

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2510959
Decision Date:	9/15/2025	Hearing Date:	08/28/2025
Hearing Officer:	Mariah Burns		

Appearance for Appellant:

Pro se

Appearance for MassHealth:

Katelyn Costello, Quincy MassHealth
Enrollment Center



*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; Under 65; Medicare Savings Program
Decision Date:	9/15/2025	Hearing Date:	08/28/2025
MassHealth's Rep.:	Katelyn Costello	Appellant's Rep.:	Pro se
Hearing Location:	Telephone (Quincy)	Aid Pending:	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 July 3, 2025, MassHealth approved the appellant for MassHealth CommonHealth benefits, but not the Medicare Savings Program. *See* Exhibit 1. The appellant filed this appeal in a timely manner on July 25, 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 denied the appellant coverage of his Medicare premium under the Medicare Savings Program.

Issue

The appeal issue is whether MassHealth correctly determined that the appellant does not meet the income requirements to qualify for the Medicare Savings Program.

Summary of Evidence

The appellant is an adult under the age of 65 with a verified disability who resides in a household of one. MassHealth was represented by a worker from the Quincy MassHealth Enrollment Center. All parties appeared at the hearing by telephone. The following is a summary of the evidence and testimony provided:

On or about May 23, 2025, the appellant was required to update his income information with MassHealth. On July 3, 2025, MassHealth issued a notice stating that the appellant is eligible for MassHealth CommonHealth with a monthly premium of \$36.40. The notice did not approve the appellant for the Medicare Savings Program (MSP). MassHealth determined that the appellant receives \$3,036.00 in monthly Social Security benefits, which equals 232.6% of the federal poverty level for a household of one.

The appellant agreed with MassHealth's calculation of his income, reporting that his take-home is \$2,851.00 after Medicare is deducted. He stated that he is not challenging the premium, but believes he should be eligible for the Medicare Savings Program.

Findings of Fact

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

1. The appellant is an adult with a verified disability under the age of 65 who resides in a household of one. Testimony, Exhibit 4.
2. The appellant currently receives MassHealth CommonHealth benefits. Exhibit 1, Exhibit 4.
3. On July 3, 2025, after the appellant updated his income information, MassHealth issued a notice approving him for MassHealth CommonHealth, but not the Medicare Savings Program. Exhibit 1.
4. The appellant filed a timely request for fair hearing on July 25, 2025. Exhibit 2.
5. The appellant receives gross monthly Social Security benefits of \$3,036.00. Testimony.

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 particular MassHealth coverage type. The rules of financial responsibility and calculation of financial eligibility for individuals who are under

age 65 are detailed in 130 CMR 506.000: *Health Care Reform: MassHealth: Financial Requirements*. The MassHealth coverage types are:

- (1) *MassHealth Standard* - for pregnant women, 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) *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) *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
- (6) *MassHealth Medicare Savings Programs (MSP, also called Senior Buy-In and Buy-In)* - for certain Medicare beneficiaries.

130 CMR 505.001(A) (emphasis added).

MassHealth will cover “the cost of the monthly Medicare Part B premium on behalf of members who meet the requirements of 130 CMR 505.004 and who have modified adjusted gross income of the MassHealth Disabled Adult household is less than or equal to 135% of the federal poverty level.” 130 CMR 505.004(L)(1). Put otherwise, members who receive MassHealth CommonHealth benefits may also receive coverage of the Medicare Part B premium under MSP for Qualifying Individuals, but only if their income is at or below 135% of the federal poverty level. See 130 CMR 519.011(B)(2), see also MassHealth Eligibility Operations Memo (EOM) 23-04 (February 2023). To determine financial eligibility pursuant to 130 CMR 506.007, MassHealth must construct a household as described, in relevant part, in 130 CMR 506.002(C) for each individual person applying for or renewing coverage:

- (C) MassHealth Disabled Adult Household. The household consists of
 - (1) the individual;
 - (2) the individual’s spouse if living with them;
 - (3) the individual’s natural, adopted, and stepchildren younger than 19 years old if living with them; and
 - (4) if any individual described in 130 CMR 506.002(C)(1), (2), or (3) is pregnant, the number of expected children

Here, the appellant does not challenge that he resides in a household of one. Based on 2025 MassHealth Income Standards and Federal Poverty Guidelines, 135% of the federal poverty level equates to a monthly income of \$1,761.00 for a household of that size. See *chart* at <https://www.mass.gov/doc/2025-masshealth-income-standards-and-federal-poverty-guidelines-0/download>.

MassHealth determines an applicant's modified adjusted gross income (MAGI) by taking 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), less deductions described in 130 CMR 506.003(D). Specifically, 130 CMR 506.007 provides how the MAGI is calculated:

(A)(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(M).

(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.

....

(C) The monthly federal-poverty-level income standards are determined according to annual standards published in the Federal Register using the following formula. The MassHealth agency adjusts these standards annually.

(1) Multiply the annual 100% figure posted in the Federal Register by the applicable federal poverty level income standard.

(2) Round these annual figures up to the nearest hundredth.

(3) Divide by 12 to arrive at the monthly income standards.

Per 130 CMR 506.003(B), countable income includes, in relevant part, "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...[including, but] 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.”

Here, MassHealth determined, and the appellant agreed, that he receives \$3,036.00 in gross monthly Social Security benefits. As that amount is greater than 135% of the federal poverty level, the appellant does not qualify for MSP – Qualified Individual in addition to his MassHealth CommonHealth benefit.¹ Therefore, I find that MassHealth did not err in issuing the July 3, 2025 notice denying the appellant coverage under the Medicare Savings Program.

For the foregoing reasons, the appeal is denied.

Order for MassHealth

None.

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

Mariah Burns
Hearing Officer
Board of Hearings

MassHealth Representative: Quincy MEC, Attn: Appeals Coordinator

¹ The MassHealth representative testified that an applicant must have less than or equal to 225% of the federal poverty level to qualify for the MSP. This testimony is not supported by the regulations at 130 CMR 505.004(L)(1). Even assuming this testimony was accurate, the appellant’s income is equal to approximately 232% of the federal poverty level for a household of one. Less the 5% disregard, the appellant’s income would still be too high to qualify for the benefit as described by the MassHealth representative.