

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2512217
Decision Date:	11/6/2025	Hearing Date:	10/03/2025
Hearing Officer:	Christopher Jones		

Appearance for Appellant:
Pro se

Appearance for MassHealth:
Sherianne Paiva – Taunton



*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; Income
Decision Date:	11/6/2025	Hearing Date:	10/03/2025
MassHealth's Rep.:	Sherrienne Paiva	Appellant's Rep.:	Pro se
Hearing Location:	Telephonic	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 August 2, 2025, MassHealth denied the appellant's application for MassHealth benefits based upon his household income. (Exhibit 1; 130 CMR 506.007.) The appellant filed this appeal in a timely manner on August 19, 2025. (130 CMR 610.015(B); Exhibit 2.) Denial of assistance is valid grounds for appeal. (130 CMR 610.032.)

Action Taken by MassHealth

MassHealth denied the appellant MassHealth benefits based upon his household's income.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.000 and 506.000, in determining that the appellant's income is too high to qualify for MassHealth benefits.

Summary of Evidence

MassHealth's representative testified that the appellant is an adult with an individual household. On August 2, 2025, the appellant reported gross employment income of \$1,400 every two weeks. This is equivalent to \$3,033 per month or 227% of the federal poverty level for a household of 1.

Based upon this income, MassHealth's representative testified that the appellant is not eligible for a MassHealth benefit, but he would be eligible to purchase a health plan through the Health Connector.

The appellant confirmed that the information MassHealth used was correct. The appellant then disconnected from the appeal. The appellant was called back twice but did not answer.¹ The appellant texted the hearing officer, saying that he was at work and had spotty service, asking to reschedule the hearing to later in the day. The appellant was informed that the hearing officer may not communicate with parties via text message, and that further communication would need to be conducted with the Board of Hearings.

Findings of Fact

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

- 1) The appellant is an adult. He has a tax household of 1. (Testimony by MassHealth's representative.)
- 2) The appellant reported a change in income on August 2, 2025. The appellant reported earning gross income of \$1,400 every 2 weeks. (Testimony by MassHealth's representative and the appellant.)

Analysis and Conclusions of Law

MassHealth offers a variety of coverage types based upon an individual's circumstances and finances. To qualify for MassHealth, an individual must fit into a category of eligibility and fall below the relevant financial thresholds. Financial eligibility is "determined by comparing the sum of all countable income ... for the individual's household ... with the applicable income standard for the specific coverage type." (130 CMR 505.007(A).) Generally, applicants between the ages of 20 and 65 who seek MassHealth Standard or CarePlus benefits must have countable income under 133% of the federal poverty level. (130 CMR 505.002(E), 505.008(A).) However, disabled adults between the ages of 19 and 64 can qualify for the CommonHealth program, regardless of their income by paying a monthly premium. (See 130 CMR 505.004(B)-(C), 506.009.) Children younger than 19 are eligible for Standard coverage up to 150% of the federal poverty level and Family Assistance with income between 150% and 300% of the federal poverty level. (130 CMR 505.002(B)505.005(B).)

¹ The appellant's phone had gone straight to voicemail when first called for the appeal. The appellant had also mentioned that he was at work and that he was not allowed to talk on the phone during work.

For individuals under the age of 65, countable income includes the total amount of taxable income received by everyone in a member's household "after allowable deductions on the U.S Individual Tax Return," and specifically includes "social security benefits." (130 CMR 506.003(B); see also 130 CMR 506.002.) Monthly income is derived by multiplying average weekly income by 4.333, and "[f]ive 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." (130 CMR 506.007(A).)

The federal poverty level for an individual in 2025 is \$1,305 per month. The appellant's weekly income is \$700. Multiplied by 4.333, this equates to monthly income of \$3,033.10. The resulting federal poverty level would be 232.4% or 227% once 5% is disregarded. Because the appellant's income is over 133% of the federal poverty level, MassHealth was correct that he is not eligible for MassHealth benefits. (130 CMR 505.002(E).) This appeal is DENIED.

While the appellant disconnected from the hearing, the appellant first confirmed that MassHealth was using correct information. The appellant is welcome to report any new information to MassHealth and request that they redetermine his eligibility. (See 130 CMR 501.010(B).) A new appeal may be filed if the appellant disagrees with MassHealth's new determination.

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 receipt of this decision.

Christopher Jones
Hearing Officer
Board of Hearings

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780