

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Dismissed; Remanded	Appeal Number:	2507448
Decision Date:	01/20/2026	Hearing Date:	06/11/2025
Hearing Officer:	Marc Tonaszuck	Record Open to:	10/10/2025

Appearance for Appellant:

Pro se

Appearances for MassHealth:

Timothy O'Donnell, MEC; [REDACTED] RN,
BSN, Disability Evaluation Services (DES)



*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:	Dismissed; Remanded	Issue:	Community Eligibility – Under 65 - Disability
Decision Date:	01/20/2026	Hearing Date:	06/11/2025
MassHealth’s Rep.:	Timothy O’Donnell, MEC; [REDACTED] [REDACTED] RN, BSN, Disability Evaluation Services (DES)	Appellant’s Rep.:	Pro se
Hearing Location:	Tewksbury MassHealth Enrollment Center	Aid Pending:	Yes

Authority

This administrative hearing was held pursuant to G.L. c. 118E, Chapter 30A, and regulations thereunder.

Jurisdiction

Through a notice dated 04/28/2025, MassHealth notified the appellant of its determination that he is not disabled for MassHealth eligibility purposes and her MassHealth benefits would terminate on 05/12/2025 because without a disability determination, the appellant’s income exceeds the program limit for community benefits (130 CMR 505.002; Exhibit 1). The appellant filed this appeal in a timely manner on 05/12/2025 and he continues to receive benefits pending the outcome of this appeal (130 CMR 610.015; Exhibit 2). MassHealth agency actions to suspend, reduce, terminate, or restrict a member's assistance are valid grounds for appeal (see 130 CMR 610.032).

A fair hearing took place on 06/11/2025 and the parties appeared telephonically. At the fair hearing the MassHealth representative from Disability Evaluation Services (DES) testified that the appellant did not meet the disability requirements because he did not provide a complete application (disability supplement) to DES. The disability supplement was received by MassHealth on

04/25/2025; however, because it was incomplete, it was returned to the appellant with the form to complete and return it within 10 days. It was not received by MassHealth within the 10 day period, and MassHealth issued the termination notice. At that time the appellant was determined to be no longer eligible for MassHealth benefits and MassHealth informed him that his benefits would terminate on 05/12/2025. The appellant appealed and his MassHealth benefits continued pending the outcome of this appeal.

At the fair hearing, the appellant agreed to submit the DES disability supplement. The parties requested that the record remain open for the appellant to provide the completed application to DES and for DES to make a disability determination. The record remained open until 10/10/2025 (Exhibit 5).

On 07/21/2025, the DES representative informed the hearing officer and the appellant that DES received a completed disability supplement, that was approved. The appellant meets the MassHealth disability criteria. The DES representative wrote:

I am pleased to update you that this separate disability episode was opened on 6/18/25 (a complete supplement) was received and an 8 step CDR process was completed on 7/16/25. The appellant was determined disabled at step 8 of the CDR (per GRID ruling 202.02) and is clinically eligible for Title XVI benefits. I have attached both the DES Disability Determination Review form and the MassHealth Disability Determination Tracking Form for your records- this decision was transmitted electronically to MEC on 7/16/25. Next recommended DES review date 7/15/2027.

(Exhibit 6.)

The Fair Hearing regulation concerning Adjustment Procedures and Mediation is set forth at 130 CMR 610.051. 130 CMR 610.051(B) states, in relevant part, as follows:

The Division may make an adjustment in the matters at issue before or during a hearing. If the parties agree that the adjustment resolves one or more of the issues in dispute, the hearing officer, by written order, will dismiss the appeal as to all resolved issues, noting as the reason for such dismissal that the parties have reached agreement.

By virtue of a disability determination by DES, MassHealth has determined that the appellant is disabled under the MassHealth disability requirements. The MassHealth adjustment resolves the disputed issue in this case regarding the disability determination; thus, pursuant to 130 CMR 610.051(B), this portion of the appeal is dismissed. The issue of eligibility will be remanded to MassHealth.

Order for MassHealth

Release aid pending. If not already done, establish the appellant's categorical eligibility as a disabled adult; review eligibility for all MassHealth programs based on his disabled status, inform appellant of the eligibility determination and include appeal rights.

Implementation of this Decision

If this decision is not implemented within 30 days after the date of this decision, you should contact your MassHealth Enrollment Center. If you experience problems with the implementation of this decision, you should report this in writing to the Director of the Board of Hearings, MassHealth of Medical Assistance, at the address on the first page of this decision.

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.

Marc J. Tonaszuck
Hearing Officer
Board of Hearings

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