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

IN THE MATTER OF:



Reg. No: 201123285

Issue No: 2009

Case No:

Hearing Date: June 2, 2011

Lapeer 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, an inperson hearing was held on June 2, 2011. The claimant appeared and testified.

<u>ISSUE</u>

Was disability medically established?

FINDINGS OF FACT

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

- Claimant is currently unemployed.
- (2) In November 2009, the claimant quit her last job due to pain all over her body.
- (3) Claimant's vocational factors are: age 52, 9th grade education, and past semiskilled work self employed in a salvage yard car parts business, skilled waitress, skilled elderly care worker, and unskilled set up for a circus.
- (4) On March 11, 2010, the claimant applied for MA, was denied on May 18, 2010, per BEM 260, and requested a hearing on October 11, 2010.
- (5) Claimant alleges disability due to arthritis, back pain, pinched nerve in hand, spinal shrinkage, poor vision, chronic obstructive pulmonary disease, asthma, claudication, stomach pain, skin condition, anxiety and immune disorder.

- (6) Medical exam on states the claimant's areas of the body are normal for general, heent, neck, thorax, heart, lungs, genitala, extremities, neuro, (Medical Packet, page 79).
- (7) Medical exam on discomfort or distress; that her abdominal exam demonstrates some mild suprapubic discomfort just near the midline and towards the right (Medical Packet, page 38).
- (8) Medical exam on state of the claimant's general, heent, respiratory, cardiovascular, abdominal, neuro, and mental are all normal; and that the claimant has decreased range of motion of the lumbar spin, and that the claimant's condition is stable (Medical Packet, pages 3 and 4)
- (9) Neurological and orthopedic report dated claimant is able to sit, stand, bend, stoop, carry, push, pull, button clothes, tie shoes, dress-undress, dial a telephone, open door, make a fist, pick up coin, pick up pencil, write, squat and arise from squatting, get on and off examining table, and climb stairs; that she can walk on heels and toes and tandem walk; that her gait is stable and within normal limits; that her grip strength is 5/5; that she has a normal range of motion for the cervical/lumbar spine, shoulders, elbows, hips, knees, ankles, wrist, hands, and fingers (Medical Packet, page 9).
- (10) Medical exam on states that overall the claimant's mental status was normal and behaviors were appropriate (Medical Packet, page 12).
- (11) SHRT report dated March 28, 2011, states the claimant's impairments do not meet/equal a Social Security listing (Medical Packet, page 83).

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 <u>not</u> 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).
- 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 currently 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 physical work activities as defined below, based on the *de minimus* standard, but not a severe mental impairment, as defined below, and not for the required physical 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).

Therefore, disability is denied at this step based on not meeting the physical duration stated above.

At Step 3, the objective medical evidence does not establish that the claimant's impairments meet/equal a Social Security listing.

At Step 4, the objective medical evidence does not establish the claimant's inability to do any of her past work, despite her severe impairment. Her past work as a waitress and elder care fall within her medical limitations. Therefore, disability is denied at this step.

At Step 5, the objective medical evidence does not establish that the claimant is without a 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 <u>Dictionary of Occupational Titles</u>, 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 she has no RFC for any work is not supported by the objective medical evidence of record. Her medical limitations fall within the definition of sedentary work, as defined above. Therefore, the claimant would be able to perform, at least, sedentary type work. At this level, considering the claimant's vocational profile (closely approaching advanced age, 52, 9th grade education, and past unskilled/semi-skilled/skilled work experience) she is not considered disabled under Vocational Rule 201.11. Therefore, disability is denied at Steps 2, 4, and 5.

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 denial is UPHELD.

/s/

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

Date Signed: June 15, 2011

Date Mailed: June 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:

