

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF: [REDACTED],  
Claimant

Reg. No: 2007-05014  
Issue No: 2009; 4031  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
October 22, 2007  
Wayne County DHS

ADMINISTRATIVE LAW JUDGE: Rhonda P. Craig

HEARING DECISION

The hearing in this matter was conducted by Administrative Law Judge Jacqueline Hall-Keith on October 22, 2007, pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. Judge Jacqueline Hall-Keith left State employment before the Hearing Decision was written. The undersigned Administrative Law Judge has written this hearing decision after review of all evidence in the record. The record closed on July 10, 2008.

ISSUE

Is claimant disabled for the purposes of the Medical Assistance and State Disability Assistance programs?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

(1) Claimant applied for Medical Assistance and State Disability Assistance benefits on July 28, 2006. Claimant requested retroactive Medical Assistance to April 2006.

(2) Claimant's impairments have been medically diagnosed as Multiple Sclerosis, paranoid schizophrenia, seizures, a history of ischemia and history of substance abuse (in remission 15 months).

(3) Claimant's physical symptom is tremors.

(4) Claimant has the following emotional limitations: poor memory, poor concentration, episodes of confusion, episodes of nervousness, guilt feelings, paranoia, and auditory and visual hallucinations.

(5) Claimant's impairments will last or have lasted for a continuous period of not less than 12 months.

(6) Claimant is 29 years of age.

(7) Claimant has a high school education.

(8) Claimant has employment experience as a truck driver and security guard. Claimant is currently working as a child care provider making [REDACTED] every two weeks.

(9) Claimant has significant limitations on physical activities involving sitting, standing, walking, bending, lifting, and stooping.

(10) The department found that claimant was not disabled and denied claimant's application on September 6, 2006.

(11) New medical evidence (marked new in the file) was received and entered after the hearing. It was submitted to the State Hearing Review Team for reconsideration. The State Hearing Review Team again determined that claimant was not disabled for the programs.

#### CONCLUSIONS OF LAW

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department

of Human Services (DHS or department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105; MSA 16.490(15). Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Services (DHS or department) administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The Department of Human Services conforms to state statute in administering the State Disability Assistance program.

2000 PA 294, Sec. 604, of the statute states:

Sec. 604. (1) The department shall operate a state disability assistance program. Except as provided in subsection (3), persons eligible for this program shall include needy citizens of the United States or aliens exempted from the supplemental security income citizenship requirement who are at least 18 years of age or emancipated minors meeting one or more of the following requirements:

- (a) A recipient of supplemental security income, social security, or medical assistance due to disability or 65 years of age or older.
- (b) A person with a physical or mental impairment which meets federal supplemental security income disability standards, except that the minimum duration of the disability shall be 90 days. Substance abuse alone is not defined as a basis for eligibility.

Pursuant to Federal Rule 42 CFR 435.540, the Department of Human Services uses the federal Supplemental Security Income (SSI) policy in determining eligibility for disability under the Medical Assistance program. Under SSI, disability is defined as:

...the inability to do 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.... 20 CFR 416.905

A set order is used to determine disability. Current work activity, severity of impairments, residual functional capacity, past work, age, or education and work experience is reviewed. If there is a finding that an individual is disabled or not disabled at any point in the review, there will be no further evaluation. 20 CFR 416.920.

Medical evidence may contain medical opinions. Medical opinions are statements from physicians and psychologists or other acceptable medical sources that reflect judgments about the nature and severity of the impairment(s), including your symptoms, diagnosis and prognosis, what an individual can do despite impairment(s), and the physical or mental restrictions. 20 CFR 416.927(a)(2).

All of the evidence relevant to the claim, including medical opinions, is reviewed and findings are made. 20 CFR 416.927(c).

For mental disorders, severity is assessed in terms of the functional limitations imposed by the impairment. Functional limitations are assessed using the criteria in paragraph (B) of the listings for mental disorders (descriptions of restrictions of activities of daily living, social functioning; concentration, persistence, or pace; and ability to tolerate increased mental demands associated with competitive work).... 20 CFR, Part 404, Subpart P, App. 1, 12.00(C).

The Administrative Law Judge is responsible for making the determination or decision about whether the statutory definition of disability is met. The Administrative Law Judge reviews all medical findings and other evidence that support a medical source's statement of disability.... 20 CFR 416.927(e).

If an individual has an impairment(s) which meets the durational requirement and is listed in Appendix 1 or is equal to a listed impairment(s), he or she is found disabled without considering age, education and work experience. 20 CFR 416.920(d).

In the present case, this Administrative Law Judge does find disability based solely on the medical evidence. In addition to claimant's multiple sclerosis, seizures and history of ischemia claimant has been diagnosed with paranoid schizophrenia. Although claimant admits to a history of substance abuse, claimant testified that it is in remission, and it does not appear to materially affect his diagnosis. Claimant has suffered from a psychiatric disorder since [REDACTED] and has had multiple psychiatric hospitalizations according to a physician's report dated [REDACTED]. In that report, the physician indicated that claimant had frequent verbal confrontations with others. He has delusional beliefs and constricted affect. He has poor insight, sad mood, poor sleep, and poor memory and concentration. It should be noted that claimant was hospitalized in [REDACTED] due to an assault, which resulted in a closed head injury. He was again hospitalized in [REDACTED] for neurological symptoms. Claimant has a number of symptoms as a result of his psychiatric problems as defined above. In a report dated [REDACTED], the physician diagnosed claimant with a psychosis. The physician indicated that claimant's affect was constricted. He had non-command derogatory, auditory hallucinations and paranoid delusions. He had poor memory and poor concentration. He had poor insight. The physician noted that claimant's prognosis was guarded. The physician further noted that claimant had been compliant with his medication. A medical examination performed on [REDACTED] indicated that claimant had a Global Assessment of Functioning Score of 48. His exams taken in [REDACTED] and [REDACTED] indicate a Global Assessment of Functioning Score of 45. It appears that there may be a level of decompensation. A Global Assessment of Functioning

Score of 45 indicates serious symptoms or serious impairment in either social, occupational or school functioning. Claimant's impairment does meet or is the medical equivalent of a listed impairment set forth in Appendix I, Section 12.03. 20 CFR 416.926. Claimant is therefore disabled for the purposes of the Medical Assistance and State Disability Assistance programs.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the claimant is medically disabled under the Medical Assistance and State Disability Assistance programs as of April 1, 2006. Therefore, the department is ORDERED to initiate a review of the application of July 28, 2006, if not done previously, to determine claimant's non-medical eligibility. The department shall inform the claimant of the determination in writing. The case shall be reviewed in February 2010.

/s/ \_\_\_\_\_  
Rhonda P. Craig  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: 4/30/09 \_\_\_\_\_

Date Mailed: 4/30/09 \_\_\_\_\_

**NOTICE:** Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

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