

# Office of Medicaid BOARD OF HEARINGS

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2506407
<b>Decision Date:</b>	8/28/2025	<b>Hearing Date:</b>	05/21/2025
<b>Hearing Officer:</b>	Emily Sabo	<b>Record Open to:</b>	08/14/2025

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Carmen Rivera, Quincy MEC

**Interpreter:**  
Multiple Sign Language Interpreters



*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>	Community Eligibility—under [REDACTED]; Income; Disability
<b>Decision Date:</b>	8/28/2025	<b>Hearing Date:</b>	05/21/2025
<b>MassHealth's Rep.:</b>	Carmen Rivera	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Quincy Harbor South (Telephone)	<b>Aid Pending:</b>	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 8, 2025, MassHealth notified the Appellant that it was downgrading his benefit from MassHealth CommonHealth to Health Safety Net due to him no longer meeting the disability requirements for the benefit. 130 CMR 505.002(E), 130 CMR 505.004, and Exhibit 1. The Appellant filed this appeal in a timely manner on April 22, 2025. 130 CMR 610.015(B) and Exhibit 2. Reduction of assistance is valid grounds for appeal. 130 CMR 610.032.

### Action Taken by MassHealth

MassHealth downgraded the Appellant's MassHealth benefit from CommonHealth to Health Safety Net, effective May 31, 2025.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002(E) and 130 CMR 505.004, in determining that the Appellant was not eligible for CommonHealth.

### Summary of Evidence

The hearing was held by telephone. The Appellant is an adult between the ages of [REDACTED] and he testified through sign language interpreters. The Appellant verified his identity.

The MassHealth representative testified that MassHealth undertook a mandated review of the Appellant's disability status and that the Appellant did not complete his disability review. The MassHealth representative testified that that was the reason for the April 8, 2025 downgrade notice.<sup>2</sup> The MassHealth representative recommended that the Appellant complete the adult disability supplement, and advised him that he could request that future renewal reviews be waived.

The Appellant testified that he is deaf and that he had completed his disability review at a MassHealth facility and that MassHealth knows that he is disabled. The Appellant testified that he needs health insurance coverage and that this should be resolved. The Appellant testified that he could die from kidney failure.

The record was held open until June 16, 2025 for the Appellant to provide proof of a verified disability. Exhibit 5. The Appellant requested that he be granted an extension until July 31, 2025, which the hearing officer granted. Exhibit 6. MassHealth had until August 14, 2025 to review and respond. Exhibit 7. The MassHealth representative responded that MassHealth had not received any materials from the Appellant or a disability evaluation from Disability Evaluation Services. Exhibit 8. Besides the extension request, the Board of Hearings did not receive any submissions from the Appellant during the record open period.

## Findings of Fact

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

1. The Appellant is an adult between the ages of [REDACTED] Exhibit 4.
2. On April 8, 2025, MassHealth notified the Appellant that his benefit was being downgraded from MassHealth CommonHealth to Health Safety Net, because he did not have a disability. The notice states that that the Appellant has a household size of one and his monthly household income is 201.68% of the federal poverty level. Exhibit 1.
3. On April 22, 2025, the Appellant filed a timely appeal with the Board of Hearings. Exhibit 2.

---

<sup>1</sup> The Appellant's Medicaid Management Information System (MMIS) record reflects that has been eligible for various categories of MassHealth coverage based on disability over the past [REDACTED] years. Exhibit 4. It states his disability status is "no," but includes a disability onset date when the Appellant was a minor child. *Id.*

<sup>2</sup> The April 8, 2025 notice states that the Appellant has a household size of one and his monthly household income is 201.68% of the current federal poverty level. Exhibit 1.

4. The Appellant did not complete his disability review. Testimony.
5. The record was held open until July 31, 2025, for the Appellant to provide proof of his verified disability. Exhibits 6 & 7.
6. During the record open period, the Appellant did not submit proof of a disability to MassHealth or the Board of Hearings. Exhibit 8.
7. The Appellant is deaf. Testimony.

## Analysis and Conclusions of Law

MassHealth regulations provide as follows:

### 501.001: Definition of Terms

The terms listed in 130 CMR 501.001 have the following meanings for the purposes of MassHealth, as described in 130 CMR 501.000 through 130 CMR 508.000: Health Care Reform: MassHealth: Managed Care Requirements. In the event that a definition conflicts with federal law, the federal law supersedes.

....

Disabled – having a permanent and total disability.

Disabled Adult Household – see 130 CMR 506.002(C): MassHealth Disabled Adult Household.

Disabled Working Adult – a person who is engaged in substantial gainful activity but otherwise meets the definition of disabled, as defined in Title XVI of the Social Security Act.

Disability Evaluation Services (DES) – a unit that consists of physicians and disability evaluators who determine permanent and total disability of an applicant or member seeking coverage under a MassHealth program for which disability is a criterion using criteria established by the Social Security Administration under Title XVI, and criteria established under state law. This unit may be a part of a state agency or under contract with a state agency.

130 CMR 501.001.

### 505.002: MassHealth Standard

....

(E) Disabled Individuals.

(1) Disabled Adults. A disabled adult [REDACTED] years old or a disabled young adult [REDACTED]

██████████ who does not meet the requirements described at 130 CMR 505.002(B)(3)(a)1. is eligible for MassHealth Standard coverage if they meet the following requirements:

- (a) the individual is permanently and totally disabled as defined in 130 CMR 501.001: *Definition of Terms*;
  - (b) the modified adjusted gross income of the MassHealth Disabled Adult household as described in 130 CMR 506.002(C): *MassHealth Disabled Adult Household* is less than or equal to 133% of the federal poverty level (FPL), or the individual is eligible under section 1634 of the Social Security Act (42 U.S.C. § 1383c) as a disabled adult child or as a disabled widow or widower, or is eligible under the provisions of the Pickle Amendment as described at 130 CMR 519.003: *Pickle Amendment Cases*;
  - (c) the individual is a citizen as described in 130 CMR 504.002: *U.S. Citizens* or a qualified noncitizen as described in 130 CMR 504.003(A)(1): *Qualified Noncitizens*; and
  - (d) the individual complies with 130 CMR 505.002(M).
- (2) Determination of Disability. Disability is established by
- (a) certification of legal blindness by the Massachusetts Commission for the Blind (MCB);
  - (b) a determination of disability by the SSA; or
  - (c) a determination of disability by the Disability Evaluation Services (DES).
- (3) Extended MassHealth Eligibility. Disabled persons whose SSI disability assistance has been terminated and who are determined to be potentially eligible for MassHealth continue to receive MassHealth Standard until the MassHealth agency makes a determination of ineligibility.

130 CMR 505.002(E).

#### 505.004: MassHealth CommonHealth

(A) Overview.

- (1) 130 CMR 505.004 contains the categorical requirements and financial standards for CommonHealth coverage available to both disabled children and disabled adults, and to disabled working adults.
- (2) Persons eligible for MassHealth CommonHealth coverage are eligible for medical benefits as described in 130 CMR 450.105(E): *MassHealth CommonHealth*.

(B) Disabled Working Adults. Disabled working adults must meet the following requirements:

- (1) be ██████████ (for those ██████████ or older, see 130 CMR 519.012: *MassHealth CommonHealth*);
- (2) be employed at least 40 hours per month, or if employed less than 40 hours per month, have been employed at least 240 hours in the six-month period immediately preceding the month of receipt of the application or MassHealth's eligibility review;
- (3) be permanently and totally disabled (except for engagement in substantial gainful activity) as defined in 130 CMR 501.001: *Definition of Terms*;
- (4) be a citizen as described in 130 CMR 504.002: *U.S. Citizens* or a qualified noncitizen as

- described in 130 CMR 504.003(A)(1): *Qualified Noncitizens*;  
(5) be ineligible for MassHealth Standard; and  
(6) comply with 130 CMR 505.004(J).

....

- (H) Determination of Disability. Disability is established by  
(1) certification of legal blindness by the Massachusetts Commission for the Blind (MCB);  
(2) a determination of disability by the SSA; or  
(3) a determination of disability by the Disability Evaluation Services (DES).

130 CMR 505.004(A), (B), (H).

In order to be found disabled for MassHealth, an adult must be permanently and totally disabled. 130 CMR 501.001. The guidelines used in establishing disability under this program are the same as those used by the SSA. 130 CMR 501.001.

The Appellant has the burden “to demonstrate the invalidity of the administrative determination.” Andrews v. Division of Medical Assistance, 68 Mass. App. Ct. 228, 231 (2007). *See also* Fisch v. Board of Registration in Med., 437 Mass. 128, 131 (2002); Faith Assembly of God of S. Dennis & Hyannis, Inc. v. State Bldg. Code Commn., 11 Mass. App. Ct. 333, 334 (1981); Haverhill Mun. Hosp. v. Commissioner of the Div. of Med. Assistance, 45 Mass. App. Ct. 386, 390 (1998).

Here, the Appellant did not dispute that his income is 201.68% of the federal poverty level. I credit the Appellant’s testimony that he is deaf. However, based on the record before me, I do not have sufficient evidence that the Appellant has a verified disability as required by 130 CMR 505.002(E)(2) and 130 CMR 505.004(H) to find him eligible for MassHealth Standard or CommonHealth. While the Appellant testified that MassHealth is aware of his disability, I do not have a certification of legal blindness by the [REDACTED] an SSA disability determination, or a DES disability determination in evidence. Therefore, the Appellant has not established that MassHealth erred in issuing its April 8, 2025 notice. Accordingly, the appeal is denied.

## Order for MassHealth

End 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.

---

Emily Sabo  
Hearing Officer  
Board of Hearings

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