

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.: 2008-17968
Issue No.: 2009
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date:
September 8, 2009
Oakland County DHS (04)

ADMINISTRATIVE LAW JUDGE: Jonathan W. Owens

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, an in-person hearing was held on September 8, 2008. Claimant appeared and testified.

ISSUE

Whether the Department of Human Services (Department) properly determined that the Claimant is not "disabled" for purposes of the Medical Assistance (MA-P) program?

FINDINGS OF FACT

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

1. On January 4, 2008, Claimant applied for MA-P.
2. On March 5, 2008, the Department denied Claimant's application.
3. On April 10, 2008, Claimant filed a request for hearing to protest the Department's denial of benefits.

4. Claimant is 23 years old.
5. Claimant has a high-school education.
6. Claimant was performing more than substantial gainful activity (SGA) until May 20, 2008. She continued to be capable of SGA but was unable able to get additional hours from her employer. After July, she was unable to work more hours due to her condition.
7. On December 15, 2008, the State Hearing and Review Team (SHRT) approved MA-P retroactive to July 1, 2008, stating Claimant's condition achieved a listing level and indicated a medical review date of January 1, 2011.
8. Claimant suffers from chronic kidney disease.

CONCLUSIONS OF LAW

The Medical Assistance (MA-P) 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 (formerly known as the Family Independence Agency) administers the MA-P 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).

In order to receive MA benefits based upon disability or blindness, claimant must be disabled or blind as defined in Title XVI of the Social Security Act (20R 416.901). The Department, being authorized to make such disability determinations, utilizes the Social Security Income (SSI) definition of disability when making medical decisions on MA-P applications. MA-P is also known as Medicaid, which is a program designated to help public assistance claimants pay their medical expenses.

The law defines disability as the inability to perform substantial gainful activity (SGA) 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).

Because disability must be determined on the basis of medical evidence, Federal regulations have delineated a set order entailing a step sequential process for evaluating physical or mental impairments. When a claimant is found either disabled or not disabled at any point in the process, the claimant is not considered further.

Addressing the following steps:

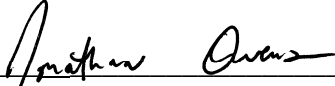
The first sequential step to be considered is whether the Claimant can perform SGA defined in 20 CFR 416.920(b). In this case, Claimant was performing over SGA until May 2008 and, per her testimony, she could have worked more if she was given additional hours by her employer. Therefore, Claimant was capable of SGA until July 2008. As indicated above, Claimant has been approved for MA-P based upon a listing beginning July 2008. Prior to this date, the Claimant was capable of SGA.

It is the finding of the undersigned, based upon the evidence presented, that Claimant is not “disabled” at the first step. Claimant was capable of SGA until July 2008.

DECISION AND ORDER

The Administrative Law Judge, based on the findings of fact and conclusions of law, decides that the Claimant is not “disabled” for purposes of the Medical Assistance until July 2008.

It is ORDERED; the Department's determination in this matter is AFFIRMED. The Department shall activate coverage per the SHRT approval beginning July 2008 and place a medical review date of January 2011.


Jonathan W. Owens
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: March 29, 2010

Date Mailed: April 1, 2010

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 receipt date of the rehearing decision.

JWO/pf

cc:

