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

#### IN THE MATTER OF:





### ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

## HEARING DECISION

This matter is before the undersigned Admini strative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notic e, a telephone hearing was held on July 15, 2010. Claimant personally appeared and testified.

### **ISSUE**

Whether claimant meets the disability criteria for M edical Assistance (MA-P) and retroactive Medical Assistance (retro MA-P)?

### 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 April 21, 2010, claimant filed an application for Medical Assistance and Retroactive Medical Assistance benefits.
- (2) There was some ques tion as to whet her or not claimant applied f or State Disability Assistance benefits.
- (3) On May 8, 2008, the department casewo rker sent claimant notice that her application was denied.
- (4) On may 25, 2010, the medical review team denied claimant's app lication for Medical Assistanc e and retroactive Medical Assis tance stating that claimant's impairment's di d not meet duration. However, the Medical Review Team approved claimant for St ate Disability Assistance benefit s until October 2010.

- (5) On May 28, 2010, the department case worker sent claimant notice that her application for Medical Assistance benefits was denied.
- (6) On June 8, 2010, claimant filed a request for a hearing to contest the department's negative action.
- (7) On June 25, 2010, the State H earing Review Team again denied claimant's applic ation st ating that it had insufficient evidence and requested a complete physical examination.
- (8) The hearing was held on July 15, 2010, at the hearing claimant waived the time periods requested to submit additional medical information.
- (9) Additional medical information was submitted and sent to the State Hearing Review Team on September 27, 2010.
- (10) On October 1, 2010, the State Hearing Rev iew Team approved c laimant for Medical Assistance and retroactive Medical Assistance benefits stating in its' analysis and recommendation: the claimant has a history of CVA. She has receptive and expressive aphasia and hemiparesis. Her speech was dysar thric, slow and stammeri ng. Her comprehension, abstract reasoning, memory and problem solvi ng were all impaired. She had reduced muscle strength in al I extremities but more in the right leg. The claimant's impairment's do not meet/equal the intent or severit y of an appropriate Social Security Lis ting. The medical evidenc e of record indicates that the claim ant does not retain t he capacity to perform simple unskilled sedentary work on a s ustained basis. Therefore, based on the claimant's vocational profile of closely appr oaching retirement age of 61, 12<sup>m</sup> grade education and history of unskilled and semi-skilled work, MA-P is approved using Vocati onal Rule 201.04 as a guid e. Retroactive MA-P was considered in this case and is approved effective January 2010. SDA was previously approved by the MRT. At the medical review in October 2013, please obtain updated forms, attach the prior folder and obtain updated medical records from January 2013 to current.
- (11) Claimant is a 61-yea r-old woman whos e birth dat e is Claimant is 5'3" tall and weighed 156 pounds on t he date of hearing. Claimant is a high school graduate. Claimant can no longer read and write and does not have basic math skills since her stroke.
- (12) Claimant last worked in 2005 in a Nursing Home. Claimant has also worked doing office work.
- (13) Claimant alleges as disabling impairments: chronic back problem s, CVA (strokes), hypertension and aphasia, as well as memory problems and cognitive deficiency and core peripheral vision.

# CONCLUSIONS OF LAW

The State Disability A ssistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Service s (DHS or department) administers the SDA program pursuant to MCL 400.10, et seq., and MAC R 400.3151-400.3180. Department polic ies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The Medical Assistance (MA) program is estab lished by Title XIX of the Social Sec urity Act and is implemented by T itle 42 of the C ode 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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) 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 substant ial 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 deter mine disability . Current work activity, severity of impairments, residual functional capacity, past wor k, 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 experienc e. 20 CFR 416.920(c).

If the impairment or combination of impair ments do not signific antly limit physica I or mental ability to do basic work activities, it is not a severe impairment(s) and disab ility does not exist. Age, education and work ex perience will not be c onsidered. 20 CFR 416.920.

Statements about pain or other symptoms do not alone establish disability. There must be medical signs and laboratory findings wh ich demonstrate a medical im pairment.... 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 di sease 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 bas ic work activities is evaluated. If an individual has the ability to perform basic work activities with out 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 wa lking, 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 a cceptable medical sources that reflect judgments about the nature and severity of the impairment(s), including your symptoms, diagnosis and prognosis, what an indiv idual can do des pite impairment(s), and the physical or mental restrictions. 20 CFR 416.927(a)(2).

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All of the evidenc e relevant to the claim, including m edical opinions, is rev iewed and findings are made. 20 CFR 416.927(c).

The Administrative Law Judge is responsible for making the determination or decis ion about whether the statutory definition of disability is met. The Administrative Law Judge reviews all medical findings and other ev idence that support a medical source's statement of disability.... 20 CFR 416.927(e).

A statement by a medical s ource finding t hat an individual is "d isabled" or "unable to work" does not mean that disability e xists for the purposes of the program. 20 CFR 416.927(e).

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 <u>not</u> required. These steps are:

- 1. Does the client perform Substant ial 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 mo re 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 clie nt's symptoms, signs, and laboratory findings at least equiv alent 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 forme r work that he/she performed within the last 15 years? If yes, t he client is ineligible for MA. If no, the analysis continues to Step 5. 20 CFR 416.920(e).
- 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, A ppendix 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).

Because of the SHRT determination, it is not necessary for the Administrative Law Judge to discuss the issue of dis ability per BRIDGES Administrative Manual, Item 600. The department is required to initiate a determination of claimant's financial eligibility for the requested benefits if not previously done.

## DECISION AND ORDER

The Administrative Law Judge, based upon t he above findings of fact and conclusion s of law, decides that the claimant meets the definition of medically dis abled under the Medical Assistance Program and the State Disability Assistance Program as of the April 21, 2010, application date. Cla imant also meets the definit ion of disabled as of the January 2010, retroactive Medical Assistance application.

Accordingly, the department's decision is REVERSED. The department is ORDERED to initiate a review of the April 21, 2010, application if it has not already done so to determine if all other non-medi cal criteria are met. The department shall inform the claimant of a determination in writing. The department shall conduct a medical revie w in October 2013. At that ti me, the department shall assist claimant in gathering all updated medical information and submit it to the Medical Review Team.

Landis

<u>/s/</u>

Y. Lain Administrative Law Judge for Ismael Ahmed, Director Department of Human Services

Date Signed: <u>10/19/10</u>

Date Mailed: <u>10/19/10</u>

**NOTICE**: Administrative Hearings may or der a rehearing or reconsideration on either its own motion or at t he request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hear ings will not orde r a rehearing or reconsideration on the Department's mo tion where the final decis ion 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.

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