

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: 2010-19664  
Issue No: 2009; 4031  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
March 25, 2010  
Muskegon County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

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 March 25, 2010. Claimant personally appeared and testified. Claimant was represented at the hearing by [REDACTED]

ISSUE

Whether claimant meets the disability criteria for Medical Assistance and State Disability Assistance?

FINDINGS OF FACT

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

(1) On December 2, 2009, claimant filed an application for Medical Assistance and State Disability Assistance benefits alleging disability.

(2) On January 12, 2010, the Medical Review Team denied claimant's application.

(3) On January 15, 2010, the department caseworker sent claimant notice that his application was denied.

(4) On January 29, 2010, claimant filed a request for a hearing to contest the department's negative action.

(5) On March 1, 2010, the State Hearing Review Team again denied claimant's application stating that claimant is capable of performing other work in the form of light work per 20 CFR 416.967(b) pursuant to Medical Vocational Rule 202.13.

(6) The hearing was held on March 25, 2010. At the hearing, claimant waived the time periods and requested to submit additional medical information.

(7) Additional Medical Information was submitted and sent to the State Hearing Review Team on April 7, 2010.

(8) On April 8, 2010, the State Hearing Review Team approved claimant for State Disability Assistance stating: The claimant is alleging disability secondary to Multiple Sclerosis, depression and anxiety. The claimant was diagnosed with MS approximately October 2009, page 2, 3, 4. The claimant has had progressing symptoms of undiagnosed nature prior to that time. Resonance images indicated plaques typically seen in MS. Subsequent resonance images confirmed these findings. The claimant has had progression of symptoms including exacerbations requiring hospitalization. The claimant meets the requirements of listing 11.09.anc. The Medical Evidence sufficiently demonstrates that the intent of severity of listing 11.09.anc are met. MA-P and Retroactive MA-P were not applied for by the claimant. State Disability is approved per PEM 261 effective December 2009. This case needs to be reviewed for continued disability benefits as of September 2010. At review the following needs to be

provided: Prior Medical Packet; DHS-49 b, f, g, DHS-49 d & e, all hospital and treating source notes and test results; all consultative examinations, including those purchased by the Social Security Administration/Disability Determination Service. Listing 11.09, 12.04 and 12.06 were considered in this determination.

### 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).

Because of the SHRT determination, it is not necessary for the Administrative Law Judge to discuss the issue of disability per Program Administrative Manual, Item 600. The department is required to initiate a determination of claimant's financial for the requested benefits if not previously done. The Administrative Law Judge also determines that the department should also determine whether or not claimant actually applied for Medical Assistance benefits along with State Disability Assistance benefits because there appear to be some disparity in the medical file. If claimant has not applied for Medical Assistance, the department shall assist claimant in filing a Medical Assistance application and Retroactive Medical Assistance application for purposes of disability.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the claimant meets the definition of medically disabled under the State Disability Assistance program as of the December 2, 2009 application date. If claimant has also applied for Medical Assistance benefits, she also needs the disability standards for Medical Assistance as of the September 2, 2009 application date.

Accordingly, the department's decision is REVERSED. The department is ORDERED to initiate a review of the December 2, 2009 application if it has not already done so to determine if all other non-medical eligibility criteria are met. The department shall inform the claimant of the determination in writing. The department is ORDERED to conduct a medical review of claimant's condition in September 2010. At that review the department should assist claimant in providing: prior medical packet; DHS-49 b, f and G, DHS-49 d and e, all hospital and treating source notes and test results; all consultative examinations, including those purchased by the Social Security Administration/Disability Determination Service.

/s/ \_\_\_\_\_  
Landis Y. Lain  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: April 14, 2010

Date Mailed: April 21, 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.

2010-19664/LYL

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.

LYL/alc

cc:

