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

IN THE MATTER OF:



Reg. No:	2010-46982
Issue No:	2009
Case No:	
Load No:	
Hearing Date:	
September 16, 2010	
Bay County DHS	

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 notice, an in-person hearing was held on September 16, 2010. Claimant personally appeared and testified. Claimant was represented at the hearing by

<u>ISSUE</u>

Whether the claimant meets the disability criteria for Medical 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 February 18, 2010, claimant filed an application for Medical Assistance and retroactive Medical Assistance benefits alleging disability.
- (2) On may 3, 2010, the Medical Revi ew Team denied claimant's application stating that claimant could perfore rm other work pursuant to Medical Vocational Rule 201.27.
- (3) On May 17, 2010, the department caseworker sent claimant notice that his application was denied.
- (4) On August 4, 2010, claimant file d a request for a hearing to contest the department's negative action.
- (5) On August 17, 2010, the State Hearing Revi ew Team again denied claimant's application stat ing in its' analys is and rec ommendation: the

claimant is obese 413 pounds according to the claimant and his blood pressure is fairly controlled. His stress test did not show any evidence of exercise induced ischemia, but did show non-specific ST-T changes at rest. His ejection fraction was 55%. He has had brawny edema mostly in his lower extremities. He is also depressed but had appropriate thought content. The claim ant's impairment's do not meet/equal the intent or severity of a Social Security listing. The medical evidence of record indicates that the claimant retains the capacity to perform at least simple unskilled sedentary work. In lieu of det ailed work history the claimant will be returned to other work. Therefore, based on the claimant's vocational profile of a younger individual, 12th grade education and a history of unskilled and semi-skilled work, MA-P is denied using Vocational Rule 201.27 as a guide. Retroactive MA-P was considered in this case and is also denied.

- (6) The hearing was held on September 16, 2010. At the hearing, claimant waived the time periods and request ed to submit additional medical information.
- (7) Additional medical information wa s submitted and sent to the State Hearing Review Team on January 20, 2011.
- (8) On February 10, 2011, the State Hearing Review Team approved claimant for Medical Assistance and retroactive Medial Assistance benefits stating that the claimant was approved for Social Security Disability benefits on January 21, 2011, and is currently in pay ment status. Therefore, MA-P and retro MA-P are approved effective November 2009. SDA was not applied for by the claimant but would have been approved per PEM 261. No med ical review is necessary due to the SSA allowance. This case needs to be reviewed for continuing MA-P benefits on February 2012.
- (9) Claimant is a 43-year-old man w hose birth date is Claimant is 5'11" tall and weighs 410 pounds. Claimant is a high schoo I graduate. Claimant is able to read and wr ite and does have basic math skills and he does have 1 year of college
- (10) Claimant last worked August 2010 as a cu stomer service repres entative. Claimant has also worked at **Characteria** as a cashier and in retail.
- (11) Claimant alleges as disabling impairments: s hortness of breath, heart disease, c oronary artery disease, an xiety, depress ion, hypertension, diabetes mellitus, high cholesterol.

CONCLUSIONS OF LAW

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).

Based upon the Social Security Administra tion determination, claimant was determined to be disabled and has a disability onset date of August 5, 2009. Because of the Social Security determination it is not necessary for the Administrative Law Judge to discus s the issue of disabilit y. PEM, Item 260. 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 As sistance program and retroactive Medical Assistance program as of t he February 18, 2010, application date and the re troactive months of January 2010, December 2009 and November 2009.

Accordingly, the department's decision is REVERSED. The department is ORDERED to initiate a review of the February 18, 2010, Medical Assistance and retroactive Medical Assistance 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 m edical review in February 2012. At review, the following needs to be provided : continuin g SSA allo wance and payment status information, prior medical packet; DHS-49, B, D, E, F, G; all hospital and treating source notes and test results; all consultative examination including those purchased by the Social Security Administration and the Disability Determination Service if claimant is not in payment status.

Landis

<u>/s/</u> Y. Lain Administrative Law Judge for Maura D. Corrigan, Director Department of Human Services

Date Signed: February 16, 2011

Date Mailed: February 17, 2011

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.

LYL/alc

CC:

