

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2504087
<b>Decision Date:</b>	4/10/2025	<b>Hearing Date:</b>	04/08/2025
<b>Hearing Officer:</b>	Alexandra Shube		

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

**Appearance for MassHealth:**  
*Via telephone:*  
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

<b>Appeal Decision:</b>	Denied	<b>Issue:</b>	Under 65; Income
<b>Decision Date:</b>	4/10/2025	<b>Hearing Date:</b>	04/08/2025
<b>MassHealth's Rep.:</b>	Yazlin Diaz	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Tewksbury MassHealth Enrollment Center Remote	<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 February 25, 2025, MassHealth informed the appellant that she did not qualify for MassHealth benefits because she was over the allowable income limit (Exhibit 1). The appellant filed this appeal in a timely manner on March 12, 2025 (see 130 CMR 610.015(B) and Exhibit 2). Denial of assistance is valid grounds for appeal (see 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth informed the appellant that she did not qualify for MassHealth benefits because her income was too high.

### Issue

The appeal issue is whether MassHealth was correct in determining that the appellant did not qualify for MassHealth benefits because her income was too high.

## Summary of Evidence

Both parties appeared at hearing via telephone. The MassHealth representative testified as follows: the appellant is an adult between the ages of [REDACTED] with a household size of one. On February 20, 2025, MassHealth received an income update from the appellant, which verified a weekly gross income of \$1,051 from unemployment. This prompted the February 25, 2025 notice under appeal which informed the appellant that she was over the allowable income limit. The appellant's gross monthly income was calculated at \$4,553.98, or 357.87% of the Federal Poverty Level (FPL), using the 2024 FPL Guidelines still in effect at the time of the MassHealth notice. The income limit to qualify for MassHealth benefits as a non-disabled adult under the age of [REDACTED] is 133% of the FPL, or \$1,670 gross monthly for a household of one at the time of the notice under the 2024 FPL Guidelines.<sup>1</sup> On February 27, 2025, the appellant called MassHealth and self-attested to weekly income of \$812. MassHealth stated that this income has not yet been verified but would be at 257.35% of the FPL, which is still over the allowable income limit.

The appellant explained that she is still receiving unemployment benefits. The \$1,051 is pre-tax, but the \$812 is after tax. She testified that everything is very expensive right now and unemployment covers her basic necessities but she does not have extra for health insurance. She is concerned about the cost of medical care. She is actively seeking work, but the job market is tough. She is seeking MassHealth to assist her during this time.

The MassHealth representative explained that MassHealth considers gross income. Additionally, it is an income-driven program and she is over the allowable income limit; however, she can update MassHealth at any time with any changes in income. She has access to a Connector Care plan through the Health Connector.

## Findings of Fact

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

1. The appellant, who is between the ages of [REDACTED] has a household size of one (Testimony and Exhibit 4).
2. On February 25, 2025, MassHealth notified the appellant that she was not eligible for MassHealth benefits because she was over the allowable income limit (Testimony and Exhibit 1).

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<sup>1</sup> The 2025 FPL Guidelines did not take effect until March 1, 2025. Under the 2025 FPL Guidelines, 133% of the FPL is \$1,735 gross monthly for a household of one. The appellant is also over the allowable limit using the 2025 FPL Guidelines.

3. At the time of the notice, the appellant's income was 357.87% of the FPL which was based on the verified unemployment income of \$1,051 gross weekly (or \$4,553.98 gross monthly) and the 2024 FPL Guidelines (Testimony and Exhibit 1).
4. On March 12, 2025, the appellant filed a timely appeal (Exhibit 2).
5. On February 27, 2025, the appellant called MassHealth and updated her income to \$812 weekly. This income has not yet been verified, but at hearing, the MassHealth representative stated it would still put the appellant over the allowable income limit, at 257.35% of the FPL (Testimony).
6. To qualify for MassHealth benefits under the 2024 FPL Guidelines in effect at the time of the February 25, 2025 notice, a non-disabled applicant must be at or below 133% of the FPL, which for a household of one is \$1,670 gross per month (Testimony).
7. To qualify for MassHealth benefits under the 2025 FPL Guidelines in effect as of March 1, 2025, a non-disabled applicant must be at or below 133% of the FPL, which for a household of one is \$1,735 gross per month (Testimony).
8. The appellant's most recently verified gross monthly income of \$4,553.98 is over the allowable income limit for both the 2024 and 2025 FPL Guidelines.

## Analysis and Conclusions of Law

MassHealth offers a variety of benefits based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below a certain financial threshold.

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

- (1) Standard for pregnant women, children, parents and caretaker relatives, young adults,<sup>2</sup> 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);
- (2) CommonHealth for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) CarePlus for adults [REDACTED] years of age who are not eligible for MassHealth Standard;

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<sup>2</sup> "Young adults" is defined at 130 CMR 501.001 as those aged [REDACTED]

- (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 who
  - (a) work for small employers;
  - (b) are not eligible for MassHealth Standard, CommonHealth, Family Assistance, or CarePlus;
  - (c) do not have anyone in their premium billing family group who is otherwise receiving a premium assistance benefit; and
  - (d) have been determined ineligible for a Qualified Health Plan with a Premium Tax Credit due to access to affordable employer-sponsored insurance coverage;
- (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.

The calculation of financial eligibility is set forth in 130 CMR 506.007 as follows:

The rules at 130 CMR 506.003 and 506.004 describing countable income and noncountable income apply to both MassHealth MAGI households and MassHealth Disabled Adult households.

(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 at 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(K).

(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.

(130 CMR 506.007(A)).

Categorically, the appellant is eligible for CarePlus; however, under 130 CMR 505.008(A)(2)(c), the income limit for CarePlus coverage is 133% of the FPL. For a household of one, that limit is currently \$1,735 gross monthly, pursuant to the 2025 FPL Guidelines which took effect of March 1, 2025. At the time of the MassHealth notice on February 25, 2025, the 2024 FPL Guidelines were still in effect and 133% of the FPL for a household of one was \$1,670 gross monthly. At the time of the notice, after MassHealth had received income updates from the appellant on February 20, 2025, the appellant's income was \$1,051 gross weekly (or \$4,553.98 gross monthly) from unemployment, or 357.87% of the FPL (362.87% less five percentage points, pursuant to 130 CMR 506.007(A)(3)), based on the 2024 FPL Guidelines in effect at the time.<sup>3</sup> This was over the income limit and prompted the notice under appeal. On February 27, 2025, the appellant called MassHealth and self-attested to weekly income of \$812, which is 264.61% of the FPL using the current 2025 FPL Guidelines (269.61% less five percentage points, pursuant to 130 CMR 506.007(A)(3)). That income has not been verified yet, but it still exceeds the limit of 133% of the FPL.<sup>4</sup> Based on these figures, the appellant is over the income limit for MassHealth CarePlus benefits.

As the appellant is over the income limit for MassHealth benefits, the MassHealth determination was correct and the appeal is denied.<sup>5</sup>

## Order for MassHealth

None.

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<sup>3</sup> If the 2025 FPL Guidelines are applied, the appellant's FPL is 343.96% (348.96% less five percentage points, pursuant to 130 CMR 506.007(A)(3)), which still exceeds the allowable limit of 133% of the FPL.

<sup>4</sup> At hearing, when the MassHealth representative ran the unverified weekly income of \$812, she arrived at an FPL of 257.35%. It is not clear where the difference between this hearing officer's calculation and MassHealth's is, but the difference is nominal and both far exceed the allowable limit of 133%.

<sup>5</sup> The appellant can direct any questions about Health Connector plans to 1-877-MA-ENROLL (1-877-623-6765) or about the Health Safety Net to 877-910-2100.

## **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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Alexandra Shube  
Hearing Officer  
Board of Hearings

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