

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2011-51399
Issue No.: 2009
Case No.: [REDACTED]
Hearing Date: April 23, 2012
County: Macomb (50-36)

ADMINISTRATIVE LAW JUDGE: Jan Leventer

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, MCL 400.37 and Claimant's request for a hearing. After due notice, a hearing was held on April 23, 2012, in Sterling Heights, Michigan. Participants on behalf of Claimant were Claimant and his Authorized Hearing Representative, [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Did the Department correctly determine that Claimant is not disabled for purposes of the Medical Assistance (MA or Medicaid) program?

FINDINGS OF FACT

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

1. On February 24, 2009, Claimant filed an application for Medicaid benefits. The application also requested MA retroactive to November 1, 2008.
2. On June 21, 2011, the Department issued a Notice of Case Action denying Claimant's application.
3. On September 7, 2011, Claimant filed a hearing request appealing the Department's denial.

4. Claimant, age forty-seven [REDACTED] has a high-school Graduate Equivalency Diploma. He has a tenth-grade education.
5. Claimant last worked in 2008 as a seasonal lawncare worker. Claimant also performed relevant work as an assembly line worker, cook and custodian. Claimant's relevant work history consists exclusively of unskilled, heavy-type exertional work activities.
6. Claimant has a history of liver failure, coma, alcohol abuse, bipolar disorder, deep vein thrombosis (DVT) in the right arm, and Hepatitis C. The onset date of Claimant's bipolar disorder is [REDACTED], when [REDACTED] CA, diagnosed the disorder. The onset date of Claimant's liver disease and Hepatitis C is [REDACTED].
7. Claimant was hospitalized in [REDACTED] as a result of bipolar disorder, and also in [REDACTED] as a result of liver failure.
8. Claimant currently suffers from bipolar disorder, liver disease and Hepatitis C.
9. Claimant has severe limitations in his ability to conduct numerous basic mental activities. Claimant's limitations have lasted or are expected to last twelve months or more.
10. Claimant's complaints and allegations concerning his impairments and limitations, when considered in light of all objective medical evidence, as well as the whole record, reflect an individual who is so impaired as to be incapable of engaging in any substantial gainful activity on a regular and continuing basis.

CONCLUSIONS OF LAW

MA was established by Title XIX of the U.S. Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department administers MA pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM) and Reference Tables (RFT).

SDA provides financial assistance for disabled persons and was established by 2004 PA 344. The Department administers SDA pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. Department policies are found in BAM, BEM and RFT.

The Administrative Law Judge concludes that Claimant **IS DISABLED** for purposes of the MA program, for the following reason (select ONE):

1. Claimant's physical and/or mental impairment(s) meet a Federal SSI Listing of Impairment(s) or its equivalent.

Listing of Impairment No.:

12.04 Affective disorder, Subsection C:

- C. Medically documented history of a chronic affective disorder of at least 2 years' duration that has caused more than a minimal limitation of ability to do basic work activities, with symptoms or signs currently attenuated by medication or psychosocial support, and one of the following:
1. Repeated episodes of decompensation, each of extended duration; or
 2. A residual disease process that has resulted in such marginal adjustment that even a minimal increase in mental demands or change in the environment would be predicted to cause the individual to decompensate; or
 3. Current history of 1 or more years' inability to function outside a highly supportive living arrangement, with an indication of continued need for such an arrangement.

20 CFR, Appendix 1, Subpart P, Part 404, Part A, Listing 12.04C.

OR

2. Claimant is not capable of performing other work.

The Administrative Law Judge concludes and determines that Claimant **IS NOT DISABLED** for the following reason (select ONE):

1. Claimant is engaged in substantial gainful activity.
2. Claimant's impairment(s) do not meet the severity and one-year duration requirements.
3. Claimant is capable of performing previous relevant work.
4. Claimant is capable of performing other work.

The rationale for the undersigned's determination that Claimant meets the federal definition of a psychiatric affective disorder is based on the following application of the requirements of 12.04C to the Claimant's situation. First, Claimant has medically documented persistence of a depressive syndrome which is characterized by four hospitalizations for bipolar disorder, in [REDACTED]. It is found and determined that Claimant's four hospitalizations constitute repeated episodes of decompensation of extended duration, as specified in Listing 12.04C1 above. It is found and determined that Claimant is eligible for MA benefits on the basis of his mental impairment.

Based on the Findings of Fact and Conclusions of Law above, Claimant is found to be

- NOT DISABLED.** **DISABLED.**

for purposes of the MA program. The Department's denial of MA benefits to Claimant is

AFFIRMED. **REVERSED.**

Claimant may also be eligible for SDA by virtue of this decision. An individual must have a physical or mental impairment which meets federal SSI disability standards for at least 90 days. Receipt of MA benefits based upon disability or blindness (or receipt of SSI or RSDI benefits based upon disability or blindness) automatically qualifies an individual as disabled for purposes of the SDA program. Other specific financial and non-financial eligibility criteria are found in BEM Item 261. Inasmuch as Claimant has been found disabled for purposes of MA, Claimant must also be found disabled for purposes of SDA benefits, if he elects to apply for them.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, and for the reasons stated on the record finds that Claimant

DOES NOT MEET **MEETS**

the definition of medically disabled under the Medical Assistance program as of the onset date of bipolar disorder of 1994.

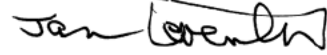
The Department's decision is

AFFIRMED. **REVERSED.**

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Initiate processing of Claimant's February 24, 2009 application, to determine if all nonmedical eligibility criteria for MA and MA-retroactive benefits have been met;
2. If all nonmedical eligibility criteria for benefits have been met and Claimant is otherwise eligible for benefits, initiate processing of MA and MA retroactive benefits to Claimant, including any supplements for lost benefits to which Claimant is entitled in accordance with policy;
3. If all nonmedical eligibility criteria for benefits have been met and Claimant is otherwise eligible for benefits, initiate procedures to schedule a redetermination date for review of Claimant's continued eligibility for program benefits in June 2013.

4. All steps shall be taken in accordance with Department policy and procedure.



Jan Leventer
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: April 25, 2012

Date Mailed: April 26, 2012

NOTICE: Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (60 days for FAP cases)

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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
 - misapplication of manual policy or law in the hearing decision,
 - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
 - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at
Michigan Administrative Hearings
Reconsideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

JL/pf

cc:

