

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 2012-63817
Issue No: 2009
[REDACTED]
Hearing Date: October 31, 2012
Genesee-2 County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing to protest the denial of claimant's application for MA. After due notice, an in person hearing was held on October 31, 2012. Claimant personally appeared and testified. Claimant was represented at hearing by [REDACTED] of [REDACTED]

ISSUE

Whether the claimant meets the disability criteria for Medical Assistance (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 November 21, 2011, claimant filed an application for Medical Assistance and retroactive Medical Assistance benefits alleging disability.
2. On February 13, 2012, the Medical Review Team denied claimant's application stating that claimant's impairments lacked duration.
3. On April 6, 2012, the department caseworker sent claimant notice that his application was denied.
4. On July 6, 2012, claimant filed a request for a hearing to contest the department's negative action.
5. On August 16, 2012, the State Hearing Review Team again denied claimant's application stating in its analysis and recommended decision: the claimant is obese with a body mass index of 39.4. His blood pressure

was well controlled. He had normal motor and sensory deficit. His gait was normal. The medical evidence shows that the claimant may be anxious at times. He is still able to remember, understand and communicate with others. As a result of the claimant's combination of severe physical condition, he is restricted to performing medium work. He retains the capacity to lift up to 50 lbs occasionally, 25 lbs frequently and stand and walk for up to 6 of 8 hours. He should avoid unprotected heights and hazardous machinery. Claimant is not engaging in substantial gainful activity at this time. Claimant's severe impairments do not meet or equal any listing. Despite these impairments, he retains the capacity to perform medium work. Therefore, based on the claimant's vocational profile (younger individual, 14 years of education, and medium work history); MA-P is denied using Vocational Rule 203.30 as a guide. Retroactive MA-P benefits are denied at step 5 of the sequential evaluation; claimant retains the capacity to perform medium work.

6. The hearing was held on October 31, 2012. At the hearing, claimant waived the time periods and requested to submit additional medical information.
7. Additional medical information was submitted and sent to the State Hearing Review Team on November 1, 2012.
8. On December 26, 2012, the State Hearing Review Team approved claimant stating in its analysis and recommendation: adopting the SSA-ALJ Title II & IVI decision. It needs to be noted that per the completed DHS-49-A, only MA-P was applied for, not retroactive MA-P. However, retroactive MA-P benefits are considered and as long as non-medical issues are met, it is appropriate that retroactive MA-P benefits could be awarded to the established date of onset as set by the SSA/ALJ decision date November 30, 2012. The claimant was approved for Social Security Disability benefits on November 30, 2012 and is currently in payment status. Therefore, MA-P and retroactive MA-P are approved effective October 30, 2011.

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).

Because of the SHRT determination, it is not necessary for the Administrative Law Judge to discuss the issue of disability, per BAM, Item 600.

A person eligible for retirement, survivors and disability insurance (RSDI) benefits based on his disability or blindness meets the disability or blindness criteria. Disability or blindness starts from the RSDI disability onset date established by the Social Security Administration (SSA). This includes a person whose entire RSDI benefit is being withheld for recruitment. No other evidence is required. BEM, Item 260, Page 1.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the claimant meets the definition of medically disabled under the Medical Assistance Program as of the October 30, 2011 Social Security Administration disability onset date.

Accordingly, the department is **ORDERED** to initiate a review of the application if it is 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.

A medical review should be scheduled for January, 2014. The department should check to see if claimant is in current payment status or not. If the claimant is in current payment status at the medical review no further action will be necessary. However, if the claimant is not in current payment status at the medical review, the department is to obtain updated application forms (DHS49) and obtain updated medical records.

It is **ORDERED** that the department shall review this case in one year from the date of this Decision and Order.

Landis

/s/

Y. Lain

Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: January 8, 2013

Date Mailed: January 8, 2013

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.

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