

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

IN THE MATTER OF:



Reg. No: 201114159
Issue No: 2009
Case No: [REDACTED]
Hearing Date: March 13, 2011
Marquette 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 March 13, 2011. 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's current employment is unknown because he did not attend the hearing.
- (2) In 2008, the Claimant had his last job; the reason for discontinuance is unknown.
- (3) Claimant's vocational factors are: age 48, 11th grade education, and past work experience as very heavy drywall finisher (Medical Packet, Page 66).
- (4) On July 29, 2010, the Claimant applied for Medicaid, was denied on October 11, 2010, per BEM 260, and requested a hearing on January 7, 2011.
- (5) Claimant's disabling complaints are: back and chest pain, removed cancerous left kidney, and cancer in right kidney (Medical Packet, Page 73).

- (6) Claimant's representative admits that the medical packet does not address the Claimant's functional capacity for basic work activities, inability to do past work, or any other work in the national economy.
- (7) Medical exam on [REDACTED], states that Claimant's strength and tone were normal overall with no atrophy, spasticity or tremors; and that gait and station were normal (Medical Packet, Page 12).
- (8) Medical exam on [REDACTED], states the Claimant was given pain medication and a diagnosis of non-cardiac chest pain (Medical Packet, Page 68).
- (9) Medical exam on [REDACTED], states the Claimant's neurologic exam showed good retained strength, sensation and tone; that there were no pathological reflexes; that an EMG showed no evidence of peripheral neuropathy; and that there was no EMG evidence of right or left lumbar radiculopathy or significant slowing across the piriformis muscle (Medical Packet, Pages 27 and 28).
- (10) On [REDACTED], the claimant was notified he was no longer accepted as a patient in his doctor's practice because of early refills of morphine repeatedly over the last 4 months (Medical Packet, Page 29).
- (11) SHRT report dated February 7, 2011, states the Claimant's impairments do not meet/equal a Social Security listing (Medical Packet, Page 73).

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 is unknown whether or not the Claimant is engaged in substantial gainful activity.

At Step 2, the objective medical evidence of record does not establish that the Claimant is significantly limited in performing basic work activities, as defined below, and for the required duration stated below.

...If you do not have any impairment or combination of impairments which significantly limits your physical or mental ability to do basic work activities, we will find that you do not have a severe impairment and are, therefore, not disabled. We will not consider your age, education, and work experience. 20 CFR 416.920(c).

...[The impairment]...must have lasted or must be expected to last for a continuous period of at least 12 months. We call this the duration requirement. 20 CFR 416.909.

Non-severe impairment(s). An impairment or combination of impairments is not severe if it does not significantly limit your physical or mental ability to do basic work activities. 20 CFR 416.921(a).

Basic work activities. When we talk about basic work activities, we mean 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).

Only a non-severe impairment, as defined above, has been established. 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 non-severe physical impairment. And Claimant's representative admitted that the medical packet does not address the question. Therefore, disability is denied at this step.

If disability had not already been denied at Steps 2 and 4, it would be denied at Step 5. At Step 5, the objective medical evidence does not establish the Claimant is without a residual functional capacity 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).

Claimants disabling complaints above do not alone, in his absence, establish that he has no residual functional capacity for any work. His medical limitations, if any, fall within the definition of sedentary work activities defined above. Therefore, the Claimant would be able to perform, at least, sedentary type work. At this level, considering the Claimant's vocational profile (younger individual, age 48, 11th grade education, and past semi-skilled work experience) he is not considered disabled under Vocational Rule 201.19. Therefore, disability is denied at Steps 2, 4, and 5.

Therefore, the Claimant has not establish disability, as defined above, by the necessary competent, material, an substantial medical evidence of the whole record. 20 CFR 416.912(c).

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 denial is UPHELD.

/s/

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

Date Signed: May 9, 2011

Date Mailed: May 9, 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

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