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

IN THE MATTER OF:



Reg. No.:	2009-35346
Issue No.:	2009
Case No.:	
Load No.:	
Hearing Date: November 5, 2009	
Macomb County DHS (12)	

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant's request for a hearing. After due notice, a telephone hearing was conducted from Detroit, Michigan on Thursday, November 5, 2009. The Claimant appeared, along with the determined on behalf of the Department.

During the hearing, the Claimant waived the time period for the issuance of this decision in order to allow for the submission of additional medical evidence. The new records were received, reviewed, and entered as Exhibit 5. This matter is now before the undersigned for a final decision.

ISSUE

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

FINDINGS OF FACT

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

- 1. The Claimant submitted an application for public assistance seeking MA-P benefits on January 28, 2009.
- 2. On June 24, 2009, the Medical Review Team ("MRT") found the Claimant not disabled. (Exhibit 1, pp. 11, 12)
- 3. On July 20, 2009, the Department sent an Eligibility Notice to the Claimant informing her of the MRT decision. (Exhibit 2)

- 4. On July 28, 2009, the Department received the Claimant's timely written request for hearing.
- 5. On September 21, 2009, the State Hearing Review Team ("SHRT") determined that the Claimant was not disabled. (Exhibit 4)
- 6. The Claimant's alleged physical disabling impairments are due to leg/knee pain, degenerative joint disease, coronary artery disease, and high blood pressure.
- 7. The Claimant has not alleged any mental disabling impairment(s).
- 8. At the time of writing, the Claimant is 56 years old with an date of birth; is 5'6" in height; and weighs 180 pounds.
- 9. The Claimant is a high school graduate with an employment history working in production, as a cashier, and as a bartender.
- 10. The Claimant's impairments have lasted, or are expected to last, continuously for a period of 12 months or longer.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department of Human Services ("DHS"), formerly known as the Family Independence Agency, pursuant to MCL 400.10 *et seq* and MCL 400.105. Department policies are found in the Bridges Administrative Manual ("BAM"), the Bridges Eligibility Manual ("BEM"), and the Bridges Reference Manual ("BRM").

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) 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-relate activities or ability to reason and make appropriate mental adjustments, if a mental disability is alleged. 20 CRF 413.913 An individual's subjective pain complaints are not, in and of themselves, sufficient to establish disability. 20 CFR 416.908; 20 CFR 416.929(a) Similarly, conclusory statements by a physician or mental health professional that an individual is disabled or

blind, absent supporting medical evidence, is insufficient to establish disability. 20 CFR 416.927

When determining disability, the federal regulations require several factors to be considered including: (1) the location/duration/frequency/intensity of an applicant's pain; (2) the type/dosage/effectiveness/side effects of any medication the applicants takes to relieve pain; (3) any treatment other than pain medication that the applicant has received to relieve pain; and (4) the effect of the applicant's pain on his or her ability to do basic work activities. 20 CFR 416.929(c)(3) The applicant's pain must be assessed to determine the extent of his or her functional limitation(s) in light of the objective medical evidence presented. 20 CFR 416.929(c)(2)

In order to determine whether or not an individual is disabled, federal regulations require a five-step sequential evaluation process be utilized. 20 CFR 416.920(a)(1) The fivestep analysis requires the trier of fact to consider an individual's current work activity; the severity of the impairment(s) both in duration and whether it meets or equals a listed impairment in Appendix 1; residual functional capacity to determine whether an individual can perform past relevant work; and residual functional capacity along with vocational factors (i.e. age, education, and work experience) to determine if an individual can adjust to other work. 20 CFR 416.920(a)(4); 20 CFR 416.945

If an individual is found disabled, or not disabled, at any step, a determination or decision is made with no need evaluate subsequent steps. 20 CFR 416.920(a)(4) If a determination cannot be made that an individual is disabled, or not disabled, at a particular step, the next step is required. 20 CFR 416.920(a)(4) If an impairment does not meet or equal a listed impairment, an individual's residual functional capacity is assessed before moving from step three to step four. 20 CFR 416.920(a)(4); 20 CFR 416.945 Residual functional capacity is the most an individual can do despite the limitations based on all relevant evidence. 20 CFR 945(a)(1) An individual's residual functional capacity assessment is evaluated at both steps four and five. 20 CFR 416.920(a)(4) In determining disability, an individual's functional capacity to perform basic work activities is evaluated and if found that the individual has the ability to perform basic work activities without significant limitation, disability will not be found. 20 CFR 416.994(b)(1)(iv)

In general, the individual has the responsibility to prove disability. 20 CFR 416.912(a) An impairment or combination of impairments is not severe if it does not significantly limit an individual's physical or mental ability to do basic work activities. 20 CFR 416.921(a) An individual is not disabled regardless of the medical condition, age, education, and work experience, if the individual is working and the work is a substantial, gainful activity. 20 CFR 416.920(a)(4)(i) Substantial gainful activity means work that involves doing significant and productive physical or mental duties and is done (or intended) for pay or profit. 20 CFR 416.910(a)(b) Substantial gainful activity is work

activity that is both substantial and gainful. 20 CFR 416.972 Work may be substantial even if it is done on a part-time basis or if an individual does less, with less responsibility, and gets paid less than prior employment. 20 CFR 416.972(a) Gainful work activity is work activity that is done for pay or profit. 20 CFR 416.972(b)

In the record presented, the Claimant is not involved in substantial gainful activity therefore is not ineligible for disability benefits under Step 1.

The severity of the Claimant's alleged impairment(s) is considered under Step 2. The Claimant bears the burden to present sufficient objective medical evidence to substantiate the alleged disabling impairments. In order to be considered disabled for MA purposes, the impairment must be severe. 20 CFR 916.920(a)(4)(ii); 20 CFR 916.920(b) An impairment, or combination of impairments, is severe if it significantly limits an individual's physical or mental ability to do basic work activities regardless of age, education and work experience. 20 CFR 916.920(a)(4)(ii); 20 CFR 916.920(c) Basic work activities means the abilities and aptitudes necessary to do most jobs. 20 CFR 916.921(b) Examples 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.

Id. The second step allows for dismissal of a disability claim obviously lacking in medical merit. *Higgs v Bowen*, 880 F2d 860, 862 (CA 6, 1988). The severity requirement may still be employed as an administrative convenience to screen out claims that are totally groundless solely from a medical standpoint. *Id.* at 863 *citing Farris v Sec of Health and Human Services*, 773 F2d 85, 90 n.1 (CA 6, 1985) An impairment qualifies as severe only if, regardless of a claimant's age, education, or work experience, the impairment would not affect the claimant's ability to work. *Salmi v Sec of Health and Human Services*, 774 F2d 685, 692 (CA 6, 1985)

In the present case, the Claimant alleges disability based on leg/knee pain, degenerative joint disease, coronary artery disease, and high blood pressure. In

support of her claim, some records from as early as 2005 were submitted which document treatment for peripheral vascular disease, atherosclerotic coronary artery disease, hypertension, hyperlipidemia, claudication, chronic kidney disease, renal artery stenosis, renal cyst, atrial fibrillation, and gastroesophageal reflux disease.

On Adenosine stress test revaled an area of moderately severe ischemia in the left anterior descending ("LAD") with an ejection fraction ("EF") of 40%. The Claimant was diagnosed with anginal-equivalent symptoms manifested by dyspnea on exertion and chest pressure with an abnormal stress test; hypertension; peripheral artery disease; hyperlipidemia; chronic kidney disease; rental artery stenosis; paroxysmal atrial fibrillation on anticoagulation; and sick sinus syndrome status post pacemaker insertion. The Claimant required cardiac catheterization.

On **Sector**, the Claimant underwent a left heart catheterization, coronary angiogram, left ventriculogram, abdominal aortic angiogram, ipsilateral angiogram of the right iliofemoral artery, follow-through angiogram of the right femoral-popliteal bypass; complex percutaneous angioplasting and stenting of the LAD and diagnoal branch utilizing multiple stents, and percutaneous angioplasty and stenting of the LAD, and percutaneous angioplasty and stenting of the ostial/proximal segment of the diagonal branch. Medication non-compliance and history of smoking were also noted. The Claimant was discharged the following day with the primary diagnosis of coronary artery disease with abnormal stress test. Secondary diagnoses were hypertension, peripheral vascular disease, sick sinus syndrome status post pacemaker, mild cardiomyopathy with efection fraction of 45 to 50 percent; prior stents to the right coronary artery and percutaneous coronary intervention to the right iliac artery, renal stenosis, structural heart disease, history of transient ischemic attack, and osteoarthritis.

On **Construction**, the Claimant attended a consultative evaluation. The Claimant was diagnosed with hypertension (uncontrolled with present regime); status post multiple anioplasty and stent insertion for coronary artery disease; status post bypass surgery in the vessels of the right leg noting poor peripheral pulsations; status post angioplasty and stent insertion of the right general artery; possible right hip arthritis with functional limitations orthopedically; and exogenous obesity.

On **Chain and Second Report**, a Medical Examination Report was completed on behalf of the Claimant. The Claimant was restricted to occasionally lifting/carrying of less than 10 pounds; standing and/or walking less than 2 hours during an 8 hour workday; sitting at about 6 hours during this same time frame; and able to perform repetitive actions with her upper extremities with the exception of pushing and pulling. The Claimant was unable to operate foot/leg controls.

As previously noted, the Claimant bears the burden to present sufficient objective medical evidence to substantiate the alleged disabling impairment(s). As summarized above, the Claimant has presented objective medical evidence establishing that she does have some physical limitations on her ability to perform basic work activities. Accordingly, the Claimant has an impairment, or combination thereof, that has more than a *de minimis* effect on the Claimant's basic work activities. Further, the impairments have lasted continuously for twelve months therefore, the Claimant is not disqualified from receipt of MA-P benefits under Step 2.

In the third step of the sequential analysis of a disability claim, the trier of fact must determine if the Claimant's impairment, or combination of impairments, is listed in Appendix 1 of Subpart P of 20 CFR, Part 404. The Claimant asserts disabling impairments due to leg/knee pain, degenerative joint disease, coronary artery disease, and high blood pressure

Listing 1.00 (musculoskeletal system), Listing 4.00 (cardiovascular system), and Listing 6.00 (genitourinary system) were considered in light of the objective medical evidence. The Claimant had surgery in January 2009 which increased her EJ from 40 percent to 45 to 50 percent. Medication non-compliance is also noted. Ultimately, based on the evidence alone, it is found that the Claimant's impairments do not meet the intent and severity requirement of a Listing thus she can not be found disabled, or not disabled, at Step 3. Accordingly, the Claimant's eligibility is considered under Step 4. 20 CFR 416.905(a)

The fourth step in analyzing a disability claim requires an assessment of the Claimant's residual functional capacity ("RFC") and past relevant employment. 20 CFR 416.920(a)(4)(iv) An individual is not disabled if he/she can perform past relevant work. Id.; 20 CFR 416.960(b)(3) Past relevant work is work that has been performed within the past 15 years that was a substantial gainful activity and that lasted long enough for the individual to learn the position. 20 CFR 416.960(b)(1) Vocational factors of age, education, and work experience, and whether the past relevant employment exists in significant numbers in the national economy is not considered. 20 CFR 416.960(b)(3) RFC is assessed based on impairment(s), and any related symptoms, such as pain, which may cause physical and mental limitations that affect what can be done in a work setting. RFC is the most that can be done, despite the limitations.

To determine the physical demands (exertional requirements) of work in the national economy, jobs are classified as sedentary, light, medium, heavy, and very heavy. 20 CFR 416.967 Sedentary work involves lifting of no more than 10 pounds at a time and occasionally lifting or carrying articles like docket files, ledgers, and small tools. 20 CFR 416.967(a) 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. *Id.* Jobs are sedentary if walking and standing are required occasionally and other sedentary

criteria are met. Light work involves lifting no more than 20 pounds at a time with frequent lifting or carrying objects weighing up to 10 pounds. 20 CFR 416.967(b) Even though 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. *Id.* To be considered capable of performing a full or wide range of light work, an individual must have the ability to do substantially all of these activities. Id. An individual capable of light work is also capable of sedentary work, unless there are additionally limiting factors such as loss of fine dexterity or inability to sit for long periods of time. Id. Medium work involves lifting no more than 50 pounds at a time with frequent lifting or carrying of objects weighing up to 25 pounds. 20 CFR 416.967(c) An individual capable of performing medium work is also capable of light and sedentary work. Id. Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying of objects weighing up to 50 pounds. 20 CFR 416.967(d) An individual capable of heavy work is also capable of medium, light, and sedentary work. Id. Finally, very heavy work involves lifting objects weighing more than 100 pounds at a time with frequent lifting or carrying objects weighing 50 pounds or more. 20 CFR 416.967(e) An individual capable of very heavy work is able to perform work under all categories. Id.

Limitations or restrictions which affect the ability to meet the demands of jobs other than strength demands (exertional requirements, i.e. sitting, standing, walking, lifting, carrying, pushing, or pulling) are considered nonexertional. 20 CFR 416.969a(a) In considering whether an individual can perform past relevant work, a comparison of the individual's residual functional capacity with the demands of past relevant work. Id. If an individual can no longer do past relevant work the same residual functional capacity assessment along with an individual's age, education, and work experience is considered to determine whether an individual can adjust to other work which exists in the national economy. Id. Examples of non-exertional limitations or restrictions include difficulty function due to nervousness, anxiousness, or depression; difficulty maintaining attention or concentration; difficulty understanding or remembering detailed instructions; difficulty in seeing or hearing; difficulty tolerating some physical feature(s) of certain work settings (i.e. can't tolerate dust or fumes); or difficulty performing the manipulative or postural functions of some work such as reaching, handling, stooping, climbing, crawling, or crouching. 20 CFR 416.969a(c)(1)(i) - (vi) If the impairment(s) and related symptoms, such as pain, only affect the ability to perform the non-exertional aspects of work-related activities, the rules in Appendix 2 do not direct factual conclusions of disabled or not disabled. 20 CFR 416.969a(c)(2) The determination of whether disability exists is based upon the principles in the appropriate sections of the regulations, giving consideration to the rules for specific case situations in Appendix 2. ld.

The Claimant's work history includes employment in a factory (production), as a cashier, and as a bartender/manager. The prior employment also required standing, bending,

pushing, pulling, etc. In light of the Claimant's testimony and in consideration of the Occupational Code, the Claimant's prior work is classified as unskilled, light to medium work.

The Claimant testified that she has difficulty lifting/carrying any weight; can stand and sit for short period of time; has difficulty walking; is able to bend but unable to squat; and is able to perform repetitive actions. The objective medical evidence from the Claimant's primary care physician limits the Claimant to occasionally lifting/carrying of 10 pounds; standing and/or walking less than 2 hours during an 8 hour workday; sitting about 6 hours during this same time frame; and able to perform repetitive actions with her upper extremities. If the impairment or combination of impairments does not limit an individual's physical or mental ability to do basic work activities, it is not a severe impairment(s) and disability does not exist. 20 CFR 416.920 In consideration of the Claimant's testimony, medical records, and current limitations, it is found that the Claimant is unable able to return to past relevant employment thus Step 5 of the sequential analysis is required.

In Step 5, an assessment of the individual's residual functional capacity and age, education, and work experience is considered to determine whether an adjustment to other work can be made. 20 CFR 416.920(4)(v) At the time of writing, the Claimant is 56 years old thus considered to be of advanced age for MA-P purposes. The Claimant has a high school education. Disability is found if an individual is unable to adjust to other work. Id. At this point in the analysis, the burden shifts from the Claimant to the Department to present proof that the Claimant has the residual capacity to substantial gainful employment. 20 CFR 416.960(2); Richardson v Sec of Health and Human Services, 735 F2d 962, 964 (CA 6, 1984). While a vocational expert is not required, a finding supported by substantial evidence that the individual has the vocational qualifications to perform specific jobs is needed to meet the burden. O'Banner v Sec of Health and Human Services, 587 F2d 321, 323 (CA 6, 1978). Medical-Vocational guidelines found at 20 CFR Subpart P, Appendix II, may be used to satisfy the burden of proving that the individual can perform specific jobs in the national economy. Heckler v Campbell, 461 US 458, 467 (1983); Kirk v Secretary, 667 F2d 524, 529 (CA 6, 1981) cert den 461 US 957 (1983).

In this case, the evidence reveals that the Claimant suffers from multiple medical problems to include hip pain (possible arthritis), hypertension, renal disease, renal artery stenosis, chronic kidney disease, and coronary artery disease with multiple stenting and angioplasty. In consideration of the foregoing and giving weight to the primary care physician's opinion, the Claimant's residual functional capacity for work activities on a regular and continuing basis does include the ability to meet at least the physical and mental demands required to perform sedentary work as defined in 20 CFR 416.967(a). After review of the entire record using the Medical-Vocational Guidelines

[20 CFR 404, Subpart P, Appendix II] as a guide, specifically Rule 201.04, it is found that the Claimant is disabled for purposes of the MA-P program at Step 5.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law finds the Claimant disabled for purposes of the MA-P and SDA benefit program.

Accordingly, it is ORDERED:

- 1. The Department's determination is REVERSED.
- 2. The Department shall initiate review of the January 28, 2009 application to determine if all other non-medical criteria are met and inform the Claimant of the determination is accordance with Department policy.
- 3. The Department shall supplement for any lost benefits that the Claimant was entitled to receive (if any) if otherwise eligible and qualified.
- 4. The Department shall review the Claimant's continued eligibility in December 2011 in accordance with department policy.

Collein M. Mamilka

Colleen M. Mamelka Administrative Law Judge For Ismael Ahmed, Director Department of Human Services

Date Signed: <u>11/03/2010</u>

Date Mailed: ___11/03/2010_____

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.

CMM/jlg

