

STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg. No: 201111303  
Issue No: 2009; 4031  
Case No: [REDACTED]  
Hearing Date: April 26, 2011  
Oakland County DHS

**ADMINISTRATIVE LAW JUDGE:** William A. Sundquist

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the claimant's request for a hearing. After due notice, a telephone hearing was held on. The claimant appeared and testified.

**ISSUE**

Was disability medically established?

**FINDINGS OF FACT**

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

- (1) Claimant is currently unemployed.
- (2) On July 26, 2010, the Claimant was released from prison.
- (3) Claimant's vocational factors are: age 45, high school graduate, and past unskilled work experience doing odd jobs, such as cutting grass and maintenance-janitorial work.
- (4) On September 28, 2010, the Claimant applied for MA (retro for August)/SDA, was denied on December 16, 2010, per BEM 260/261, and requested a hearing on December 16, 2010.

- (5) Claimant's disabling complaints are: cardiomyopathy, hypertension, back pain, and some shortness of breath (Medical Packet, Page 90).
- (6) Medical exam on [REDACTED], states the Claimant had an Implantable Cardioverter Defibrillator (ICD) placement; that the pressure was slightly elevated; that heart was within normal limits; that ICD side was closed with mild swelling; and that lungs were clear (Medical Packet, Page 34).
- (7) SHRT report dated January 19, 2011, states the Claimant's impairments do not meet/equal a Social Security listing (Medical Packet, Page 9).

### **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).

The facts above are undisputed:

"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.

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, the evidence establishes that the Claimant is not engaged in substantial gainful activity. Therefore, disability is not denied at this step.

At Step 2, the objective medical evidence of record establishes the Claimant is significantly limited in performing basic work activities, as defined below, based on the *de minimus* standard, but, not for the durational requirements. Therefore, disability is denied at this step.

At Step 3, the objective medical evidence does not establish that the Claimant's impairments meet/equal a Social Security listing. Therefore, disability is not denied at this step.

At Step 4, the objective medical evidence does not establish the Claimant's inability to do any of his past work, despite his severe impairment, especially his maintenance/janitorial work. Therefore, disability is denied at this step.

At Step 5, the objective medical evidence does not establish that the Claimant is without at Residual Functional Capacity (RFC) for other work in the national economy.

...Your residual functional capacity is what you can still do despite limitations. If you have more than one impairment, we will consider all of your impairment(s) of which we are aware. We will consider your ability to meet certain demands of jobs, such as physical demands, mental demands, sensory requirements, and other functions, as described in paragraphs (b), (c) and (d) of this section. Residual functional capacity is an assessment based on all of the relevant evidence.... 20 CFR 416.945(a).

...To determine the physical exertion requirements of work in the national economy, we classify jobs as sedentary, light, medium, heavy, and very 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).

Claimant's disabling complaints above that he has no RFC for any work is not supported by the objective medical evidence of record. Claimant admits he can lift/push up to 10 pounds and that he has no medical statement(s) by a physician that he cannot do any work. His medical limitations fall within the definition of sedentary work activities, as defined above. Therefore, the Claimant would be able to perform, at least, sedentary work. At this level, considering the Claimant's vocational profile (younger individual, age 45, high school graduate, and past unskilled work experience) he is not considered disabled under Vocational Rule 201.18. Therefore, disability is denied at Steps 2, 4, and 5.

The DHS Program Eligibility Manual contains the following policies, statements, and instructions for caseworkers regarding the State Disability Assistance Program: to receive state disability assistance, a person must be disabled, caring for a disabled person or age 65 or older. BEM 261, Page 1. Because the Claimant does not meet the definition of disabled under the MA-P program and because the evidence of record does not establish that Claimant is unable to work for a period exceeding 90 days, the Claimant does not meet the disability criteria for State Disability Assistance either.

Therefore, the Claimant has not established disability, as defined above, by the necessary competent, material, and substantial evidence on the whole record.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law decides that disability was not medically established.

Accordingly, MA/SDA denial is UPHELD.

/s/  
William Sundquist  
Administrative Law Judge  
For Maura D. Corrigan, Director  
Department of Human Services

Date Signed: May 16, 2011  
Date Mailed: May 16, 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.

WAS/ar

cc:

