

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2505965
Decision Date:	07/10/2025	Hearing Date:	05/22/2025
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:



Appearance for MassHealth:

Dominique Correa



*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
Decision Date:	07/10/2025	Hearing Date:	05/22/2025
MassHealth's Rep.:	Dominique Correa	Appellant's Rep.:	██████
Hearing Location:	Springfield MEC	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 April 11, 2025, MassHealth notified Appellant that it would be terminating her MassHealth CommonHealth benefits on April 25, 2025, because her income exceeds the applicable eligibility limit for any MassHealth coverage type¹ (Exhibit A). Appellant filed this appeal in a timely manner on April 17, 2025, and was granted AID PENDING status forestalling the scheduled termination pending the outcome of this appeal (see 130 CMR 610.015(B) and Exhibit A). Eligibility determinations constitute valid grounds for appeal (see 130 CMR 610.032).

Action Taken by MassHealth

MassHealth notified Appellant that it would be terminating her MassHealth benefits on April 25, 2025, because her income exceeds the applicable eligibility limit.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulation(s) to accurate facts when it scheduled Appellant's MassHealth benefits to terminate on April 25, 2025, because her income exceeds the applicable eligibility limit

¹ At hearing, MassHealth testified appellant was no longer categorically eligible for CommonHealth.

Summary of Evidence

Both parties appeared in person.

The Masshealth representative testified that appellant was previously open on MassHealth CommonHealth for disabled adults. The MassHealth representative stated that due to a systems disability match, Appellant's disability status was removed from the system which caused Appellant to be assessed for eligibility for Masshealth as a non-disabled adult residing in the community. MassHealth determined that Appellant's monthly income exceeds the applicable eligibility limit for any other MassHealth category, therefore her MassHealth benefits were scheduled to terminate on April 25, 2025.

The MassHealth representative also testified that Appellant filed a Disability Supplement on April 15, 2025. The form was returned to her on May 8, 2025, because it was not complete.

Appellant did not dispute the MassHealth representative's testimony. Appellant testified that she has filed the completed form, after consulting with Disability Evaluation Services (DES), and is now just waiting for a determination. Appellant was told a determination can take up to 90 days. Despite having no dispute, Appellant did not wish to withdraw the appeal because she would lose her AID PENDING status and her existing health care coverage.

Findings of Fact

Based on a preponderance of the evidence, I this record supports the following findings:

1. Appellant was open on MassHealth CommonHealth as a disabled adult; due to a systems disability match, Appellant's disability status was removed from the system which caused Appellant to be assessed for eligibility for Masshealth as a non-disabled adult residing in the community.
2. MassHealth determined that Appellant's monthly income exceeds the applicable eligibility limit for any other MassHealth category, therefore her MassHealth benefits were scheduled to terminate on April 25, 2025.
3. Appellant filed a Disability Supplement on April 15, 2025, which was returned to her on May 8, 2025, because it was not complete.
4. Prior to hearing, Appellant filed the completed Disability Supplement.
5. Appellant is waiting for a disability determination which can take up to 90 days from the date of filing the completed Supplement.

Analysis and Conclusions of Law

The party appealing an administrative decision bears the burden of demonstrating the decision's invalidity (*Merisme v. Board of Appeals of Motor Vehicle Liability Policies and Bonds*, 27 Mass. App. Ct. 470, 474 (1989)). On this record, Appellant has failed to meet her burden.

Appellant did not dispute Masshealth actions in any way and is merely waiting for a disability determination from DES. Until DES makes its determination, there is no evidence to support that the appellant is categorically eligible for MassHealth on the basis of a disability. On this record, there is no basis in fact and/or law to disturb the subject determinations made by MassHealth under notice dated April 11, 2025. The appeal is DENIED.

Order for MassHealth

Remove AID PENDING.

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.

Kenneth Brodzinski
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 88 Industry Avenue, Springfield, MA 01104, 413-785-4186