

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: 2007-19720
Issue No: 2009
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
October 23, 2007
Huron County DHS

ADMINISTRATIVE LAW JUDGE: Janice Spodarek

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on October 23, 2007. Claimant was represented by [REDACTED]

ISSUE

Did the Department of Human Services (DHS) properly deny claimant's Medical Assistance (MA-P) application?

FINDINGS OF FACT

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

(1) On 4/11/07, claimant applied for MA-P with the Michigan DHS. Claimant's representative indicated on April 10, 2007 that claimant was receiving FIP-related caretaker relative Medicaid but was requesting a transfer of the category to Medicaid based on disability.

(2) Claimant did not apply for retro MA.

(3) On 4/19/07, the MRT denied.

(4) On 5/4/07, the DHS issued notice.

(5) On 6/22/07, claimant filed a hearing request.

(6) Claimant has an SSI application pending with the Social Security Administration (SSA).

(7) On 9/27/07 the State Hearing Review Team (SHRT) denied claimant. Pursuant to claimant's request to hold the record open for the submission of new and additional medical documentation, on 4/4/08 SHRT once again denied claimant.

(8) As of the date of application, claimant was a 48-year-old female standing 5' 3" tall and weighing between 230 to 255 pounds based upon claimant's testimony. Claimant's BMI Index is 43, classifying claimant as morbidly obese. Claimant has a high school education.

(9) Claimant does not have an alcohol/drug abuse problem or history. Claimant does not smoke.

(10) Claimant has a driver's license and can drive a motor vehicle.

(11) Claimant is not currently working. Claimant last worked in 2004 as a clerk. Claimant lists her work history on Exhibit 6 as working in a bakery as a fryer, clerk stocker in a gas station party store, and working in various establishments as a clerk ([REDACTED] party store, [REDACTED]).

(12) At application, claimant alleged disability on the basis of low back pain, knee pain, left hip. See Exhibit 11. Claimant's medical evidence included evidence of a mental impairment.

(13) The 9/27/07 SHRT findings and conclusions of its decision are adopted and incorporated by reference to the following extent:

Medical Summary: Medical exam report and physical therapy report of 3/21/07 indicates claimant walked in a guarded pattern. Range of motion reduced. Strength was 5/4 throughout. Hip, lumbar spine, and knee x-rays were all reported as normal. MRI was negative for radiculopathy. Weight was given as 235 pounds. Exhibits 215-218. 1/15/07 office note reports claimant to have symmetric range of motion of her hips. Some moderate tenderness and weakness. X-rays reportedly showed minimal degenerative changes. Exhibit 73. MRI of 1/16/07 reports minimal degenerative disc disease. Exhibit 81. Psychological eval of 9/06 indicates claimant experienced post-traumatic stress disorder from a rape she experienced when she was young. On mental status, she was oriented with normal thought content and appropriate appearance. Motor activity indicated that she was calm. Her affect was appropriate.

Analysis: Claimant should be capable of work that does not require heavy lifting or constant stooping and crouching. Mental condition should not pose a significant limitation. Retains capacity to perform a wide range of medium work. Can perform past relevant work.

(14) The 4/7/08 subsequent SHRT decision is adopted and incorporated to the following extent:

Newly submitted evidence and exhibits: Outpatient mental health treatment notes and medication reviews from 5/05 to 6/07 submitted and indicate treatment for major depression with a history of alcohol abuse. Mental status examinations were normal.

(15) A Mental Residual Functional Capacity Assessment completed 7/10/07 indicates many categories where there was no limitation or not significantly limited. Claimant was evaluated as moderately/markedly limited under detailed or complex instructions and working around others.

(16) Claimant testified at the administrative hearing that she can engage in food preparation, and does not need any assistance with her bathroom and grooming needs.

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. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

Relevant federal guidelines provide in pertinent part:

"Disability" is:

...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.

The federal regulations require that several considerations be analyzed in sequential order:

...We follow a set order to determine whether you are disabled. We review any current work activity, the severity of your impairment(s), your residual functional capacity, your past work, and your age, education and work experience. If we can find that you are disabled or not disabled at any point in the review, we do not review your claim further.... 20 CFR 416.920.

The regulations require that if disability can be ruled out at any step, analysis of the next step is not required. These steps are:

1. If you are working and the work you are doing is substantial gainful activity, we will find that you are not disabled regardless of your medical condition or your age, education, and work experience. 20 CFR 416.920(b). If no, the analysis continues to Step 2.
2. Does the client have a severe impairment that has lasted or is expected to last 12 months or more or result in death? If no, the client is ineligible for MA. If yes, the analysis continues to Step 3. 20 CFR 416.909(c).
3. Does the impairment appear on a special Listing of Impairments or are the client's symptoms, signs, and laboratory findings at least equivalent in severity to the set of medical findings specified for the listed impairment that meets the duration requirement? If no, the analysis continues to Step 4. If yes, MA is approved. 20 CFR 416.920(d).

4. Can the client do the former work that he/she performed within the last 15 years? If yes, the client is ineligible for MA. If no, the analysis continues to Step 5. Sections 200.00-204.00(f)?
5. Does the client have the Residual Functional Capacity (RFC) to perform other work according to the guidelines set forth at 20 CFR 404, Subpart P, Appendix 2, Sections 200.00-204.00? This step considers the residual functional capacity, age, education, and past work experience to see if the client can do other work. If yes, the analysis ends and the client is ineligible for MA. If no, MA is approved. 20 CFR 416.920(g).

At application claimant has the burden of proof pursuant to:

...You must provide medical evidence showing that you have an impairment(s) and how severe it is during the time you say that you are disabled. 20 CFR 416.912(c).

Federal regulations are very specific regarding the type of medical evidence required by claimant to establish statutory disability. The regulations essentially require laboratory or clinical medical reports that corroborate claimant's claims or claimant's physicians' statements regarding disability. These regulations state in part:

...Medical reports should include --

- (1) Medical history.
- (2) Clinical findings (such as the results of physical or mental status examinations);
- (3) Laboratory findings (such as sure, X-rays);
- (4) Diagnosis (statement of disease or injury based on its signs and symptoms).... 20 CFR 416.913(b).

...Statements about your pain or other symptoms will not alone establish that you are disabled; there must be medical signs and laboratory findings which show that you have a medical impairment.... 20 CFR 416.929(a).

...The medical evidence...must be complete and detailed enough to allow us to make a determination about whether you are disabled or blind. 20 CFR 416.913(d).

Medical findings consist of symptoms, signs, and laboratory findings:

- (a) **Symptoms** are your own description of your physical or mental impairment. Your statements alone are not enough to establish that there is a physical or mental impairment.
- (b) **Signs** are anatomical, physiological, or psychological abnormalities which can be observed, apart from your statements (symptoms). Signs must be shown by medically acceptable clinical diagnostic techniques. Psychiatric signs are medically demonstrable phenomena which indicate specific psychological abnormalities e.g., abnormalities of behavior, mood, thought, memory, orientation, development, or perception. They must also be shown by observable facts that can be medically described and evaluated.
- (c) **Laboratory findings** are anatomical, physiological, or psychological phenomena which can be shown by the use of a medically acceptable laboratory diagnostic techniques. Some of these diagnostic techniques include chemical tests, electrophysiological studies (electrocardiogram, electroencephalogram, etc.), roentgenological studies (X-rays), and psychological tests. 20 CFR 416.928.

It must allow us to determine --

- (1) The nature and limiting effects of your impairment(s) for any period in question;
- (2) The probable duration of your impairment; and
- (3) Your residual functional capacity to do work-related physical and mental activities. 20 CFR 416.913(d).

Information from other sources may also help us to understand how your impairment(s) affects your ability to work. 20 CFR 416.913(e).

...You can only be found disabled if you are unable 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. See 20 CFR 416.905. Your impairment must result from anatomical, physiological, or psychological abnormalities which are demonstrable by medically acceptable clinical and laboratory diagnostic techniques.... 20 CFR 416.927(a)(1).

It is noted that Congress removed obesity from the Listing of Impairments shortly after the removal of drug addiction and alcoholism. This removal reflects the view that there is a strong

behavioral component to obesity. Thus, obesity in-and-of itself is not sufficient to show statutory disability.

Applying the sequential analysis herein, claimant is not ineligible at the first step as claimant is not currently working. 20 CFR 416.920(b). The analysis continues.

The second step of the analysis looks at a two-fold assessment of duration and severity. 20 CFR 416.920(c). This second step is a *de minimus* standard. Ruling any ambiguities in claimant's favor, this Administrative Law Judge (ALJ) finds that claimant meets both. The analysis continues.

The third step of the analysis looks at whether an individual meets or equals one of the Listings of Impairments. 20 CFR 416.920(d). Claimant does not. The analysis continues.

The fourth step of the analysis looks at the ability of the applicant to return to past relevant work. This step examines the physical and mental demands of the work done by claimant in the past. 20 CFR 416.920(f).

In this case, this Administrative Law Judge concurs with the SHRT decision and finds that claimant does not meet statutory disability on the basis of Step 4 of the analysis--claimant is capable of returning to past relevant work.

In reaching this conclusion, it is noted that claimant's medical evidence must meet the sufficiency requirements found at 20 CFR 416.913(b), .913(d), and .913(e). The overall medical evidence in this case does not meet the sufficiency requirements. Moreover, claimant's complaints regarding pain do not meet the statutory requirements found at 20 CFR 416.929(a), .929(c)(12), and .945(e). The law puts the burden of proof on the applicant pursuant to 20 CFR 416.912(c). Claimant's medical evidence, taken as a whole, does not meet the statutory disability requirements under federal law and thus, the department's denial is upheld.

As noted in the Findings of Fact, at application claimant was a recipient of Medicaid. This Decision and Order in no way affects claimant's eligibility at that time or any ongoing eligibility she may have for the caretaker-relative MA category.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department's actions were correct.

Accordingly, the department's determination in this matter is UPHELD.

/s/

Janice Spodarek
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: July 7, 2009

Date Mailed: July 8, 2009

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 mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the mailing date of the rehearing decision.

JS/cv

cc:

