

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: 2008-20353
Issue No: 2009/4031
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
August 27, 2008
Emmet County DHS

ADMINISTRATIVE LAW JUDGE: Marlene B. Magyar

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 August 27, 2008. Claimant personally appeared and testified.

ISSUE

Did the department properly determine claimant is not disabled by Medicaid (MA) and State Disability Assistance (SDA) eligibility standards?

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 is a single, 47-year-old former heavy smoker (quit 3/08) with a high school education who lives with his dog in his own home in [REDACTED]; he has a valid driver's license and access to a roadworthy vehicle.

(2) Claimant stands approximately 5'6" tall and is medically obese at approximately 220 pounds (BMI=35.5); he is right hand dominant.

(3) Claimant worked as an inspector of automotive parts for approximately 14 years until he was fired in December, 2005; he has remained unemployed since then.

(4) Claimant was hospitalized via ambulance for two days in March, 2008 (3/22/08-3/24/08) because he suffered an acute ST segment elevation myocardial infarction (Department Exhibit #1, pgs 122-137).

(5) Intake information at that time noted a past history of sciatica with medications used occasionally for pain (Department Exhibit #1, pg 137).

(6) Standard cardiac testing revealed claimant's right coronary artery had a 60% occlusion proximally followed by a 100% occlusion after a small, RV marginal branch.

(7) Claimant underwent successful percutaneous stenting which reduced these blockages to 0% and he was discharged home in stable condition.

(8) On March 24, 2008, claimant applied for disability-based MA/SDA.

(9) If approved, the medical expenses associated with claimant's cardiac hospitalization and treatment would have been covered by MA.

(10) When the department denied claimant's disability application he filed a hearing request dated May 9, 2008.

(11) Claimant's medical history is positive for a C5-6 anterior cervical discectomy and fusion (ACDF) with internal fixation in 2002 (Department Exhibit #1, pg 107).

(12) Claimant's three week follow-up notes dated July 19, 2008 indicate 5/5 upper extremity strength bilaterally; residual right upper extremity pain and left arm dysesthesias were noted to respond well to claimant's prescription steroids (Department Exhibit #1, pg 107).

(13) Claimant's August 30, 2002 follow-up notes indicated he would be medically restricted to light duty for another month and then be returned to full duty without restrictions at the three month mark (Department Exhibit #1, pgs 105 and 106)(See also Finding of Fact #3 above).

(14) In January, 2006, claimant underwent an updated cervical spine MRI scan (Department Exhibit #1, pgs 120 and 121).

(15) These results note claimant's fusion was stable with no significant changes from his earlier study; mild stenosis at C3-4 and C6-7 was noted secondary to degenerative changes (arthritis) and bulging discs (Department Exhibit #1, pg 120).

(16) In March, 2003, claimant underwent bilateral L4-5 medial facetectomies and excision of a herniated nucleus pulposus at L5-S1 (Department Exhibit #1, pgs 102 and 103).

(17) Claimant's May 5, 2003 follow-up notes indicate he returned to light duty work three weeks earlier and was engaged in an active therapy program; on that date, claimant was given a release to return to full and normal activities (Department Exhibit #1, pg 100).

(18) An April, 2003 EMG report confirmed mild, borderline bilateral carpal tunnel syndrome; wrist splints were suggested for night wear on an as needed basis (Department Exhibit #1, pg 92).

(19) A June 18, 2004 clinical report regarding claimant's residual functional capacity post cervical/lumbar surgeries recommended any repetitive bending, twisting, pushing, pulling or lifting over 20 pounds should be avoided but indicated he was capable of being an inspector (Department Exhibit #1, pg 12)(See also Finding of Fact #3 above).

(20) Claimant stated at his disability hearing on August 27, 2008, he has been using prescription analgesics () and muscle relaxants () for lumbar/cervical pain management.

(21) Claimant also has taken the typically prescribed cardiac medications since his March, 2008 heart attack, specifically for high blood pressure and high cholesterol with a daily (blood thinner) included.

(22) On May 2, 2008, claimant developed some mid sternal chest pressure and lightheadedness.

(23) He underwent standard cardiac stress testing which revealed no ischemia and a normal ejection fraction; likewise, claimant's chest CT scan showed no acute changes.

(24) Because claimant's ejection fraction was normal, his ACE inhibitor () was discontinued at that time.

(25) Intake information from that testing indicates claimant was cutting wood without any difficulties the day before (See New Medical Evidence, Final Report from () ()).

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).

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).

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

The SDA program differs from the federal MA regulations in that the durational requirement is 90 days. This means that the person's impairments must meet the SSI disability standards for 90 days in order for that person to be eligible for SDA benefits.

The person claiming a physical or mental disability has the burden to establish it through the use of competent medical evidence from qualified medical sources such as his or her medical history, clinical/laboratory findings, diagnosis/prescribed treatment, prognosis for recovery and/or medical assessment of ability to do work-related activities or ability to reason and to make appropriate mental adjustments, if a mental disability is being alleged, 20 CFR 416.913. An individual's subjective pain complaints are not, in and of themselves, sufficient to establish disability. 20 CFR 416.908 and 20 CFR 416.929. By the same token, a conclusory statement by a physician or mental health professional that an individual is disabled or blind is not sufficient without supporting medical evidence to establish disability. 20 CFR 416.929.

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.

If an individual is working and the work is substantial gainful activity, the individual is not disabled regardless of the medical condition, education and work experience. 20 CFR 416.920(c).

If the impairment or combination of impairments do not significantly limit physical or mental ability to do basic work activities, it is not a severe impairment(s) and disability does not exist. Age, education and work experience will not be considered. 20 CFR 416.920.

Statements about pain or other symptoms do not alone establish disability. There must be medical signs and laboratory findings which demonstrate a medical impairment... 20 CFR 416.929(a).

...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 blood pressure, X-rays);
- (4) Diagnosis (statement of disease or injury based on its signs and symptoms)... 20 CFR 416.913(b).

In determining disability under the law, the ability to work is measured. An individual's functional capacity for doing basic work activities is evaluated. If an individual has the ability to perform basic work activities without significant limitations, he or she is not considered disabled. 20 CFR 416.994(b)(1)(iv).

Basic work activities are the abilities and aptitudes necessary to do most jobs. Examples of these include --

- (1) Physical functions such as walking, standing, sitting, lifting, pushing, pulling, reaching, carrying, or handling;
- (2) Capacities for seeing, hearing, and speaking;
- (3) Understanding, carrying out, and remembering simple instructions;
- (4) Use of judgment;
- (5) Responding appropriately to supervision, co-workers and usual work situations; and
- (6) Dealing with changes in a routine work setting. 20 CFR 416.921(b).

The residual functional capacity is what an individual can do despite limitations. All impairments will be considered in addition to ability to meet certain demands of jobs in the national economy. Physical demands, mental demands, sensory requirements and other functions will be evaluated.... 20 CFR 416.945(a).

To determine the physical demands (exertional requirements) of work in the national economy, we classify jobs as sedentary, light, medium and heavy. These terms have the same meaning as they have in the *Dictionary of Occupational Titles*, published by the Department of Labor... 20 CFR 416.967.

Sedentary work. Sedentary work involves lifting no more than 10 pounds at a time and occasionally lifting or carrying articles like docket files, ledgers, and small tools. Although a sedentary job is defined as one which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required occasionally and other sedentary criteria are met. 20 CFR 416.967(a).

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

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).

A statement by a medical source finding that an individual is "disabled" or "unable to work" does not mean that disability exists for the purposes of the program. 20 CFR 416.927(e).

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).

When determining disability, the federal regulations require that several considerations be analyzed in sequential order. If disability can be ruled out at any step, analysis of the next step is not required. These steps are:

1. Does the client perform Substantial Gainful Activity (SGA)? If yes, the client is ineligible for MA. If no, the analysis continues to Step 2. 20 CFR 416.920(b).
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 416.920(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? If no, the analysis continues to Step 4. If yes, MA is approved. 20 CFR 416.290(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. 20 CFR 416.920(e).
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? If yes, the analysis ends and the client is ineligible for MA. If no, MA is approved. 20 CFR 416.920(f).

Claimant is not disqualified from receiving MA/SDA at Step 1, because he has not been gainfully employed since he got fired from his inspector job in 2005 (See Finding of Fact #3 above).

At Step 2, claimant's diagnosed physical impairments, in combination, have left him with some range of motion limitations and pain. However, it must be noted no severe mental impairments have been shown, and claimant's spinal and cardiac symptoms appear fully capable of adequate management/stabilization with the medications currently being prescribed.

It must be noted the law does not require an applicant to be completely symptom free before a finding of lack of disability can be rendered. In fact, if an applicant's symptoms can be managed to the point where substantial gainful employment can be achieved, a finding of not disabled must be rendered. Nevertheless, claimant's medically managed physical impairments meet the *de minimus* level of severity and duration required for further analysis.

At Step 3, the medical evidence on this record does not support a finding that claimant's diagnosed impairments, standing alone or combined, are severe enough to meet or equal any specifically listed impairments; consequently, the analysis must continue.

At Step 4, claimant was cleared to return to inspector work in 2004 (See Finding of Fact #19 above). Additionally, nothing in claimant's cardiac condition would prevent him from doing inspector work. Therefore, this analysis could end at Step 4 with a finding of not disabled. However, even if an analysis of Step 5 was required, claimant would be unsuccessful in establishing a legally disabling condition.

At Step 5, an applicant's age, education and previous work experience (vocational factors) must be assessed in light of the documented impairments. Claimant is a younger individual with a high school education and a semi-skilled/unskilled work history. Consequently, at Step 5, this Administrative Law Judge finds, from the medical evidence of record, that claimant retains the residual functional capacity to perform at least sedentary work, as that term is defined above.

Claimant's biggest barrier to employability appears to be his lack of recent connection to the competitive work force. Claimant should be referred to [REDACTED] [REDACTED] for assistance with job training and/or placement consistent with his skills, interests and abilities. Claimant is not disabled under the MA/SDA definitions, because he can return to other sedentary work, as directed by Medical-Vocational Rule 201.22.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the department properly determined claimant is not disabled by MA/SDA eligibility standards.

Accordingly, the department's action is AFFIRMED.

/s/ _____
Marlene B. Magyar
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: July 28, 2009

Date Mailed: July 29, 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 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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