

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg No. 200925218
Issue No. 2009
Case No. [REDACTED]
Load No. [REDACTED]
Hearing Date: August 20, 2009
Lenawee County DHS

ADMINISTRATIVE LAW JUDGE: Jana A. Bachman

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 20, 2009.

ISSUE

Whether claimant has established disability for Medical Assistance (MA).

FINDINGS OF FACT

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

1. August 4, 2008, claimant applied for MA and retroactive MA.
2. April 23, 2009, the Medical Review Team (MRT) denied claimant's application. Department Exhibit A.
3. April 29, 2009, the department sent claimant written notice that the application was denied.
4. May 4, 2009, the department received claimant's timely request for hearing.
5. June 22, 2009, the State Hearing Review Team (SHRT) denied claimant's application. Department Exhibit B.

6. August 20, 2009, the telephone hearing was held. Prior to the close of the record, claimant requested the record be left open for additional medical evidence. Claimant waived the right to a timely hearing decision. February 25, 2010, after review of all medical evidence, the SHRT again denied claimant's application. SHRT Decision, 2-25-2010.
7. Claimant asserts disability based on impairments caused by a blood clot, chest pain, COPD, sleep apnea, and breathing problems.
8. Claimant testified at hearing. Claimant is 44 years old, 6' tall, and weighs 279 pounds. Claimant completed seventh grade and is trained as a truck driver, welder, heavy equipment operator and in construction. Claimant has a driver's license and is able to drive. Claimant cares for his needs at home with some assistance.
9. Claimant's past relevant work history has been as a semi-truck driver, in construction, as a welder, heavy equipment operator and in large animal farming.
10. On March 10, 2008, claimant pulmonologist wrote his family physician a letter indicating that he had examined claimant and that it was his impression that claimant has severe obstructive lung disease with suspected extremely advanced disease. Lungs demonstrated a few aspiratory-expiratory wheezes and coarse rhonchi. Claimant Exhibit A, pgs 16-17. March 12, 2009, claimant underwent pulmonary testing. FVC pre-bronchodilator was 4.953. FEV 1 pre-bronchodilator was 3.708. Claimant Exhibit A, pg 28.
- 11, On or about April 2008, claimant injured his left knee with a probable ligamentis injury. He was placed in a knee immobilizer. On or about April 15, 2008, claimant developed deep vein thrombosis in the left leg. He was admitted to hospital 4-25-2008. He was treated and his condition improved. He was discharged on April 29, 2008 with discharging diagnoses of left leg deep venous thrombosis; left knee medial collateral ligament tear; left knee quadriceps sprain; and chronic obstructive pulmonary disease. Department Exhibit A, pgs 43-46. June 25, 2008, claimant's physician notes that he continues to have left leg swelling secondary to DVT. He was to start mild compression. Department Exhibit A, pg 54. From August to October 2008, claimant continued to receive treatment for his COPD, deep vein thrombosis, and cellulitis in the left foot. Physical exam revealed diffuse foot erythema and moderate generalized lower leg edema. Claimant

continued to have pain with active flexion and passive flexion. Department Exhibit A, pgs 49-63. On or about May 31, 2007, claimant underwent sleep disorder testing that revealed claimant has obstructive sleep apnea syndrome severe with sleep fragmentation on oxygen desaturation. Claimant was to undergo further testing and a C-PAP titration study. Department Exhibit A, pgs 139-140.

12. August 13, 2009, claimant underwent cardiac stress testing. The prepared report indicates that claimant has diet controlled type 2 diabetes. Claimant's exercise test was negative, non diagnostic, but not entirely normal because of nonspecific ST-T changes before, during, and after exercise; nonspecific ST-T changes during and/or after exercise; cardiac arrhythmia induced by exercise; conduction disturbance unaffected by exercise; conduction disturbance induced by exercise; and hypertensive response. The test did not rule out ischemia. Claimant Exhibit A, pg 1.

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).

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.

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).

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).

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).

If an individual fails to cooperate by appearing for a physical or mental examination by a certain date without good cause, there will not be a finding of disability. 20 CFR 416.994(b)(4)(ii).

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).

At Step 1, claimant is not engaged in substantial gainful activity and so is not disqualified from receiving disability at Step 1.

At Step 2, the objective medical evidence of record indicates that claimant has chronic obstructive pulmonary disease. Claimant's pulmonologist opined that claimant has severely advanced disease; however, objective medical testing revealed claimant's lung function to be in excess of that which is considered disabling. The Administrative Law Judge must give the objective medical evidence the greater legal weight. The objective medical evidence indicates that claimant had a ligament tear and knee strain in his left leg during 2008. After that he developed deep venous thrombosis in his left leg and cellulitis in his left foot. He was treated for these conditions over a period of months. The objective medical evidence of record indicates claimant has severe sleep apnea and was to undergo C-PAP titration. Claimant has type 2 diabetes that is under control. Claimant has undergone stress testing that was non diagnostic, but did not rule out ischemia. Finding of Fact 10-12.

At Step 2, the objective medical evidence of record is not sufficient to establish that claimant has severe impairments that have lasted or are expected to last 12 months or more and prevent employment at any job for 12 months or more. Therefore, claimant is disqualified from receiving disability at Step 2.

At Step 3, claimant's impairments do not rise to the level necessary to be specifically disabling by law.

At Step 4, claimant's past relevant employment has been as a semi-truck driver, in construction, as a welder, a heavy equipment operator, and large animal farmer. See discussion at Step 2 above. Finding of Fact 9-12. It would appear that when claimant's condition in his left knee and foot and not severely

restrictive COPD would make it difficult for him to perform the heavy labor required by his past relevant employment.

At Step 4, the objective medical evidence of record is sufficient to establish that claimant has functional impairments that prevent claimant for a period of 12 months or more from engaging in a full range of duties required by claimant's past relevant employment. Therefore, claimant is not disqualified from receiving disability at Step 4.

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).

Light work. Light work involves lifting no more than 20 pounds at a time with frequent lifting or carrying of objects weighing up to 10 pounds. Even though the weight lifted may be very little, a job is in this category when it requires a good deal of walking or standing, or when it involves sitting most of the time with some pushing and pulling of arm or leg controls.... 20 CFR 416.967(b).

Medium work. Medium work involves lifting no more than 50 pounds at a time with frequent lifting or carrying of objects weighing up to 25 pounds. If someone can do medium work, we determine that he or she can also do sedentary and light work. 20 CFR 416.967(c).

Heavy work. Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying of objects weighing up to 50 pounds. If someone can do heavy work, we determine that he or she can also do medium, light, and sedentary work. 20 CFR 416.967(d).

At Step 5, see discussion at Step 2 above. Finding of Fact 8-12.

At Step 5, the objective medical evidence of record is sufficient to establish that claimant retains the residual functional capacity to perform at least sedentary work activities. Considering claimant's vocational profile (younger individual,

