

**COMMONWEALTH OF MASSACHUSETTS
DIVISION OF ADMINISTRATIVE LAW APPEALS**

Alan Predella,
Petitioner,

Docket No.: CR-21-0276

v.

Braintree Retirement Board,
Respondent.

ORDER

The Respondent, the Braintree Retirement Board, has filed an unopposed motion for reconsideration and clarification. As explained in greater detail below, the request for reconsideration is denied. The request for clarification is allowed.

This is an accidental disability retirement case. The Petitioner, a retired firefighter, applied for accidental disability retirement on the basis of hypertension, anxiety, and post-traumatic stress disorder (PTSD). The Board did not act on his application as to his claims of disabling anxiety and PTSD. It denied his application as to hypertension.

In my decision dated May 8, 2026, I determined that the Petitioner had established that he experiences disabling elevations in blood pressure as a result of his anxiety over his work environment. Although a majority of the regional medical panel, all cardiologists, opined that the Petitioner is permanently disabled as a result of hypertension, I concluded that their opinions do not suffice to establish the Petitioner's hypertension will permanently result in incapacitating symptoms because these opinions do not explain why the emotional and psychological factors that drive the Petitioner's hypertension to the point of incapacity are themselves likely to be permanent. I ordered that this matter be remanded to the Board with

instructions that the Petitioner be examined by a panel that includes at least one psychiatrist and one cardiologist.

The Board asks me to reconsider my decision on the ground that it may be based on an unwarranted reliance on the opinion of the minority medical panelist, Dr. Edward Hoffer. I decline to do so. In my analysis, I mention Dr. Hoffer's opinion to point out that even though he declined to certify that the Petitioner was disabled on the basis of *hypertension* (the theory of disability on which they panelists were asked to opine), the substance of his narrative suggests that he agrees with (or at least does not disagree with) the majority panelists' conclusion that the Petitioner suffers from disabling symptoms. His disagreement concerns the etiology of the symptoms, not whether they are incapacitating. In any case, the fact remains that the other two panelists rendered cogent reasons for concluding that the Petitioner suffers from disabling symptoms.

The Board also asks me to reconsider the portion of my decision ordering a remand for a medical panel review that includes at least one psychiatrist. The Board asks instead that any remand be to a panel composed entirely of cardiologists. I decline to reconsider that portion of my decision. I concluded that the Petitioner has disabling hypertension fueled by his psychological and emotional reactions to his work environment. Whether those reactions should be categorized as anxiety, PTSD, or some other condition is not entirely consequential for present purposes. What matters is that whether these reactions are likely to be permanent appears to require the medical expertise of a psychiatrist.

Turning to the request for clarification, the Board seeks clarity as to whether the remand "[1] is to solely address Mr. Predella's hypertension, and the impact his anxiety or PTSD had on

it, or [2] whether the remand is ordering the Board to convene a second medical panel specializing in psychiatric medicine to evaluate Mr. Predella's anxiety/PTSD claim, separate and distinct from his hypertension claim." The decision orders the *first* of the two alternatives framed by the Board.

SO ORDERED.

DIVISION OF ADMINISTRATIVE LAW APPEALS

Timothy M. Pomarole

Timothy M. Pomarole
Administrative Magistrate

Date: September 18, 2026