

**Office of Medicaid
BOARD OF HEARINGS**

Appellant Name and Address:



Appeal Decision:	Denied in part; Dismissed in part	Appeal Number:	2517463
Decision Date:	02/05/2026	Hearing Date:	01/12/2026
Hearing Officer:	Amy B. Kullar, Esq.		

Appearance for Appellant:

Pro se

Appearances for MassHealth:

Fabienne Jeanniton, Tewksbury,
MassHealth Enrollment Center;
Eileen Cynamon, B.S.N., R.N.,
Appeals Reviewer, Appeals &
Regulatory Compliance, 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:	Denied in part; Dismissed in part	Issue:	Disability
Decision Date:	02/05/2026	Hearing Date:	01/12/2026
MassHealth's Reps.:	Fabienne Jeanniton; Eileen Cynamon, B.S.N., R.N.	Appellant's Rep.:	<i>Pro se</i>
Hearing Location:	Tewksbury MassHealth Enrollment Center Room 2 (Virtual)	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 November 7, 2025, MassHealth notified the appellant that the appellant does not qualify for MassHealth benefits because the appellant's income is too high. See 130 CMR 506.007(B) and Exhibit 1. Through a notice dated November 19, 2025, MassHealth informed the appellant that he was not disabled because MassHealth determined that the appellant did not meet MassHealth's disability requirements. See 130 CMR 505.002(E) and Exhibit 2. The appellant filed this appeal of both notices in a timely manner on November 20, 2025. See 130 CMR 610.015(B) and Exhibit 3. Denial of assistance is valid grounds for appeal. See 130 CMR 610.032.

Action Taken by MassHealth

MassHealth notified the appellant that he does not meet MassHealth's disability requirements, and MassHealth notified the appellant he is financially ineligible for MassHealth benefits.

Issue

The appeal issue is whether MassHealth was correct, pursuant to 130 CMR 505.002(E), in determining that the appellant is not permanently and totally disabled, and that the appellant is financially ineligible for MassHealth benefits.

Summary of Evidence

The MassHealth representative appeared virtually and testified as follows: on November 7, 2025, MassHealth determined that the appellant was not eligible for MassHealth benefits.¹ The MassHealth representative testified that the appellant resides in a household of one, and he has a gross monthly income of \$6,260.27, which places him at 475.02% of the federal poverty level (“FPL”). Testimony. The gross monthly income threshold to qualify for MassHealth benefits is \$1,735.00 per month, which is equal to an FPL of 133%. The appellant appeared at the hearing virtually and verified his identity. In response to the MassHealth representative’s testimony, the appellant confirmed that MassHealth has his household composition and his monthly income correctly calculated. The appellant stated that he understands he does not financially qualify for MassHealth benefits unless he is determined to be disabled, and he does not dispute the November 7, 2025, eligibility notice.

A representative from MassHealth’s Disability Evaluation Services (“DES representative”) appeared virtually and testified as follows: DES’s role is to determine, for MassHealth, whether an applicant meets the Social Security Administration (“SSA”) standard of disability from a clinical standpoint. The DES representative testified that DES evaluates disability claims using a five-step sequential evaluation process derived from SSA regulations. See 20 CFR 416.920; 20 CFR 416.905; Exhibit 6 at 10-12. Under these regulations, disability is defined as the inability to engage in any substantial gainful activity due to a medically determinable physical or mental impairment that can be expected to result in death or that has lasted or is expected to last for a continuous period of not less than twelve months. The definition further requires that the impairment prevent the individual from performing past relevant work or any other substantial gainful work that exists in the national or regional economy.

The DES representative testified that, under 20 CFR 416.945, what an individual can still do despite an impairment is referred to as residual functional capacity (“RFC”). Unless an impairment is so severe as to preclude all substantial gainful activity, RFC is used to determine whether the individual can perform past relevant work or, in combination with age, education, and work experience, adjust to other work. Testimony; Exhibit 6 at 16-18.

¹ On October 16, 2025, the appellant filed his initial Adult Disability Supplement with MassHealth. On October 27, 2025, MassHealth received a duplicate Adult Disability Supplement from the appellant; MassHealth continued to process the initial Adult Disability Supplement, and the second episode was closed. See Exhibit 6 at 41-42.

The appellant listed his health problems as [REDACTED]. Exhibit 6 at 44. In his disability supplement, the appellant reported that he has [REDACTED] that is stable on gabapentin, [REDACTED] in both eyes with full visual fields. He reported a history of [REDACTED], and noted that these conditions result in hazard precautions and decreased visual acuity that does not meet listing-level severity. *Id.* Additionally, the RFC examination showed that the appellant's limitations are extended exposure to concentrated light with [REDACTED] and limited visual acuity. He was observed to have no limitations with respect to manipulation, exertion or communication. *Id.*

The DES representative explained that a review of the medical records was undertaken using a five-step sequential evaluation process, which addresses the following:

Step 1: Is the claimant engaging in substantial gainful activity?

Step 2: Does the claimant have a medically determinable impairment or combination of medically determinable impairments that is both severe and meets the duration requirement (impairment(s) is expected to result in death or has lasted or is expected to last for a continuous period of not less than 12 months)?

Step 3: Does the claimant have an impairment(s) that meets an adult SSA listing, or is medically equal to a listing, and meets the duration requirement?

Step 4: Does the claimant retain the capacity to perform any past relevant work?

Step 5: Does the claimant have the ability to make an adjustment to any other work, considering the claimant's residual functional capacity, age, education, and work experience?

At Step 1, which asks whether the claimant is engaging in substantial gainful activity, the appellant's review was marked "Yes" because he is currently employed. Exhibit 6 at 51. The DES representative testified that MassHealth waives Step 1 for purposes of disability determinations, and DES therefore proceeded to the remaining steps of the analysis.

At Step 2, DES determined that the appellant has medically determinable impairments that are severe and meet the duration requirement. Exhibit 6 at 51. The review then proceeded to Step 3. At Step 3, DES compared the appellant's impairments to the relevant adult SSA listings, including Listing 2.02 (Loss of Central Visual Acuity), Listing 2.03 (Contraction of the Visual Field in the Better Eye), and Listing 12.04 (Depressive, Bipolar and Related Disorders). The DES representative testified that the appellant's impairments did not meet or medically equal any listed impairment. *Id.*

The DES representative testified that DES then assessed the appellant's residual functional capacity for purposes of Steps 4 and 5. On November 19, 2025, a physical RFC assessment was completed by

██████████. That assessment indicated that the appellant has no exertional, manipulative, or communicative limitations and retains the ability to balance, climb stairs and ramps, kneel, stoop, crouch, and crawl. The RFC included environmental limitations related to exposure to hazards such as machinery and heights due to the appellant's limited vision. Exhibit 6 at 56–58.

At Step 4, which asks whether the claimant retains the capacity to perform past relevant work, DES determined that the appellant is capable of performing his past work as a ██████████. The DES representative testified that the appellant is English-speaking, possesses a bachelor's degree, and is currently employed as a ██████████. Testimony; Exhibit 6 at 46–47, 50. Although the Dictionary of Occupational Titles classifies ██████████ ██████████ as medium, semi-skilled work, DES considered the appellant's description of his work as heavy and evaluated that work in light of his RFC. DES concluded that the appellant's past relevant work falls within his residual functional capacity, and found the appellant not disabled at Step 4 using decision Code 230. Exhibit 6 at 50.

The DES representative further testified that, in the alternative, DES considered Step 5 of the sequential evaluation. At Step 5, DES determined that, based on the appellant's, age, education, and work experience, there are other jobs existing in significant numbers in the regional economy that the appellant could perform. These jobs include dining room and cafeteria attendants and bartender helpers, other production workers, and hand packers and packagers (light duty). Based on this alternative analysis, DES again concluded that the appellant is not disabled.

The DES representative testified that the appellant's diagnoses of ██████████ ██████████ do not meet or equal the SSA listing-level severity required for a finding of disability. The DES representative further testified that the appellant's residual functional capacity permits him to perform both his past work and other work available in the regional economy. Accordingly, DES concluded that the appellant was correctly found to be "Not Disabled." Testimony.

The appellant responded to the DES representative's testimony. The appellant first addressed his ability to work. He stated, "I kind of get what you're saying with the work capacity, I mean, but there's always some type of work for someone whether they're disabled or not." Testimony. His vision impairment makes it difficult for him to find a skilled position. Even "lower-skilled" jobs, such as fast food cashier and retail worker, require fine vision for reading and using screens. Testimony. The appellant is unable to find employment that will accommodate his visual impairment, and despite earning a bachelor's degree, he is limited to the types of professions that he can successfully perform. The appellant is currently working as a ██████████. The appellant emphasized that in his experience, employers do not readily offer accommodations to disabled individuals, that he believes that he is a victim of employer bias against visually impaired people, and that this continues to negatively affect his prospects for current and future employment. Testimony.

The appellant is also confused by the fact that he had previously received Social Security payments due to his disability, but MassHealth has seemingly never recognized this fact. The DES representative explained that the likely reason why the appellant has never been seen by DES in

the past is because MassHealth had enough information about his disability from the Social Security Administration. A case will not be referred to DES if the member is receiving Social Security benefit payments due to their disability. Testimony. The DES representative then confirmed that this is the first complete disability review episode that DES has undertaken for the appellant. She does not know why the appellant never had to submit an adult Disability Supplement to DES before. Testimony. The Hearing Officer then asked whether the appellant possesses a Certificate of Blindness from the Massachusetts Commission for the Blind; the appellant was previously issued a Certificate of Blindness, but after a successful surgery a few years ago, his vision improved to the point where he no longer qualified for a Certificate of Blindness. Testimony. The DES representative emphasized that the appellant could re-evaluated for his disability at any time in the future if the appellant's condition continues to worsen. Testimony.

Findings of Fact

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

1. Through a notice dated November 7, 2025, MassHealth informed the appellant that he was not financially eligible for MassHealth benefits. Exhibit 1.
2. Through a notice dated November 19, 2025, MassHealth informed the appellant that he did not satisfy the necessary requirements to qualify as disabled. Exhibit 2.
3. The appellant filed a timely appeal of both notices on November 20, 2025. Exhibit 3.
4. The appellant is an adult between the ages of 18 and 64, resides in a household of one, and reports a gross monthly income of \$6,260.27, which equates to 475.02% of the federal poverty level. Testimony of MassHealth Representative.
5. Disability Evaluation Services determined that the appellant has medically determinable impairments that are severe and have lasted or are expected to last for a continuous period of not less than twelve months. Testimony of DES Representative.
6. Disability Evaluation Services determined that the appellant's impairments do not meet or medically equal any impairment listed in the Social Security Administration's Listing of Impairments, including Listings 2.02, 2.03, and 12.04. Testimony of DES Representative.
7. The appellant is currently employed as a [REDACTED] and is capable of consistent employment despite his medical impairments. Testimony; Exhibit 6.
8. The appellant retains the capacity to perform his past and present work as a [REDACTED] and is capable of performing work activities consistent with his residual functional capacity. Testimony; Exhibit 6.

9. On November 19, 2025, Disability Evaluation Services completed a physical residual functional capacity assessment determining that the appellant has no exertional limitations, but is subject to environmental limitations related to visual hazards. Testimony; Exhibit 6.
10. Based on the appellant's residual functional capacity, education, and work history, Disability Evaluation Services determined that the appellant retains the capacity to perform his past relevant work as a [REDACTED] Testimony; Exhibit 6.
11. In the alternative, Disability Evaluation Services determined that there are other jobs existing in significant numbers in the regional economy that the appellant is capable of performing. Testimony; Exhibit 6.
12. Disability Evaluation Services concluded that the appellant does not meet the Social Security Administration standard of disability, and MassHealth relied on that determination in finding the appellant ineligible for MassHealth benefits. Testimony.
13. At hearing, the appellant agreed with MassHealth's determination that he does not financially qualify for MassHealth benefits unless he is determined to be disabled, and he did not dispute the November 7, 2025 eligibility notice. Testimony.

Analysis and Conclusions of Law

In order to be found disabled for MassHealth Standard benefits, an individual adult must be "*permanently and totally disabled.*" *See*, 130 CMR 501.001. The guidelines used in establishing disability under the MassHealth program are very similar to those used by the Social Security Administration. *See id.* Individuals who meet the SSA's definition of disability may establish eligibility for MassHealth Standard according to 130 CMR 505.002(E) or CommonHealth according to 130 CMR 505.004. In Title XVI, Section 416.405 of the Social Security Act, the Social Security Administration defines disability as "the inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months."

The federal Social Security Act establishes the eligibility standards and the 5-step sequential evaluation process used by MassHealth in determining initial eligibility, as well as the related 8-step evaluation tool used to conduct the Continuing Disability Review reevaluations, periodically required by federal law, for those who have already previously been found disabled at some point under the 5-step test. *See* 20 CFR 416.994. If a determination of disability can be made at any step of either process, the specific evaluation process stops at that point.

The 5-Step Method for Initial Disability Evaluation

The 5-step method is the sequential evaluation process established by the Social Security Act and described in 20 CFR 404.1520 for the purpose of determining initial eligibility for Medicaid benefits

such as MassHealth:

At Step 1, it is determined whether the disability applicant is currently engaged in substantial gainful activity? If an applicant is engaged in such work with such income, the applicant may be found to be not disabled. Otherwise, the process continues to Step 2 (This step is waived in an applicant's favor during a MassHealth disability review and MassHealth thus essentially begins its review at Step 2).

At Step 2, a decision is made as to whether applicants' impairment is severe and expected to last for at least 12 months. If so, the applicant's disability application continues and proceeds to Step 3. If not, the review ends and the applicant is found "not disabled."

At Step 3, it is asked whether the impairment(s) meets or equals a criteria listing utilized by the SSA. If the impairment(s) meets or equals a listing, the review ends and the applicant is found disabled. If no listings are met, the review proceeds to Step 4.

At Step 4, a determination is made as to the applicant's mental and physical residual functional capacity ("RFC"), and whether the applicant can perform some prior work based on his or her capacity. If the applicant can perform his or her prior work, the review ends and appellant is found to be "not disabled." Otherwise, the review proceeds to the final step at Step 5.

At the final step at Step 5, it is asked whether the applicant can perform any other work that is available in sufficient quantities in the national economy. If so, the applicant is found to be "not disabled." If the applicant is not found able to do other work, the applicant will be determined to be a "disabled" adult.

In the present case, DES correctly determined that the appellant did not qualify as disabled. There is no dispute that the appellant's condition is severe and expected to last 12 months or more to meet Step 2. DES determined, however, that the extent of his condition, as indicated in the appellant's medical records and supporting documentation, did not qualify to meet a listing among those most closely matching his impairment or matching the findings related to his impairment. DES considered 2.02 – Loss of Central Visual Activity, 2.03 – Contraction of the Visual Field in the Better Eye, and 12.04 – Depressive, Bipolar and Related Disorders pursuant to Step 3. The medical records supplied by the appellant's own treating physicians noted ongoing treatment for several of the medical challenges that the appellant has experienced, but there is nothing in the medical record to support that the appellant's condition meets or equals a listing utilized by the SSA.

Because no listings were met, DES proceeded to Step 4. At Step 4, DES correctly found that the appellant could perform several types of work. The appellant's own submissions, medical records, and testimony reveal that he is stable in seeking his ongoing treatments, that he is medication-compliant in his treatment, and that he currently engages in full-time employment as a [REDACTED] since [REDACTED]. The appellant is English-communicating and literate, and he has completed a bachelor's degree. Additionally, an RFC examination indicated that the appellant's limitations are extended exposure to concentrated light with [REDACTED] and limited visual acuity. He was observed

to have no limitations with respect to manipulation, exertion or communication. Considering the RFC results, DES correctly found that the appellant was able to perform his current employment as a [REDACTED]. The reviewer took into consideration that custodial jobs may not be the best choice for the appellant and continued to Step 5.

At Step 5, DES correctly found that there is other work available in the regional Massachusetts economy that the appellant would be able to perform. The appellant's own submissions, medical records, and testimony reveal that due to his RFC, age, education and experience, he would be capable of other employment. DES quotes jobs from the Occupational Employment Quarterly ("OEQ") that are available to the appellant, which include dining room, cafeteria attendants and bartender helpers, other production workers, and hand packers and hand packagers (light duty). Accordingly, the review concluded at Step 5 and DES found that the appellant was "not disabled." This decision was correct.

Although the appellant raised legitimate concerns about his conditions, including his ability to continue to perform certain tasks associated with his profession, his testimony, alone, is insufficient to warrant reversal of DES's decision. Furthermore, the testimony supported the fact that the appellant can continue to safely engage in his current employment. In consideration of the record as a whole, including the testimony, medical records, and supporting documentation, I find that the appellant has not established that he is permanently and totally disabled from performing all employment.

Therefore, as to the portion of the MassHealth determination that the appellant is not permanently and totally disabled, this appeal is hereby DENIED.

The appellant also appealed MassHealth's notice dated November 7, 2025, which informed the appellant that he did not financially qualify for MassHealth benefits. At hearing, the appellant confirmed that MassHealth had his income and household composition correctly calculated, which was a gross monthly income of \$6,260.27, or 475.02% of the federal poverty level for a household of one. The appellant agreed with MassHealth's determination of his financial eligibility for MassHealth benefits, and he stated that he did not dispute his November 7, 2025 MassHealth eligibility determination.

Therefore, as to the portion of the MassHealth determination that the appellant is not financially eligible for MassHealth benefits, this appeal is hereby DISMISSED.

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.

Amy B. Kullar, Esq.
Hearing Officer
Board of Hearings

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

cc: DES representative, U.Mass. Chan Medical School