

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2418563
Decision Date:	02/25/2025	Hearing Date:	01/17/2025
Hearing Officer:	Thomas Doyle	Record Open to:	N/A

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Secorya Chin, Quincy, MEC



*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; Over Income
Decision Date:	02/25/2025	Hearing Date:	01/17/2025
MassHealth's Rep.:	Secorya Chin	Appellant's Rep.:	Pro se
Hearing Location:	Remote (phone)	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 November 22, 2024, MassHealth changed appellant's child's benefits "from MassHealth Standard to Children's Medical Security Plan because of a change in their circumstances." (ex. 1). The appellant filed this appeal in a timely manner on December 5, 2024. (Ex. 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032).

Action Taken by MassHealth

MassHealth changed appellant's child's benefits from MassHealth Standard to Children's Medical Security Plan.

Issue

Was MassHealth correct when it changed appellant's child's benefits from MassHealth Standard to Children's Medical Security Plan.

Summary of Evidence

Appellant and the MassHealth worker (worker) appeared by phone and were sworn. The worker testified appellant contacted MassHealth on November 13, 2024 and added her spouse and updated her household income. (Testimony). The worker stated this update generated the downgrade notice of November 22, 2024, which is the subject of this appeal. Appellant's son, who is under the age of 19, had his benefit changed from MassHealth Standard to Children's Medical Security Plan, effective November 12, 2024, with a monthly premium of \$64. Appellant's son's MassHealth Standard ended on December 6, 2024. (Testimony; Ex. 1). The worker stated appellant is in a household of 3. Appellant is under the age of 65. (Ex. 6). Appellant's income is \$2,500 a month from employment and appellant's spouse has a monthly income of \$14,163.51, for a total household monthly income of \$16,663.51. The worker stated appellant's household was at 769.45% of the Federal Poverty Level (FPL) and cannot exceed 150% of the FPL or \$3,228 a month for the child to remain on MassHealth Standard.

Appellant stated she had no questions for the worker. She stated her son has [REDACTED] and is on numerous prescription medications a month. She stated she completed a disability supplement for her son and returned it for review in December 2024. She stated her and her spouse are legally married but they file taxes separately. The worker stated even if they file taxes separately, appellant's spouse is still counted as part of the household. Appellant stated she appealed because she was confused. When she spoke to a MassHealth representative on the phone when updating her information, she was told nothing would change. She stated she then received the notice under appeal, and it showed her son's benefit had changed.

Findings of Fact

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

1. Appellant's son, who is under the age of 19, was previously eligible for MassHealth Standard coverage.
2. Appellant contacted MassHealth on November 13, 2024 and added her spouse and updated her household income. (Testimony).
3. On November 22, 2024, MassHealth notified appellant that her son's benefit had changed from MassHealth Standard to Children's Medical Security Plan, effective November 12, 2024, with a monthly premium of \$64. (Testimony; Ex. 1).
4. Appellant is in a household of 3 and under the age of 65. (Testimony; Ex. 6).
5. Appellant's income is \$2,500 a month from employment and appellant's spouse has a monthly income of \$14,163.51 from employment, for a total household monthly income

of \$16,663.51. (Testimony).

6. Appellant's household was at 769.45% of the Federal Poverty Level (FPL) and cannot exceed 150% of the FPL or \$3,228 a month. (Testimony; Ex. 1).
7. Appellant and her spouse are legally married but file taxes separately. (Testimony).
8. Appellant filed disability paperwork with the state's Disability Evaluation Services. As of the date of hearing, MassHealth had not received confirmation of a disability determination.

Analysis and Conclusions of Law

The MassHealth coverage types are set forth at 130 CMR 505.001(A), as follows:

- (1) MassHealth Standard – for people who are pregnant, children, parents and caretaker relatives, young adults¹, 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 21 through 64 years of age 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 financial standards referred to in 130 CMR 505.000 use MassHealth modified adjusted gross income (MAGI) household or MassHealth Disabled Adult household, as defined in 130 CMR

¹ "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

506.002: *Household Composition*. 130 CMR 505.001(B).

At issue in this case is MassHealth's determination that the appellant's son is not eligible for MassHealth benefits. MassHealth determined that appellant is not eligible for MassHealth Standard, his previous coverage type, downgrading his coverage to the Children's Medical Security Plan. The categorical requirements and financial standards for Standard are set forth at 130 CMR 505.002(B)(2), as follows:

- (a) A child one through 18 years old is eligible if
 - 1. the modified adjusted gross income of the MassHealth MAGI household is less than or equal to 150% of the federal poverty level; and
 - 2. the child is a citizen as described in 130 CMR 504.002: U.S. Citizens or a lawfully present immigrant as described in 130 CMR 504.003(A): Lawfully Present Immigrants.

The procedures for calculating financial eligibility for both MassHealth MAGI and MassHealth Disabled Adult households are set forth at 130 CMR 506.007:

- (A) Financial eligibility for coverage types that are determined using the MassHealth MAGI household rules and the MassHealth Disabled Adult household rules is determined by comparing the sum of all countable income less deductions for the individual's household as described in 130 CMR 506.002 with the applicable income standard for the specific coverage type.
 - (1) The MassHealth agency will construct a household as described in 130 CMR 506.002 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.
 - (2) 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 MassHealth MAGI or Disabled Adult household. Income of all the household members forms the basis for establishing an individual's eligibility.
 - (a) A household's countable income is the sum of the MAGI-based 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 as described in 42 CFR 435.603 and 130 CMR 506.004(M).
 - (b) Countable 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).

(c) In determining monthly income, the MassHealth agency multiplies average weekly income by 4.333.

3) Five percentage points of the current federal poverty level (FPL) is subtracted from the applicable household total countable income to determine eligibility of the individual under the coverage type with the highest income standard.

Under 130 CMR 506.002(B)(1), the MassHealth MAGI household for a taxpayer not claimed as a tax dependent consists of:

- (a) the taxpayer, including their spouse, if the taxpayers are married and filing jointly regardless of whether they are living together;
- (b) the taxpayer's spouse, if living with them regardless of filing status;
- (c) all persons the taxpayer expects to claim as tax dependents; and
- (d) if any individual described in 130 CMR 506.002(B)(1)(a) through (c) is pregnant, the number of expected children.

Under these rules, appellant – who is not claimed as a tax dependent, does not file jointly with her spouse, and has 1 tax dependents – has a MassHealth MAGI household of 3, consisting of herself, her spouse and 1 dependent. Appellant verified monthly household income of \$16,663.51 from her job and her spouse's employment.² This figure is approximately 769.45% of the federal poverty level for a household of 3, substantially over the income limit of 150% FPL even with the five-percentage-point deduction set forth in 130 CMR 506.007(A)(3).³ Accordingly, MassHealth was correct in determining that appellant's son is not financially eligible for

² There is no allegation that any of the income deductions listed at 130 CMR 506.003(D) apply to the appellant's case. These deductions, which are subject to changes in federal law, are set forth as follows: (1) educator expenses; (2) reservist/performance artist/fee-based government official expenses; (3) health savings account; (4) moving expenses, for the amount and populations allowed under federal law; (5) one-half self-employment tax; (6) self-employment retirement account; (7) penalty on early withdrawal of savings; (8) alimony paid to a former spouse for individuals with alimony agreements finalized on or before December 31, 2018. Alimony payments under separation or divorce agreements finalized after December 31, 2018, or pre-existing agreements modified after December 31, 2018, are not deductible; (9) individual retirement account (IRA); (10) student loan interest; (11) scholarships, awards, or fellowships used solely for educational purposes; and (12) 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.

³ As set forth above, that section provides that "[f]ive percentage points of the current federal poverty level (FPL) is subtracted from the applicable household total countable income to determine eligibility of the individual under the coverage type with the highest income standard." Five percentage points of the current FPL (\$25,825 per month for a household of 3) is \$1,291.25 per year.

MassHealth Standard and in downgrading his coverage to the Children's Medical Security Plan.⁴

This appeal is denied.

Order for MassHealth

Remove aid pending protection.

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.

Thomas Doyle
Hearing Officer
Board of Hearings

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

⁴ Though the appellant has filed a disability supplement for her son, as of the hearing date he had not yet been found disabled. He is therefore not eligible for MassHealth CommonHealth. See 130 CMR 505.004(G).