

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

IN THE MATTER OF:

[REDACTED]

Reg No. 200921940  
Issue No. 2009  
Case No. [REDACTED]  
Load No. [REDACTED] 0  
Hearing Date: August 13, 2009  
Huron 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, an in-person hearing was held on August 13, 2009. Claimant did not appear at hearing. Claimant was represented at hearing by [REDACTED].

**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. January 8, 2009, claimant applied for MA.
2. February 26, 2009, the Medical Review Team (MRT) denied claimant's application. Department Exhibit A.
3. March 2, 2009, the department sent claimant written notice that the application was denied.
4. April 1, 2009, the department received claimant's timely request for hearing.

5. May 29, 2009, the State Hearing Review Team (SHRT) denied claimant's application. Department Exhibit B.
6. August 13, 2009, the in-person hearing was held. Claimant did not appear, claimant was represented by Ronald Wing. Prior to the close of the record, claimant's representative requested that the record be left open for the submission of additional medical evidence. Claimant waived the right to a timely hearing decision. August 31, 2009, after review of all medical evidence, the SHRT again denied claimant's application. SHRT Decision, 8-31-09.
7. Claimant asserts disability based on impairments caused by depression.
8. Claimant is 34 years old and completed high school. She reports poor reading and math skills due to dyslexia. Department Exhibit A, pgs 3-4.
9. Claimant's past relevant employment has been performing home help. Department Exhibit A, pg 3.
10. February 12, 2009, after physical examination that took place that same date, claimant's physician completed a Medical Examination Report (DHS-49). Doctor indicates claimant has depression, anxiety, and tobacco abuse. Physical exam was within normal limits. Claimant has no physical limitations. Department Exhibit A, pgs 11-12.
- 11, March 19, 2008, claimant underwent x-rays of the right shoulder due to complaints of pain and limited movement. A report was prepared that indicates claimant has widening of the acromiohumeral space which may be secondary to previous surgery or represent erosive changes. Clinical correlation was suggested. Otherwise right shoulder study was negative. Department Exhibit A, pg 29.
12. October 2, 2008, claimant underwent a psychiatric evaluation. A report was prepared that indicates claimant showed some psychomotor retardation and seemed to be in distress. She was tearful for most of the interview and appeared tense. Her affect was at times labile. Speech was clear and coherent. Thought process were clear and well organized. She was not hallucinating and presented no delusional ideas or racing thoughts. She denied suicidal thoughts or plans to hurt herself. She was well oriented in time, place, and person. She had good cognitive abilities and her judgment was not impaired. AXIS I diagnosis was major depressive

disorder, recurrent. GAF was assessed at 51. Department Exhibit A, pgs 31-32.

### **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, it is unknown whether claimant is engaged in substantial gainful activity and so a Step 1 analysis cannot be completed.

At Step 2, the objective medical evidence of record indicates that during March 2008, claimant had some widening of her acromiohumeral space—right shoulder. This condition caused some pain and limited movement. February 12, 2009 physical exam revealed a normal physical exam with no physical limitations. The objective medical evidence indicates that claimant has been diagnosed with depressive disorder. At exam, cognitive functions were within normal limits. Claimant displayed some psychomotor retardation and appeared to be in distress at her initial evaluation. She was tearful. Subsequent treatment records indicate similar status. August 6, 2009, claimant's psychiatrist completed a Mental Residual Capacity Assessment (DHS-49-E) indicating that claimant was markedly limited in 15 of 20 areas of functioning. She was moderately limited in 5 of 20 areas of functioning. Claimant Exhibit A, pgs 1-2. The information on the Mental Residual Functional Capacity Assessment is not consistent with claimant's treatment records which indicate that claimant's cognitive functions are generally within normal limits. Accordingly, the objective medical evidence contained on the psychological assessment must be given greater legal weight than the conclusions that are stated on the functional capacity assessment form. 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 performing home help duties. See discussion at Step 2 above. Finding of Fact 9-12.

At Step 4, the objective medical evidence of record is not 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 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 is capable of performing unskilled work activities. Accordingly, claimant is not disabled. Therefore, claimant is disqualified from receiving disability at Step 5.

Claimant does not meet the federal statutory requirements to qualify for disability. Therefore, claimant does not qualify for Medical Assistance based on disability and the department properly denied claimant's application.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, decides that claimant has not established disability for Medical Assistance.

Accordingly, the department's action is, hereby, UPHELD.

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Jana A. Bachman  
Administrative Law Judge  
for Duane Berger, Acting Director  
Department of Human Services

Date Signed: January 7, 2011

Date Mailed: January 19, 2011

**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.

JAB/db

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