

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2501425
Decision Date:	4/14/2025	Hearing Date:	02/27/2025
Hearing Officer:	Christopher Jones		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Yazlin Diaz – Tewksbury 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:	Community Eligibility – under 65; Income
Decision Date:	4/14/2025	Hearing Date:	02/27/2025
MassHealth's Rep.:	Yazlin Diaz	Appellant's Rep.:	Pro se
Hearing Location:	Telephonic	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 January 9, 2025, MassHealth downgraded the appellant from MassHealth Standard to Health Safety Net because the appellant's household income was higher than income requirements. (Exhibit 1; 130 CMR 505.002 - .009 and 130 CMR 506.001 - .004.) The appellant filed this appeal in a timely manner on January 21, 2025, and her benefits are being protected pending the outcome of this appeal. (Exhibit 2; 130 CMR 610.015(B).) Limitation of assistance is valid grounds for appeal. (130 CMR 610.032.)

Action Taken by MassHealth

MassHealth terminated the appellant's MassHealth coverage based upon her household's income.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002 - .009 and 130 CMR 506.001 - .004, in determining that the head of household was ineligible for MassHealth benefits while her spouse and child remained eligible.

Summary of Evidence

MassHealth's representative testified that the appellant has a household of 3, with a disabled spouse and a minor child. During the annual eligibility review, verification of household income was requested on October 2, 2024. On December 30, 2024, the appellant verified the household's income through paystubs for herself and her spouse. MassHealth calculated the household's monthly income to be \$6,434.24, which was equivalent to 294.04% of the federal poverty level for 2024.¹

MassHealth's representative explained that the appellant's spouse has a verified disability, which means that his coverage is changing to CommonHealth coverage with a monthly premium. The appellant's child will still be covered through Family Assistance benefits, which also has a premium. MassHealth's representative testified that these notices, with their premium calculations, have not been issued yet because of the protection in place for this appeal. The head of household does not have a category of eligibility that allows her to have MassHealth benefits with income over 133% of the federal poverty level.

MassHealth's representative recommended that the appellant contact the Premium Assistance department, to determine whether MassHealth would pay for the appellant's employer-sponsored insurance if either her spouse or child were also covered by it. MassHealth's representative explained that the final premium for the CommonHealth and Family Assistance benefits would change depending on whether or not the family members were enrolled in other health insurance toward which MassHealth contributed.

The appellant did not dispute any of the facts relied upon by MassHealth, and she understood that she would need to enroll in her employer-sponsored insurance. However, she asked that a fair hearing decision be issued to document this outcome.

Findings of Fact

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

- 1) The appellant has a household size of 3, with her disabled spouse and minor child. (Testimony by MassHealth's representative and the appellant.)
- 2) During the annual renewal process, the appellant verified household income equivalent to 294.04% of the federal poverty level. (Exhibit 1; Testimony by MassHealth's representative and the appellant.)

¹ The federal poverty levels have increased slightly for 2025, but not sufficiently to have a substantive outcome on this calculation.

- 3) MassHealth has not yet issued premiums for the appellant's family members' CommonHealth and Family Assistance coverage due to the protection in place from this appeal. (Testimony by MassHealth's representative.)

Analysis and Conclusions of Law

MassHealth offers a variety of coverage types based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below the relevant financial thresholds. Financial eligibility is "determined by comparing the sum of all countable income ... for the individual's household ... with the applicable income standard for the specific coverage type." (130 CMR 505.007(A).) Generally, applicants between the ages of 20 and 65 who seek MassHealth Standard or CarePlus benefits must have countable income under 133% of the federal poverty level. (130 CMR 505.002(E), 505.008(A)) However, disabled adults between the ages of 19 and 64 can qualify for the CommonHealth program, regardless of their income by paying a monthly premium.² (See 130 CMR 505.004(B)-(C), 506.009.) Children younger than 19 are eligible for Standard coverage up to 150% of the federal poverty level and Family Assistance with income between 150% and 300% of the federal poverty level. (130 CMR 505.002(B)505.005(B).)

For individuals under the age of 65, countable income includes the total amount of taxable income received by everyone in a member's household "after allowable deductions on the U.S Individual Tax Return," and specifically includes "social security benefits." (130 CMR 506.003(B); see also 130 CMR 506.002.) Monthly income is derived by multiplying average weekly income by 4.333, and "[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." (130 CMR 506.007(A).)

The federal poverty level for a household of 3 in 2025 is now \$2,221 per month. Five percent of the federal poverty level is \$111.05. The total household income quoted by MassHealth was \$6,434.24. The resulting federal poverty level is currently 289.7% or 284.7% depending on whether the 5% disregard was already contemplated in calculating this figure. This distinction is irrelevant for the purpose of this appeal, however, as this appeal is solely regarding the termination from MassHealth Standard. MassHealth has not yet issued premiums for the CommonHealth or Family Assistance coverage, and therefore it would be premature to review those calculations.³ Because the appellant's income is over 150% of the federal poverty level, MassHealth was correct that no one in her household is eligible for Standard. (130 CMR 505.002(E).) This appeal is DENIED.

² MassHealth no longer requires disabled members under the age of 65 to meet a one-time deductible or work 40 hours per month. (EOM 23-28 (Dec. 2023).)

³ These calculations will likely also be impacted based upon whether the appellant has enrolled in employer-sponsored insurance for which MassHealth is providing Premium Assistance.

Order for MassHealth

Remove Aid Pending, and issue approval notices calculating premiums for the CommonHealth and Family Assistance benefits for the other members of the household.

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.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, at the address on the first page of this decision.

Christopher Jones
Hearing Officer
Board of Hearings

cc: MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957