STATE OF MICHIGAN STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

Claimant

Reg. No:2009-3555Issue No:2009/4031Case No:1Load No:1Hearing Date:1March 3, 20091Genesee 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, an in-person hearing

was held on March 3, 2009. Claimant personally appeared and testified. She was assisted by

, a paralegal from

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:

 Claimant is a single, intelligent, articulate, well-groomed, 39-year-old female with an Associates Degree in Applied Science.

(2) Claimant stands 5'4" tall and weighs 168 pounds; she is right hand dominant.

2009-3555/mbm

(3) Claimant has a valid driver's license and she is completely independent in all self cares and basic daily living activities.

(4) Claimant has a semi-skilled work history as a travel agent, a veterinary assistant and a resort hotel operations employee (families/tour groups/check-in/guest services); she has not been employed anywhere since May, 2007 (Department Exhibit #1, pg 6).

(5) Claimant alleges disability status on a constellation of mental/physical symptoms including general fatigue, pain and malaise due to Lupus and Fibromyalgia (first diagnosed in December, 2002, per self report).

(6) On February 14, 2008, claimant filed an MA/retro-MA/SDA application which the Michigan Department of Human Services (DHS) denied, based on a finding her impairments did not rise to the level necessary to be deemed disabling under the governing regulations.

(7) Prior to that filing, claimant also applied for federal Social Security disability benefits alleging impairments identical to those alleged on her DHS application.

(8) Per claimant's hearing testimony, the Social Security Administration (SSA) denied claimant's application and claimant pursued the matter no further (i.e., she failed to appeal the SSA denial).

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).

2

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).

Jurisdiction must be established for a contested case review of departmental action before

a decision on the merits of the case can be made. The applicable departmental policy states:

Final SSI Disability Determination

SSA's determination that disability or blindness does **not** exist for SSI purposes is **final** for MA if:

- . The determination was made after 1/1/90, and
- . No further appeals may be made at SSA, or
- The client failed to file an appeal at any step within SSA's 60-day limit, **and**
- . The client is **not** claiming:
 - .. A totally different disabling condition than the condition SSA based its determination on, or
 - .. An additional impairment(s) or change or deterioration in his condition that SSA has **not** made a determination on.

Eligibility for MA based on disability or blindness does **not** exist once SSA's determination is **final**. PEM, Item 260, pp. 2-3.

This policy is also applied in SDA cases, because the MA, SDA and Social Security

disability definitions are identical, except for a shorter durational period for SDA (90 days).

The relevant federal regulations are found at 42 CFR Part 435. These regulations provide:

"An SSA disability determination is binding on an agency until that determination is changed by

the SSA." 42 CFR 435.541(a)(2)(b)(i). This regulation also provides: "If the SSA determination

is changed, the new determination is also binding on the department." 42 CFR

435.541(a)(2)(b)(ii). These federal mandates have been incorporated in the department's policy at PEM Item 260.

The evidence of record in this case verifies claimant received a final SSA determination.

Claimant is now alleging impairments identical to those the SSA has already reviewed.

Consequently, under the above cited regulations and state policy, no jurisdiction exists for this

Administrative Law Judge to proceed on the merits of this case. The status quo must remain

intact. The department's action must remain upheld. In closing, this Administrative Law Judge

notes claimant would not have prevailed, even if a full analysis was required.

Michigan administers the federal MA program. In assessing eligibility, Michigan defers to the federal guidelines. These federal guidelines state in 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.

...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.

...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 you do not have any impairment or combination of impairments which significantly limits your physical or mental ability to do basic work activities, we will find that you do not have a severe impairment and are, therefore, not disabled. We will not consider your age, education, and work experience. 20 CFR 416.920(c).

[In reviewing your impairment]...We need reports about your impairments from acceptable medical sources.... 20 CFR 416.913(a).

...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).

At application, the applicant has the burden of proof pursuant to the follow sections:

...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).

...A statement by a medical source that you are "disabled" or "unable to work" does not mean that we will determine that you are disabled. 20 CFR 416.927(e).

The federal regulations are very specific regarding the type of medical evidence required

from an applicant to establish disability. The regulations essentially require laboratory or clinical

reports consistent with the applicant's self-reported symptoms, or with his/her treating doctor's

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

...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 (Xrays), 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).

...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). [SDA Duration = 90 days].

The medical documentation in claimant's file is insufficient to indicate her conditions, standing alone or combined, would interfere with her ability to engage in any number of unskilled or semi-skilled jobs currently existing in the national economy, including her past relevant work. Put simply, when taken as a whole, the evidence in this file fails to meet the regulatory requirements necessary to qualify for disability-based MA or SDA. Consequently, claimant's disputed application must remain denied based on lack of jurisdiction, or *in arguendo*, based on the ability to perform past and/or other unskilled work.

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.

Accordingly, the department's action is AFFIRMED.

/s/

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

Date Signed:_____

Date Mailed:__

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.

2009-3555/mbm

MBM/db

