

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Approved; remanded	<b>Appeal Number:</b>	2507903
<b>Decision Date:</b>	08/22/2025	<b>Hearing Date:</b>	6/17/2025
<b>Hearing Officer:</b>	Cynthia Kopka		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Jo-Ann Donovan, Charlestown 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>	Approved; remanded	<b>Issue:</b>	Community eligibility, disability renewal
<b>Decision Date:</b>	08/22/2025	<b>Hearing Date:</b>	6/17/2025
<b>MassHealth's Rep.:</b>	Jo-Ann Donovan	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Charlestown (remote)	<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

By notice dated May 12, 2025, MassHealth downgraded Appellant's coverage from MassHealth CommonHealth to Health Safety Net, with CommonHealth ending on May 26, 2025. Exhibit 1. Appellant filed this appeal in a timely manner on May 21, 2025 and was eligible to retain benefits pending the outcome of the appeal. Exhibit 2. 130 CMR 610.015(B), 130 CMR 610.036. Termination, modification, or denial of assistance is a valid basis for appeal. 130 CMR 610.032.

### Action Taken by MassHealth

MassHealth downgraded Appellant's coverage from MassHealth CommonHealth to Health Safety Net.

### Issue

The appeal issue is whether MassHealth was correct in determining that Appellant no longer qualified for MassHealth CommonHealth.

### Summary of Evidence

The MassHealth representative appeared by phone and testified as follows. Appellant is under 65 and was previously deemed eligible for CommonHealth as a disabled adult. On February 21, 2025, MassHealth notified Appellant that he would have to complete a disability renewal form so that his continuing disability status could be evaluated. The disability renewal form was due to be completed and submitted on April 22, 2025. MassHealth did not receive the disability renewal form and removed Appellant's disability status from the system.

On May 12, 2025, MassHealth notified Appellant that his coverage would downgrade from MassHealth CommonHealth to Health Safety Net, with CommonHealth ending after May 26, 2025. Exhibit 1. MassHealth notified Appellant that he no longer met the income requirement for the CommonHealth benefit. *Id.* At the time of issuing this notice, MassHealth's system reflected that Appellant's household size was 1 and the household income was 157.54% of the 2025 federal poverty level (FPL).

Appellant submitted records in support, Exhibit 2. Appellant testified that he has difficulty recalling the chronology of events. Appellant had previously gone to a social worker or psychologist from MassHealth for an evaluation, approximately 6-8 months prior. MassHealth had provided a ride to this appointment. Appellant believed this appointment was for reevaluation. Appellant received a letter confirming that his benefits were in place after the appointment. A few months later he spoke to a MassHealth representative about having to be reevaluated again, and the representative told him that it shows that he has MassHealth and Appellant did not need to worry about it. Appellant will do anything to keep his benefits.

The MassHealth representative testified that the system did not reflect Appellant's call with a representative, so the call may have been with Disability Evaluation Services (DES). The MassHealth representative cannot generate a new copy of the renewal supplement and suggested Appellant contact DES directly at 888-497-9890 to get a new copy.

Appellant expressed concern that MassHealth may have calculated his income based on paystubs that showed extra hours. Appellant testified that he works part time 19 hours per week and is allowed no more than 50 additional hours per year to perform tasks such as shoveling during snowstorms. This keeps his average under 20 hours per week so that Appellant remains a part-time employee. The MassHealth representative confirmed that Appellant's income in the system is based off of 19 hours per week. Paystubs submitted by Appellant show that his gross income is approximately \$550 weekly working 19 hours. Exhibit 2 at 3-5.

After hearing, BOH obtained a document from DES demonstrating that Appellant's disability status was approved on October 9, 2024 and is set to be redetermined again on October 9, 2027. Exhibit 4.

## **Findings of Fact**

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

1. Appellant is in a household of one and under the age of 65.
2. Appellant's income is 157.54% of the FPL.
3. On May 12, 2025, MassHealth notified Appellant that his coverage would downgrade from MassHealth CommonHealth to Health Safety Net, with CommonHealth ending after May 26, 2025. Exhibit 1.
4. Appellant filed this timely appeal on May 21, 2025 and was eligible to keep the previous benefit level pending the outcome of the appeal. Exhibit 2.
5. Appellant's disability status was approved by DES on October 9, 2024 and is set to be redetermined again on October 9, 2027. Exhibit 4.

## Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 505.000 *et seq.* explain the categorical requirements and financial standards that must be met to qualify for a MassHealth coverage type. The rules of financial responsibility and calculation of financial eligibility are detailed in 130 CMR 506.000: *Health Care Reform: MassHealth: Financial Requirements*. The MassHealth coverage types are:

- (1) MassHealth Standard – for people who are pregnant, children, parents and caretaker relatives, young adults, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health (DMH) members, and medically frail as such term is defined in 130 CMR 505.008(F);
- (2) MassHealth CommonHealth – for disabled adults, disabled young adults, and disabled children who are not eligible for MassHealth Standard;
- (3) MassHealth CarePlus – for adults 21 through 64 years of age who are not eligible for MassHealth Standard;
- (4) MassHealth Family Assistance – for children, young adults, certain noncitizens, and persons who are HIV positive who are not eligible for MassHealth Standard, MassHealth CommonHealth, or MassHealth CarePlus;
- (5) MassHealth Limited – for certain lawfully present immigrants as described in 130 CMR 504.003(A): *Lawfully Present Immigrants*, nonqualified PRUCOLs, and other noncitizens as described in 130 CMR 504.003: *Immigrants*; and
- (6) MassHealth Medicare Savings Programs – for certain Medicare beneficiaries.

130 CMR 505.001(A).

In order to establish eligibility for MassHealth benefits, applicants must meet both the categorical and financial requirements. MassHealth determines financial eligibility based on an applicant's modified adjusted gross income. MassHealth takes the countable income, which includes earned income as described in 130 CMR 506.003(A) and unearned income described in 130 CMR 506.003(B), and subtracts deductions described in 130 CMR 506.003(D). 130 CMR 506.007. Per 130 CMR 506.003, the regulatory definitions of earned income, unearned income and deductions are as follows:

(A) Earned Income.

- (1) Earned income is the total amount of taxable compensation received for work or services performed less pretax deductions. Earned income may include wages, salaries, tips, commissions, and bonuses.
- (2) Earned taxable income for the self-employed is the total amount of taxable annual income from self-employment after deducting annual business expenses listed or allowable on a U.S. Individual Tax Return. Self-employment income may be a profit or a loss.
- (3) Earned income from S-Corporations or Partnerships is the total amount of taxable annual profit (or loss) after deducting business expenses listed or allowable on a U.S. Individual Tax Return.
- (4) Seasonal income or other reasonably predictable future income is taxable income derived from an income source that may fluctuate during the year. Annual gross taxable income is divided by 12 to obtain a monthly taxable gross income with the following exception: if the applicant or member has a disabling illness or accident during or after the seasonal employment or other reasonably predictable future income period that prevents the person's continued or future employment, only current taxable income will be considered in the eligibility determination.

(B) Unearned Income.

- (1) Unearned income is the total amount of taxable income that does not directly result from the individual's own labor after allowable deductions on the U.S. Individual Tax Return.
- (2) Unearned income may include, but is not limited to, social security benefits, railroad retirement benefits, pensions, annuities, certain trusts, interest and dividend income, state or local tax refund for a tax you deducted in the previous year, and gross gambling income.

(C) Rental Income. Rental income is the total amount of taxable income less any deductions listed or allowable on an applicant's or member's U.S. Individual Tax Return.

(D) Deductions. Under federal law, the following deductions are allowed when calculating MAGI countable income. Changes to federal law may impact the availability of these deductions:

- (1) educator expenses;
- (2) reservist/performance artist/fee-based government official expenses;
- (3) health savings account;
- (4) moving expenses, for the amount and populations allowed under federal law;
- (5) one-half self-employment tax;
- (6) self-employment retirement account;
- (7) penalty on early withdrawal of savings;
- (8) alimony paid to a former spouse for individuals with alimony agreements finalized on or before December 31, 2018. Alimony payments under separation or divorce agreements finalized after December 31, 2018, or pre-existing agreements modified after December 31, 2018, are not deductible;
- (9) individual retirement account (IRA);
- (10) student loan interest;
- (11) scholarships, awards, or fellowships used solely for educational purposes;
- and
- (12) other deductions described in the Tax Cut and Jobs Act of 2017, Public Law 115-97 for as long as those deductions are in effect under federal law.

An adult under the age of 64 is eligible for MassHealth's CarePlus benefit if their income is at or below 133% of the FPL. 130 CMR 505.008(A)(2)(c). A disabled adult is eligible for MassHealth Standard if their income is at or below 133% of the FPL. 130 CMR 505.002(E)(1)(b). A disabled adult is eligible for MassHealth CommonHealth regardless of income, but may be assessed a premium in accordance with the premium schedule provided in 130 CMR 506.011(B)(2). 130 CMR 505.004(I).

To be eligible for MassHealth Standard or CommonHealth as a disabled person, an individual adult must be "permanently and totally disabled." See 130 CMR 501.001. The guidelines used in establishing disability under the MassHealth program are modeled after those used by the Social Security Administration. See *id.* Title XVI of the Social Security Act requires individuals who have been determined disabled for purposes of obtaining Medicaid to be periodically reevaluated. See 20 CFR 416.994(b)(5).

Here, MassHealth testified that Appellant's CommonHealth was terminated because he had not submitted the DES supplement requested by MassHealth to determine continued eligibility. However, the document from DES showed that Appellant's disability status was approved on October 9, 2024 and will be reevaluated in 2027. There was no articulated basis why Appellant would have to have completed a renewal less than six months after the 2024 determination or prior to the 2027 date set by DES.

As a verified disabled adult with income above 133% of the FPL, Appellant is eligible for CommonHealth. Accordingly, this appeal is approved and remanded back to MassHealth for a determination of Appellant's monthly premium pursuant to 130 CMR 505.004(l) and 130 CMR 506.011(B)(2).

## **Order for MassHealth**

Rescind the May 12, 2025 downgrade notice and approve Appellant for CommonHealth benefits. Issue a new notice with appeal rights informing Appellant of the monthly CommonHealth premium.

## **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.

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Cynthia Kopka  
Hearing Officer  
Board of Hearings

MassHealth Representative: Thelma Lizano, Charlestown MassHealth Enrollment Center, 529 Main Street, Suite 1M, Charlestown, MA 02129