

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	DENIED	Appeal Number:	2508571
Decision Date:	9/3/2025	Hearing Date:	07/10/2025
Hearing Officer:	Kenneth Brodzinski		

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Chanthy Kong



*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 Financial Eligibility
Decision Date:	9/3/2025	Hearing Date:	07/10/2025
MassHealth's Rep.:	Chanthy Kong	Appellant's Rep.:	Pro se
Hearing Location:	Tewksbury 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 May 22, 2025, MassHealth informed Appellant that her benefits would terminate on June 30, 2025 because she no longer qualifies for MassHealth benefits upon determining that her gross countable household income exceeds the applicable eligibility limit (Exhibit A). Appellant filed for an appeal with the Board of Hearings in a timely manner on June 5, 2025 (See 130 CMR 610.015(B) and Exhibit A). Eligibility determinations constitute adequate grounds for appeal (130 CMR 610.032).

Action Taken by MassHealth

MassHealth determined that Appellant no longer qualifies for MassHealth benefits upon determining that her gross countable household income exceeds the applicable eligibility limit.

Issue

The appeal issue is whether MassHealth properly applied the controlling regulations to accurate facts when it determined that Appellant no longer qualifies for MassHealth benefits upon determining that her gross countable household income exceeds the applicable eligibility limit.

Summary of Evidence

Both parties appeared by telephone.

The Masshealth representative testified that Appellant is a non-disabled, non-pregnant adult female under the age of [REDACTED] residing in the community with a minor child in a household of two. Appellant's last verified income was taken from her 2023 federal tax return which shows dividend and interest income totaling \$2,500.00 per month. The Masshealth representative testified that this exceeds the applicable income limit of \$2,345.00 per month for a household of two. Accordingly, MassHealth issued the subject termination notice (Exhibit A).

Appellant appeared on her own behalf and testified that she is not working and is at home taking care of her elderly mother as well as her minor child. Appellant testified that she is waiting for [REDACTED] to take some actions before filing her 2024 tax return. Appellant stated that once she files the 2024 return, she will file copies with MassHealth. Lastly, Appellant wondered if the sale of a home to purchase another home had any impact on the current determination. In response, the Masshealth representative stated that it did not.

Findings of Fact

By a preponderance of the evidence, this record supports the following salient findings:

1. Appellant is a non-disabled, non-pregnant adult female under the age of [REDACTED] residing in the community with a minor child in a household of two.
2. Appellant's last verified income was taken from her 2023 federal tax return which shows dividend and interest income totaling \$2,500.00 per month.
3. Masshealth concluded that Appellant's gross monthly income exceeds the applicable income limit of \$2,345.00 per month for a household of two.
4. MassHealth issued the subject termination notice on May 22, 2025 (Exhibit A).
5. Appellant expects to file her 2024 federal tax return and forward a copy to Masshealth.
6. Appellant's sale of a home to purchase another home had no bearing on MassHealth's determination notice on May 22, 2025.

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.

Eligibility for MassHealth Standard for a non-disabled, non-pregnant, adult parent residing in the community is 133% FPL for the household size, currently \$2345.00 for a household of two (130 CMR 505.002)(C)(1)(a)). At the time the subject decision was made, Appellant's last verified income was \$2,500.00 per month. Appellant has yet to verify that her gross countable monthly income is below the applicable limit of \$2,345.00 per month.

On this record, Appellant has failed to establish that MassHealth's actions are invalid due to an error of fact and/or law. For the foregoing reasons, the appeal is DENIED.

Order for MassHealth

Remove AID PENDING. Unless Appellant has filed income verifications during the pendency of this appeal which establishes eligibility, proceed with termination under notice of May 22, 2025.

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

MassHealth Representative: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957, 978-863-9290