

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2501284
Decision Date:	03/28/2025	Hearing Date:	02/21/2025
Hearing Officer:	Casey Groff	Record Closed:	02/24/2025

Appearance for Appellant:



Appearance for MassHealth:

Danielle Herron, 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; Income
Decision Date:	03/28/2025	Hearing Date:	02/21/2025
MassHealth's Rep.:	Danielle Herron	Appellant's Rep.:	██████
Hearing Location:	Board of Hearings, Remote	Aid Pending:	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 1/16/25, MassHealth denied Appellant's application for MassHealth benefits based on its determination that his income exceeded the program limit. *See* Exhibit 2. Appellant filed a timely appeal on 1/21/25. *See* Exh. 3. Denial and/or termination of assistance is valid grounds for appeal. *See* 130 CMR 610.032.

Action Taken by MassHealth

MassHealth denied Appellant's application for MassHealth benefits because it determined his income exceeded the program limit.

Issue

The appeal issue is whether MassHealth correctly determined Appellant was not eligible for benefits because his income exceeded the program limit.

Summary of Evidence

A MassHealth eligibility representative appeared at hearing and testified as follows: Appellant is between the ages of 21 and 64 and resides in a household size of one (1). Appellant had been receiving MassHealth CarePlus benefits for several years. To qualify for CarePlus, MassHealth requires that the individual's household income not exceed 133% of the federal poverty level (FPL). For all relevant time periods, this percentage amounted to a gross income limit of \$1,670 per month or \$20,040 annually for a household size of one.¹ While receiving CarePlus, MassHealth ran a periodic data match, through which state and/or federal sources returned information showing Appellant's income exceeded the 133% FPL program limit. As a result of the data match, MassHealth notified Appellant that he would need to submit a completed job update form to verify his current income and employment details. On 1/7/25, after having not received the job update form by the designated deadline, MassHealth notified Appellant that his CarePlus coverage would end on 1/21/25 as a result of the missing information.²

On 1/16/25, MassHealth received a completed job update form from Appellant. In the submission, Appellant verified that he was employed at two jobs, receiving \$52 per month at one location and \$780 biweekly at the other location, resulting in a combined gross income of \$1,742 per month or \$20,907 per year. For a household size of one, this places Appellant at 133.83% of the FPL. MassHealth confirmed that this figure was inclusive of a 5% disregard that MassHealth automatically deducts from an individual's FPL when determining eligibility.³ Because Appellant's income exceeds 133% of the FPL, MassHealth informed Appellant, through a notice dated 1/16/25 that he did not qualify for MassHealth benefits. See Exh. 2. According to the notice, Appellant was eligible for a subsidized plan through the Health Connector. *Id.*

Appellant appeared at hearing and testified that he believed his income placed him under the income threshold. Appellant testified that he reviewed his income prior to hearing, and it only came to a total of \$1,560 per month. Appellant had not submitted documentation or updated paystubs to reflect this calculation as of the time of hearing. Appellant also contended that the alleged \$52 which MassHealth reported he earns monthly, is incorrect. For this job, Appellant testified, he works as an "on-call" employee, and his income is highly variable depending on the number of shifts he works. Appellant testified that he had not worked at this job for several

¹ At hearing, it was discussed that these figures represent the 2024 MassHealth income standards and federal poverty guidelines, which were implemented March of 2024. Through a record open period, MassHealth confirmed that the 2025 income standards, which are adjusted for inflation and cost of living increases, are not implemented by MassHealth until at least 3/1/25. As such, Appellant was subject to the 2024 income standards as of the hearing date and which would remain in effect until MassHealth published the updated figures.

² It was noted that Appellant's fair hearing request, received on 1/21/25, was submitted within 60 days of the 1/7/25 notice. Appellant did not contest his failure to submit the job update form by the deadline. Rather, he disputed MassHealth's subsequent eligibility determination that he no longer qualified for benefits after having submitted the outstanding information of income. Therefore, the focus of this appeal was to address the 1/16/25 notice and whether Appellant qualified for benefits due to his income.

³ Therefore, his actual FPL was 138.83%, but because MassHealth eligibility rules include a 5% disregard, his FPL was lowered to 133.83%.

months.

In response, the MassHealth representative testified that she spoke with Appellant during a pre-hearing discussion the day prior, during which Appellant confirmed that the income figures on file were correct. The MassHealth representative also testified that the income figures which she testified to were initially obtained from Appellant himself, as reported in his job update form on 1/16/24, and were then electronically verified through MassHealth's data systems. The MassHealth representative testified that if the income was no longer accurate, Appellant would need to provide updated paystubs to verify a different amount. Additionally, MassHealth does have methodologies through which it can calculate income obtained through "seasonal" employment; however, when completing the job update form, Appellant reported both jobs as "steady" and not "seasonal." MassHealth would need updated information and verifications to process any changes.

Findings of Fact

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

1. Appellant is an adult under the age of 65 and in a household size of one (1).
2. Appellant has a verified total gross income at \$1,742 per month, placing him at 133.83% of the FPL.
3. Through a letter dated 1/16/25, MassHealth notified Appellant that he did not qualify for MassHealth benefits because his income exceeded the program limit.

Analysis and Conclusions of Law

The issue on appeal is whether MassHealth correctly determined that Appellant did not qualify for MassHealth benefits because his income exceeded the program limit. As described in its regulations, MassHealth provides individuals with access to health care by determining the coverage type that provides the applicant with the most comprehensive benefit for which they are eligible. See 130 CMR 501.003(A). The MassHealth coverage types are listed as follows:

- (1) Standard for pregnant women, children, parents and caretaker relatives, young adults,⁴ 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);

⁴ "Young adults" are defined at 130 CMR 501.001 as those aged 19 and 20.

- (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
- (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.

See 130 CMR 505.001(A)

To qualify for one of the coverage types listed above, an individual must meet both categorical *and* financial requirements. As of the hearing date, there was no evidence that Appellant had a verified disability or other special circumstance to be categorically eligible for Standard or CommonHealth. As Appellant is ineligible for Standard and is between the ages of 21-64, he is categorically eligible for CarePlus.⁵ To be *financially* eligible for CarePlus, Appellant must have a modified adjusted gross income that is less than or equal to 133% of the FPL. See 130 CMR 505.008(A)(2)(c). At the time of MassHealth's 1/16/25 eligibility determination and through the date of hearing, the income limit for single individual at 133% of the FPL amounted to \$1,670 per-month. See *2024 MassHealth Income Standards & Federal Poverty Guidelines*. Countable income includes both earned and unearned income, as described in 130 CMR 506.003(A)-(B), less deductions described in 130 CMR 506.003(D), and "is the total amount of taxable compensation received for work or services performed less pretax deductions." See 130 CMR 506.003.⁶ The evidence presented at hearing indicates that Appellant receives a combined modified adjusted gross income of \$1,742 per month, placing him at 133.83% of the FPL, and thus over the limit to qualify for MassHealth.⁷ There is no evidence that Appellant qualifies for any of the allowable deductions identified in 130 CMR 506.003(D).⁸ Although Appellant alleged a lower income

⁵ There is no evidence that Appellant is categorically eligible for any of the other coverage types listed in 130 CMR 505.001(A), above.

⁶ Earned income may include wages, salaries, tips, commissions, and bonuses." See 130 CMR 506.003(A).

⁷ This figure accounts for the "five percentage points of the current FPL [that MassHealth subtracts] from the applicable household total income." See 130 CMR 506.007(A)(3).

⁸ Examples of the listed deductions include educator expenses, health savings account, alimony, student loan interest, individual retirement account, scholarships and awards, among other sources. See 130 CMR 506.003(D).

amount at hearing, i.e., \$1,560 per month, he did not provide any documentation or updated paystubs to support this calculation. Moreover, the income amount reflected in MassHealth's system was obtained through Appellant's own reporting on 1/16/25 and was confirmed through electronic verification. Appellant did not meet his burden in proving that MassHealth erred in rendering its 1/16/25 eligibility determination. For these reasons, this appeal is DENIED.

It is further noted that following the hearing, MassHealth implemented the updated income standards, which are adjusted annually to account for inflation and cost of living increases. As of 3/1/25, the income limit for a household of one at 133% of the FPL increased to \$1,735 per month. *See 2025 MassHealth Income Standards and Federal Poverty Guidelines.* At any time, Appellant may request that MassHealth redetermine his eligibility for benefits under the updated income standards.

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.

Casey Groff
Hearing Officer
Board of Hearings

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