or prison younger than age 65 for up to 12 months following their release. (EOM 24-02, p. 2). The continuous eligibility period will start on the date of release and will end at the end of the 12th month following the release date. (Id.). For example, a member who is released from a correctional facility on April 1, 2024, and was determined eligible for MassHealth prior to their release date, will have their continuous eligibility period start on April 1, 2024, and end on April 30, 2025. (Id.). If an eligibility determination is made after the date of release but before 12 months following the date of release, the individual is eligible for continuous eligibility from the date of the determination until the last day of the 12th month following the date of release. (Id.). Although the appellant is presently on parole, he was released from prison on [REDACTED] 2021, more than 12 months prior to the date MassHealth issued the determination under appeal. These rules therefore do not protect the appellant's

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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 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.

benefit. Furthermore, although the appellant stated that under the Massachusetts General Laws he had a right to continued MassHealth coverage as a parolee, no citation was given to support this assertion.

For that reason, 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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Scott Bernard  
Hearing Officer  
Board of Hearings

Cc:

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