

**Office of Medicaid  
BOARD OF HEARINGS**

**Appellant Name and Address:**



<b>Appeal Decision:</b>	Denied	<b>Appeal Number:</b>	2600989
<b>Decision Date:</b>	2/25/2026	<b>Hearing Date:</b>	02/23/2026
<b>Hearing Officer:</b>	Susan Burgess-Cox		

**Appearance for Appellant:**  
Pro se

**Appearance for MassHealth:**  
Jessica Ramirez



*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>	2/25/2026	<b>Hearing Date:</b>	02/23/2026
<b>MassHealth’s Rep.:</b>	Jessica Ramirez	<b>Appellant’s Rep.:</b>	Pro se
<b>Hearing Location:</b>	All Parties Appeared via Microsoft Teams	<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 January 3, 2026, MassHealth determined that the appellant does not qualify for MassHealth because her income is too high. (130 CMR 506.003; 130 CMR 506.007(B); Exhibit 1). The appellant filed a timely appeal on January 16, 2026. (130 CMR 610.015(B) Exhibit 2). Denial of assistance is valid grounds for appeal. (130 CMR 610.032(A)(1)).

### Action Taken by MassHealth

MassHealth notified the appellant that she does not qualify for MassHealth because her income is too high. (130 CMR 506.003; 130 CMR 506.007(B)).

### Issue

Whether MassHealth was correct in determining that the appellant is not eligible for MassHealth because her income is too high. (130 CMR 506.003; 130 CMR 506.007(B)).

### Summary of Evidence

The appellant is an adult under the age of 65 and a household of one. The appellant has gross

unearned income is \$1,104 each week or \$4,783.63 each month.<sup>1</sup> After applying a regulatory 5% disregard of \$65.25, the appellant's modified adjusted gross income (MAGI) of \$4,718.38 is at 361.56% of the federal poverty level for a household of one. The MassHealth representative testified that to be eligible for MassHealth the appellant must have MAGI less than or equal to 133% of the federal poverty level. That amount is \$1,735 each month for a household of one.

The MassHealth representative testified that the appellant was eligible for a Connector Care Plan in the past. In October 2025, the appellant contacted the agency and reported income of \$0. This made the appellant eligible for MassHealth CarePlus. In January 2026, the appellant submitted a Job Update Form, reporting income from the Department of Unemployment Assistance in the amount of \$1,104 each month. MassHealth verified this income amount and made the eligibility decision on appeal.

The appellant testified that she takes home \$939 each week and wanted MassHealth to consider this net income in determining eligibility. The MassHealth representative responded that the agency can only look to gross income. If the agency did look to an amount of \$939 each week, the monthly income of \$4,068.69 still exceeds the income limits to qualify for MassHealth Standard or CarePlus.

The appellant argued that the agency should not consider unemployment benefits as income. The appellant testified that this was a 6-month benefit and reporting a change to MassHealth when the assistance terminates is burdensome to a member. The appellant testified that an individual cannot obtain a mortgage, car loan or other personal loans when receiving unemployment assistance as it is temporary income. The appellant argued that if unemployment benefits cannot be utilized to qualify for these types of loans, it should not be considered in determining eligibility for MassHealth. The appellant argued that the eligibility system is archaic and changes need to be made to the laws and regulations governing MassHealth so the agency can consider cost of living expenses such as a mortgage, utilities and car payments in determining eligibility. The appellant argued that the country is in a crisis and these changes could help make it better.

## **Findings of Fact**

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

1. The appellant is under age 65 and a household of one.
2. The appellant has unearned income in the amount of \$1,104 each week or \$4,783.63 each month.
3. The appellant has not been deemed disabled by MassHealth or the Social Security Administration.

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<sup>1</sup> In determining monthly income, MassHealth multiplies average weekly income by 4.333. (130 CMR 506.007(A)).

## Analysis and Conclusions of Law

MassHealth regulations at 130 CMR 505.000 explain the categorical requirements and financial standards that must be met to qualify for MassHealth. To establish eligibility for MassHealth, applicants must meet both the categorical requirements and financial standards.

These coverage types set forth at 130 CMR 505.001(A) are as follows:

- (1) MassHealth Standard - for people who are pregnant, children, parents and caretaker relatives, young adults<sup>2</sup>, disabled individuals, certain persons who are HIV positive, individuals with breast or cervical cancer, independent foster care adolescents, Department of Mental Health 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) MassHealth 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) MassHealth 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.

In this case, the appellant is over the age of 21 but under 65. The appellant is not a Medicare beneficiary. The appellant has not presented any evidence that she has any of the listed health conditions or been deemed disabled by MassHealth or the Social Security Administration. Therefore, the appellant does not qualify for MassHealth Standard, CommonHealth, Family Assistance or MSP. The appellant does meet the categorical requirements for MassHealth CarePlus.

An individual between the ages of 21 and 64 who is categorically eligible for MassHealth CarePlus can only be financially eligible if “the individual’s modified adjusted gross income of the MassHealth MAGI household is less than or equal to 133% of the federal poverty level.” (130 CMR 505.008(A)(2)(c)). To determine financial eligibility pursuant to 130 CMR 506.007(A), MassHealth must construct a household as described in 130 CMR 506.002(B) for each individual who is applying for or renewing coverage. MAGI household composition rules used to determine member eligibility are the following:

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<sup>2</sup> “[Y]oung adults” are defined as those aged 19 and 20. See 130 CMR 501.001.

- (1) Taxpayers Not Claimed as a Tax Dependent on His or Her Federal Income Taxes. For an individual who expects to file a tax return for the taxable year in which the initial determination or renewal of eligibility is being made and who is not claimed as a tax dependent by another taxpayer, the household consists of
  - (a) the taxpayer; including his or her spouse, if the taxpayers are married and filing jointly regardless of whether they are living together;
  - (b) the taxpayer's spouse, if living with him or her regardless of filing status;
  - (c) all persons the taxpayer expects to claim as tax dependents; and
  - (d) if any individual described in 130 CMR 506.002(B)(1)(a) through (c) is pregnant, the number of expected children.

The appellant is in a household of one.

Once the individual's household size is established, the MassHealth MAGI household income is determined by:

- (2)....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(K).
  - (b) Countable income includes earned income described in 130 CMR 506.003(A)<sup>3</sup> and unearned income described in 130 CMR 506.003(B)<sup>4</sup> less deductions described in 130 CMR 506.003(D).
  - (c) In determining monthly income, the MassHealth agency multiplies average

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<sup>3</sup> The regulations define earned income as the total amount of taxable compensation received for work or services performed less pretax deductions. (130 CMR 506.003(A)). Earned income may include wages, salaries, tips, commissions, and bonuses. (130 CMR 506.003(A)). The regulations also include methods for the agency to use to calculate earned income for the self-employed, S-Corporations, Partnerships and seasonal employment. (130 CMR 506.003(A)). Based on the testimony presented at hearing, the appellant's income does not meet this definition.

<sup>4</sup> The regulations define unearned income as 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. (130 CMR 506.003(B)(1)). Unearned income may include, but is 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. (130 CMR 506.003(B)(2)). The testimony and evidence presented by both parties show that the appellant receives unearned income. While the regulations do not specifically name unemployment assistance as a type of unearned income, it is taxable income that does not directly result from the appellant's own labor and the types of income listed in the regulations are just examples, not an exhaustive list.

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. (130 CMR 506.007(A)).

The regulations at 130 CMR 506.003(D) allow MassHealth to use the following deductions when counting MAGI countable income:

- (1) educator expenses;
- (2) reservist/performance artist/fee-based government official expenses;
- (3) health savings account;
- (4) moving expenses, for the amount and populations allowed under federal law;
- (5) one-half self-employment tax;
- (6) self-employment retirement account;
- (7) penalty on early withdrawal of savings;
- (8) alimony paid to a former spouse for individuals with alimony agreements finalized on or before December 31, 2018. Alimony payments under separation or divorce agreements finalized after December 31, 2018, or pre-existing agreements modified after December 31, 2018, are not deductible;
- (9) individual retirement account (IRA);
- (10) student loan interest;
- (11) scholarships, awards, or fellowships used solely for educational purposes; and (12) other deductions described in the Tax Cut and Jobs Act of 2017, Public Law 115-97 for as long as those deductions are in effect under federal law.

The appellant did not present evidence of meeting any of these deductions. Instead, the appellant asked MassHealth to consider deductions, such as tax deductions made to her payment for unemployment assistance, as well as everyday expenses such as a car loan, mortgage and other personal expenses. Since the expenses and deductions noted by the appellant do not fall within the allowable deductions enumerated in 130 CMR 506.003(D), they cannot be considered in determining eligibility.

The appellant's income is \$4,783.63 each month. Five percentage points of the 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)). At the time of the eligibility decision, 5 percentage points of the FPL for a household of one was \$65.25 each month. Deducting that amount from the appellant's income resulted in a MAGI of \$4,718.38. The income limit for MassHealth benefits is 133% of the FPL which is \$1,735 each month or \$20,820 each year. The appellant's income exceeds these limits. Therefore, the appellant is not eligible for MassHealth.

While the appellant wanted the agency to consider the period in which she receives the

unemployment assistance as temporary and/or determine eligibility based upon the total amount of benefits that she will receive, she failed to demonstrate that her income would decrease or end at the close of the benefit period and the exact timing of the benefit period. Additionally, the receipt of this benefit amount for 6 months, which is the period that the appellant stated that she would receive the benefit, provides the appellant with a total annual income of \$28,701 which also exceeds the annual income limit of \$20,820. Also, the appellant did note that she is under pressure to obtain employment by the Department of Unemployment Assistance. It is not clear whether future employment would increase or decrease her income and the agency cannot make decisions based upon presumptions, only actual amounts reported at the time of an eligibility decision.

The decision made by MassHealth is correct.

This appeal is denied.

## **Order for MassHealth**

Release the appellant's 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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Susan Burgess-Cox  
Hearing Officer  
Board of Hearings

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