

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2516717
<b>Decision Date:</b>	01/22/2026	<b>Hearing Date:</b>	12/12/2025
<b>Hearing Officer:</b>	Scott Bernard		

**Appearance for Appellant:**  
*Pro se via telephone*

**Appearance for MassHealth:**  
Mayra Vazquez *via telephone*



*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 65/Income
<b>Decision Date:</b>	01/22/2026	<b>Hearing Date:</b>	12/12/2025
<b>MassHealth's Rep.:</b>	Mayra Vazquez	<b>Appellant's Rep.:</b>	<i>Pro se</i>
<b>Hearing Location:</b>	Tewksbury MassHealth Enrollment Center	<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 November 4, 2025, MassHealth informed the appellant that her benefit level would change from MassHealth Standard to CommonHealth on November 1, 2025 after determining that the household's countable income exceeded the income limit for MassHealth Standard. (See 130 CMR 505.002; 130 CMR 505.004; and Exhibit (Ex.) 1). The appellant filed this appeal in a timely manner on November 13, 2025. (See 130 CMR 610.015(B) and Ex. 2). Determinations regarding the scope and amount of medical assistance, including changes in benefit level, constitute valid grounds for appeal. (See 130 CMR 610.032).

### Action Taken by MassHealth

MassHealth downgraded the appellant's benefit level from MassHealth Standard to CommonHealth after determining that the household's countable income exceeded the income limit for MassHealth Standard.

### Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002 and 130 CMR

505.004, in determining that the household's countable income exceeded the income limit for MassHealth Standard, resulting in a change in the appellant's benefit level to CommonHealth.

## Summary of Evidence

A benefits eligibility representative from the Tewksbury MassHealth Enrollment Center (MEC) appeared and testified on behalf of MassHealth. The appellant appeared at the hearing and testified on her own behalf. The hearing was conducted by telephone, and both parties participated remotely.

The MassHealth representative testified first. She stated that the appellant is an individual under the age of 65 with a verified disability. (Testimony; Ex. 3). On November 4, 2025, the appellant informed MassHealth that she had married and requested that her spouse be added to her household. (Testimony). After MassHealth added the appellant's spouse and counted his income, the household was treated as a household of two with countable income of approximately \$8,000.00 per month. (Testimony). This amount exceeded the \$2,345.00 per month income limit for MassHealth Standard for a household of two under the applicable federal poverty level guidelines adopted by the Commonwealth. (Testimony). Because the household income exceeded the MassHealth Standard limit, MassHealth determined that the appellant was no longer eligible for MassHealth Standard and transitioned her to CommonHealth, which has no income limit but requires payment of a monthly premium. (Testimony; Ex. 1).

Through a notice dated November 4, 2025, MassHealth informed the appellant that her coverage was changed from MassHealth Standard to CommonHealth effective November 1, 2025. (Testimony; Ex. 1). The notice explained that the change resulted from the addition of the appellant's spouse to the household and the resulting inclusion of spousal income in the eligibility determination. The notice also assessed a CommonHealth premium of \$242.00 per month beginning in December 2025. (Id.).

The MassHealth representative further testified that CommonHealth provides the same scope of medical services as MassHealth Standard and that the only substantive difference for the appellant was the imposition of a premium. (Testimony). She confirmed that there were no other substantive eligibility changes reflected in the record at the time the notice issued, aside from a contemporaneous request for income verification. (Testimony).

In response, the appellant testified that she receives \$1,489.00 per month in Social Security disability benefits and that she reported her marriage to MassHealth immediately after it occurred. (Testimony; Ex. 5). She testified that her income did not change as a result of the marriage and that she and her spouse keep their finances largely separate. (Testimony; Ex. 5). The appellant explained that she contributes approximately \$1,000.00 per month toward shared household expenses, including mortgage-related costs, taxes, and insurance, and retains approximately \$489.00 per month for personal expenses such as food, gas, phone service, and hygiene items. (Testimony; Ex. 5). She acknowledged that her spouse receives retirement income

from the Commonwealth of Massachusetts but testified that she did not understand why MassHealth requested proof of his income because he was not applying for coverage. (Testimony). The appellant did not specifically challenge the amount of the CommonHealth premium assessed in the notice, but instead challenged MassHealth's inclusion of her spouse's income in the eligibility determination. (Testimony).

## **Findings of Fact**

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

1. The appellant is an individual under the age of 65 with a verified disability. (Testimony; Ex. 3).
2. On November 4, 2025, the appellant informed MassHealth that she had married and requested that her spouse be added to her household. (Testimony).
3. After MassHealth added the appellant's spouse and counted his income as part of the household income, the household was treated as a household of two with countable income of approximately \$8,000.00 per month. (Testimony).
4. This amount exceeded the \$2,345.00 per month income limit for MassHealth Standard for a household of two under the applicable federal poverty level guidelines adopted by the Commonwealth. (Testimony).
5. Because the household income exceeded the MassHealth Standard limit, MassHealth determined that the appellant was no longer eligible for MassHealth Standard and transitioned her to CommonHealth, which has no income limit but requires payment of a monthly premium. (Testimony; Ex. 1).
6. Through a notice dated November 4, 2025, MassHealth informed the appellant that her coverage was changed from MassHealth Standard to CommonHealth effective November 1, 2025. (Testimony; Ex. 1).
7. The notice explained that the change resulted from the addition of the appellant's spouse to the household and the resulting inclusion of spousal income in the eligibility determination.
8. The notice also assessed the appellant a CommonHealth premium of \$242.00 per month beginning in December 2025. (Testimony; Ex. 1).
9. CommonHealth provides the same scope of medical services as MassHealth Standard, and the only substantive difference for the appellant was the imposition of a premium. (Testimony).

## Analysis and Conclusions of Law

Eligibility for MassHealth coverage for individuals under the age of 65 whose eligibility is determined under the Modified Adjusted Gross Income (MAGI) rules is based on the composition of the individual's household and the total countable income of that household, as defined by regulation. (130 CMR 506.007(A)). MassHealth constructs a household for each individual applying for or renewing coverage based on tax relationships and familial relationships, including spousal relationships. (130 CMR 506.007(A)(1)). Once the household is established, eligibility is determined using the total countable income of all individuals included in that household. (130 CMR 506.007(A)(2)).

Countable income includes earned and unearned income received by household members, as defined by regulation, and eligibility is determined by comparing that income to the applicable income standards for the coverage type at issue. (130 CMR 506.003; 506.007). For an adult under age 65, eligibility for MassHealth Standard requires that household income not exceed 133% of the federal poverty level, after application of the five-percentage-point disregard. (130 CMR 505.002; 506.007(A)(3)).

When an individual reports a change in circumstances, including a change in household composition, MassHealth must reassess eligibility using the information available at that time and determine the most comprehensive coverage for which the individual is eligible. (130 CMR 502.001(A)(3)(c); 502.002; 502.007). If an individual no longer meets the income requirements for MassHealth Standard, MassHealth must determine whether the individual is eligible for another MassHealth coverage type, including CommonHealth. (130 CMR 505.004).

CommonHealth provides coverage for individuals who are otherwise eligible for MassHealth, but whose income exceeds the income limits for MassHealth Standard. CommonHealth has no income limit but requires payment of a monthly premium based on household income. (130 CMR 505.004).

Here, the appellant does not dispute that she reported her marriage to MassHealth or that MassHealth added her spouse to her household. Under the governing regulations, spouses living together are included in the same MAGI household, and the spouse's income must be counted in determining eligibility, regardless of whether the spouse is applying for coverage. (130 CMR 506.007(A)(1) – (2)). After adding the spouse and counting his income, MassHealth determined that the household's countable income exceeded the income limit for MassHealth Standard. Based on that determination, MassHealth correctly concluded that the appellant was no longer eligible for MassHealth Standard and transitioned her to CommonHealth, the coverage providing the most comprehensive benefits available to her at that income level. (130 CMR 502.001; 505.002; 505.004).

Although the appellant credibly testified that she and her spouse maintain largely separate

finances and that her own income did not change as a result of the marriage, the MassHealth eligibility regulations do not permit exclusion of spousal income on that basis. Eligibility determinations must be made using household income as defined by regulation, not based on how household members allocate expenses or maintain personal finances. Accordingly, based on the household composition and income information available at the time of the November 4, 2025 determination, MassHealth correctly applied the governing regulations in changing the appellant's benefit level from MassHealth Standard to CommonHealth.

For the above reasons, the appeal is DENIED.

## **Order for MassHealth**

Remove 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.

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Scott Bernard  
Hearing Officer  
Board of Hearings

cc: Sylvia Tiar, Tewksbury MassHealth Enrollment Center, 367 East Street, Tewksbury, MA 01876-1957