

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	DENIED	<b>Appeal Number:</b>	2518642
<b>Decision Date:</b>	1/21/2026	<b>Hearing Date:</b>	01/15/2026
<b>Hearing Officer:</b>	Sharon Dehmand		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Shauna Post, Springfield 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>	DENIED	<b>Issue:</b>	Medicare Savings Programs (MSPs); Income
<b>Decision Date:</b>	1/21/2026	<b>Hearing Date:</b>	01/15/2026
<b>MassHealth's Rep.:</b>	Shauna Post	<b>Appellant's Rep.:</b>	Pro se
<b>Hearing Location:</b>	Remote	<b>Aid Pending:</b>	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 October 14, 2025, MassHealth notified the appellant that he does not qualify for payments of his Medicare premium under Medicare Savings Programs (MSP) because his income exceeded the allowed threshold for MassHealth benefits. See 130 CMR 516.007, 130 CMR 519.011(B) and Exhibit 1. The appellant filed this appeal in a timely manner on December 16, 2025. See 130 CMR 610.015(B) and Exhibit 2. Any MassHealth decision to suspend, reduce, terminate, or restrict a member's assistance is a valid ground for appeal before the Board of Hearings. See 130 CMR 610.032(A)(3).

## Action Taken by MassHealth

MassHealth denied the payment of the appellant's Medicare premiums under MSP because his income exceeded the allowed threshold for MassHealth benefits.

## Issue

Whether MassHealth correctly determined that the appellant did not qualify for payments of his Medicare premium under MSP because his income exceeded the allowed threshold for

MassHealth benefits. See 130 CMR 519.011(B).

## Summary of Evidence

All parties participated virtually. MassHealth was represented by a worker from the Springfield MassHealth Enrollment Center. The appellant appeared pro se and verified his identity. The following is a summary of the testimony and evidence provided at the hearing:

The MassHealth representative testified that the appellant is over the age of [REDACTED] and lives in a household of one. He was on Qualified Medicare Beneficiaries (QMB) coverage as part of the Medicaid Savings Program (MSP) from March 1, 2024 to February 18, 2025. On September 10, 2025, the appellant submitted an application to MassHealth. MassHealth verified the appellant's income to be \$3,131.25 per month consisting of \$604.00 from the Social Security Administration and \$2,527.05 from a private pension. On October 14, 2025, MassHealth notified the appellant that he does not qualify for payments of his Medicare premium under MSP because his total income exceeded the allowed threshold for MassHealth benefits. She stated that the income limit for MSP coverage is \$2,935.00 per month for a household of one. The appellant's total income exceeds this limit even after the \$20 deduction allowed by MassHealth ( $\$3,131.25 - \$20.00 = \$3,111.25$ ). The appellant is over the income limit by \$176.25 per month.

The appellant confirmed his income and household size. He expressed his frustration with his overwhelming expenses. The appellant added that since his income is so close to the threshold limit, this hearing officer should be able to do something about his situation.

## Findings of Fact

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

1. The appellant is over the age of [REDACTED] and lives in a household of one. (Testimony and Exhibit 4).
2. The appellant was on QMB coverage as part of MSP from March 1, 2024 to February 18, 2025. (Testimony).
3. On September 10, 2025, the appellant submitted an application to MassHealth. (Testimony).
4. On October 14, 2025, MassHealth notified the appellant that he does not qualify for payments of his Medicare premium under MSP because his total income exceeded the allowed threshold for MassHealth benefits. (Testimony and Exhibit 1).
5. The appellant filed this appeal in a timely manner on December 16, 2025. (Exhibit 2).

6. The appellant's total income is \$3,131.25 per month consisting of \$604.00 from the Social Security Administration and \$2,527.05 from a private pension. (Testimony).
7. After the \$20 deduction allowed by MassHealth, the appellant's income equals \$3,111.25 per month. (Testimony).
8. The income limit for MSP coverage is \$2,935.00 per month for a household of one. (Testimony and Federal Poverty Guidelines).

## **Analysis and Conclusions of Law**

MassHealth administers and is responsible for delivery of healthcare benefits to MassHealth members. See 130 CMR 515.002. Eligibility for MassHealth benefits differs depending on an applicant's age. Regulations 130 CMR 515.000 through 522.000 (referred to as Volume II) provide the requirements for non-institutionalized persons aged 65 or older, institutionalized persons of any age, persons who would be institutionalized without community-based services, and certain Medicare beneficiaries. See 130 CMR 515.002(B).

Here, the appellant is over the age of [REDACTED]. As such, the appellant's eligibility for MassHealth benefits will be determined by the requirements set forth in Volume II. See id.

MassHealth regulation at 130 CMR 519.000 explains the categorical requirements and financial standards that must be met to qualify for a MassHealth coverage type. The rules of financial responsibility and the calculation of financial eligibility are detailed in 130 CMR 520.000: MassHealth: Financial Eligibility. Effective November 24, 2023, MassHealth offers three MSP coverage types: Qualified Medicare Beneficiaries (QMB), Specified Low-Income Medicare Beneficiaries (SLMB), and Qualifying Individuals (QI). See 130 CMR 519.001; 130 CMR 519.010; 130 CMR 519.011.

The MassHealth agency determines eligibility for the most comprehensive coverage available to the applicant, although the applicant has the right to choose to have eligibility determined only for Medicare Savings Plan (MSP) for Qualified Medicare Beneficiaries (QMB) or MSP for Specified Low Income Medicare Beneficiaries (SLMB) and Qualifying Individuals (QI) coverage. If no choice is made by the applicant, the MassHealth agency determines eligibility for all available coverage types. See 130 CMR 519.001(C).

In order to qualify for coverage type QMB, a member must (1) be entitled to hospital benefits under Medicare Part A; (2) have a countable income amount (including the income of the spouse with whom he or she lives) that is less than or equal to 190% of the federal poverty level; (3) Effective until February 29, 2024, have countable assets less than or equal to two times the amount of allowable assets for Medicare Savings Programs as identified by the

Centers for Medicare and Medicaid Services. Each calendar year, the allowable asset limits shall be made available on MassHealth's website. Effective March 1, 2024, MassHealth will disregard all assets or resources when determining eligibility for MSP-only benefits; and (4) meet the universal requirements of MassHealth benefits in accordance with 130 CMR 503.000 : Health Care Reform: MassHealth: Universal Eligibility Requirements or 130 CMR 517.000 : MassHealth: Universal Eligibility Requirements, as applicable. See 130 CMR 519.010(A)(Emphasis added).

In order to qualify for coverage type SLMB, a member must (a) be entitled to hospital benefits under Medicare Part A; (b) have a countable income amount (including the income of the spouse with whom they live) greater than 190% and less than or equal to 210% of the federal poverty level. MassHealth will disregard all assets or resources when determining eligibility for MSP only benefits; (c) Effective until February 29, 2024, have countable assets less than or equal to two times the amount of allowable assets for Medicare Savings Programs as identified by the Centers for Medicare and Medicaid Services. Each calendar year, the allowable asset limits shall be made available on MassHealth's website. Effective March 1, 2024, MassHealth will disregard all assets or resources when determining eligibility for MSP-only benefits; and (d) meet the universal requirements of MassHealth benefits in accordance with 130 CMR 503.000: Health Care Reform: MassHealth: Universal Eligibility Requirements or 130 CMR 517.000: MassHealth: Universal Eligibility Requirements, as applicable. See 130 CMR 519.011(A)(1)(Emphasis added).

In order to qualify for coverage type QI, a member must (b) have a countable income amount (including the income of the spouse with whom he or she lives) that is greater than 210% of the federal poverty level and less than or equal to 225% of the federal poverty level; (c) effective until February 29, 2024, have countable assets less than or equal to two times the amount of allowable assets for Medicare Savings Programs as identified by the Centers for Medicare & Medicaid Services. Each calendar year, the allowable asset limits shall be made available on MassHealth's website. Effective March 1, 2024, MassHealth will disregard all assets or resources when determining eligibility for MSP-only benefits; and (d) meet the universal requirements of MassHealth benefits in accordance with 130 CMR 503.000: Health Care Reform: MassHealth: Universal Eligibility Requirements or 130 CMR 517.000: MassHealth: Universal Eligibility Requirements, as applicable. See 130 CMR 519.011(B)(1)(Emphasis added).

An individual's countable income amount refers to the individual's gross earned and unearned income<sup>1</sup> less certain business expenses and standard income deductions. See 130 CMR 520.009. MassHealth allows a \$20 deduction per individual or couple from the member's total gross unearned income. See 130 CMR 520.013(A).

Here, the appellant's uncontested total income is \$3,131.25 per month. Less the \$20 deduction,

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<sup>1</sup> Unearned income includes, but is not limited to, social security benefits, railroad retirement benefits, pensions, annuities, federal veterans' benefits, rental income, interest, and dividend income. See 130 CMR 520.009(D).

the appellant's household income equals \$3,111.25 per month. See 130 CMR 520.013(A). A Medicare beneficiary such as the appellant qualifies for MSP QI if his countable income amount is greater than 210% of the FPL and less than or equal to 225% of the FPL. See 130 CMR 519.011(B)(b). As such, the income limit for MSP QI is set at \$2,935.00 per month for a household of one. See <https://www.mass.gov/doc/2025-masshealth-income-standards-and-federal-poverty-guidelines>. The appellant's income is \$3,111.25 per month which exceeds the allowed threshold. As such, I find that MassHealth correctly denied coverage to the appellant because his total income exceeds the allowed threshold for MassHealth benefits. See 130 CMR 519.011(B)(b).

For the foregoing reasons, this 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 receipt of this decision.

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Sharon Dehmand, Esq.  
Hearing Officer  
Board of Hearings

MassHealth Representative: Dori Mathieu, Springfield MassHealth Enrollment Center, 243 Cottage Street, Springfield, MA 01104, 413-785-4186