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

IN THE MATTER OF:



Reg. No.: 2012-72982 Issue No.: 2009; 4031

Case No.: Hearing Date:

December 11, 2012

County: Ionia

ADMINISTRATIVE LAW JUDGE: Vicki L. Armstrong

HEARING DECISION

This matter is before the undersigned Ad request for a hearing made pursuant to Mi chigan Compiled Laws 400.9 and 400.37, which gov ern the administrative hearing a nd appeal process. After due notice, a telephone hearing was commenced on December 11, 2012, from Lansing, Michigan. Claimant, accompanied by her appeared and testified. Participants on behalf of the Department of Human Services (Department) included Eligibility Specialist

ISSUE

Whether the Department of Human Serv ices (the department) properly denied Claimant's app lication for Medical Assistance (MA), Retro-MA and State Disabilit y Assistance (SDA)?

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 June 5, 2012, Claimant filed an application for MA/Retro-MA and SDA benefits alleging disability.
- (2) On August 14, 2012, the Medical Re view Team (MRT) denied Claimant's application for MA-P and Retro-MA , indicating she was capable of performing past relevant work. SDA was denied due to lack of duration. (Department Exhibit A, pp 8-9).
- (3) On August 20, 2012, the department caseworker sent Claimant notice that her application was denied.

- (4) On August 28, 2012, Claimant filed a request for a hearing to contest the department's negative action.
- (5) On October 8, 2012, the Stat e Hear ing Review T eam (SHRT) found Claimant was not disabled and retain ned the capacity to perform a wide range of unskilled work. SDA was denied because the nature and severity of Claimant's impairments would not preclude work activity at the above stated level for 90 days. (Department Exhibit B, pp 1-2).
- (6) Claimant has a history of soci al anxiety, posttraumati c stress disorder, depression, chronic obstructive pul monary disease, irritable bowel syndrome, endometriosis, hypertension, heart problems and blindness in her right eye.
- (7) On May 30, 2012, a physician completed a Medical Needs-Jet form for Claimant. Claimant was diagnosed with anxiety, depression, irritable bowel syndrome and endometriosis. The examining physician opined that Claimant was unable to work at her usual occupation or at any other job. Physically, Claimant had no limitations and could occasionally lift/carry 50 pounds or more during a third of an 8-hour workday. However, she was unable to work at this time or even do classroom activities due to psychiatric care. (Department Exhibit A, pp 22-23).
- (8) On June 5, 2012, Claimant underwent an assess ment at She was referred fo r services by her primary care physician. Claimant reported high anxiety and depression. She reported not having cut in five years and wanting therapy so that she did not start to self-harm again des pite having the thoughts. At age 17 she attempted suicide by overdosing on Zoloft. She has an extensive history of sex ual, physical and emotional abuse. Jamie wa s admitted involuntarily to at 17 and has had outpatient services on and off since then. Claimant was diagnosed wighth posttraumatic stress disorder, dysthymia, low blood pressure, chronic obst ructive pulmonary dis ease, asthma and irritable bo wel syn drome. Claimant was unable to sit still lo na. He r concentration and attention were moder ately impaired. Her mood was sad, anxious, irritable, depressed and tearful. Her appetite and sleep had decreased. Her recent memory wa s impaired. Cla imant indicated thoughts of suicide but stated that she would never have a plan due to her daughter. She had m arked difficulties problem solving with other people, recognizing and expressing emotions appropriately and a marked inability to develop and maintain relationsh ips. She reported anxiety around others and particularly crowds of people. She finds it difficult to trust others due to her past and being hurt repeatedly. Diagnosis: Axis I: Dysthymia, Posttraumatic Stress Disorder; Axis V: GAF=50. (Department Exhibit A, pp 57-69).

- (9) On June 14, 2012, Claimant und erwent a medical examination on behalf of the department. Claimant was diagnosed with anxiety, depression and chronic obstructive pulmonary disease. The examining physician opined that Claimant's condition was deteriorating. (Department Exhibit A, pp 20-21).
- (10) On August 27, 201 2, Claimant underwent a psychiatric evaluation at community mental health. The psychiatrist noted he had first met with Claimant during her admission to October 24, 2000, the psychiatrist completed a psychiatric evaluation of Claimant, however, she never returned and he wanted the opportunity to review that evaluation. (Claimant Exhibit, pp 42-45).
- (11) On September 24, 2012, Claimant met with her th erapist. The new male therapist asked Claimant if she was okay talking wit h him. Based on her past abuse by males, and her hesitancy in answering, her therapist asked if she would like to be further from him. Claimant then moved her chair further from the therapist. At one point, while talking about her daughter, Claimant became tearful and slower to react. Later in the conversation, while asking about dis sociative events, she stated that was one of those times. The therapist thought Claimant had had a mini s eizure, as she blankly looked at him for several se conds. They discussed her dismissal from the JET program based on her inability to handle the social aspect of it. In July, 2012, her daughter was removed from her custody becaus e she was unstable and unable to provide a proper home environment. (Claimant Exhibit, pp 56-58).
- (12) On November 29, 2012, Claimant's psychiatrist me t with Claimant for a medication review. She weighed 130.4 pounds, was 67 inches tall. Blood pressure was 112/70, pulse 68, BMI 20. 4. This was a 16 pound weight gain from 10/24/00. She had a fair amount of anxiety. There was a history of molestation. She had overdosed. She claimed 7 mis carriages. She had been addicted to or depend ent on cannabis and had used cocaine and ecstasy. She was homeless. Diagnoses: Axis I; Dy sthymic Disorder, Posttraumatic Stress Dis order, Dissociative Dis order and Cannabis Dependence; Ax is III: Low weight with a history of s ubstance use and current use of marijuana; Ax is V: G AF=54. Claimant was being seen in therapy once every other week. (Department Exhibit A, pp 46-48).
- (13) Claimant is a 30 ye ar old woman whos e birthday is Claimant is 5'7" tall and weighs 130 lbs. Claimant completed high school.
- (14) Claimant had applied for Social Security disability benefits at the time of the hearing.

CONCLUSIONS OF LAW

The Medic al Assistance (MA) program is est ablished by the Title XIX of the Socia I Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independ ence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 400.105. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

The State Disability A ssistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Service s (DHS or department) administers the SDA program pursuant to MCL 400.10, et seq., and Mich Admin Code, Rules 400.3151-400.3180. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

Pursuant to Federal Rule 42 CFR 435.540, the Department of Human Services uses the federal Supplemental Security Income (SSI) policy in determining eligibility for disability under the Medical Assistance program. Under SSI, disability is defined as:

... the inability to do any subs tantial gainful activity by reason of any medically dete rminable 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

The SDA program differs from the feder all MA regulations in that the durational requirement is 90 days. This means that the person's impairments must meet the SSI disability standards for 90 days in order for that person to be eligible for SDA benefits.

The person claiming a physica I or mental disability has the burden to establish it through the use of competent medical evidence from qualified medical sources such as his or her medical history, clinical/laboratory findings, di agnosis/prescribed treatment, prognosis for recovery and/or medical assessment of ability to do work-related activities or ability to reason and to make appropriate mental adjustments, if a mental disability is being alleged, 20 CF R 416.913. An individual's subjective pain complaints are not, in and of the mselves, sufficient to estab lish disability. 20 CFR 416.908 a nd 20 CF R 416.929. By the same token, a conclus ory statement by a physician or mental health professional that an individual is disabled or blind is not sufficient without supporting medical evidence to establish disability. 20 CFR 416.929.

A set order is used to deter mine disability. Current work activity, severity of impairments, residual functional capacity, past wor k, age, or education and work experience is reviewed. If there is a finding that an individual is disabled or not disabled at any point in the review, there will be no further evaluation. 20 CFR 416.920.

If an individual is working and the work is substantial gainful activity, the individual is not disabled regardless of the medical condition, education and work experienc e. 20 CFR

416.920(c). If the impairment, or combination of impairments, do not significantly limit physical or mental ability to do basic work activities, it is not a severe impairment(s) and disability does not exist. Age, education and work experience will not be considered. 20 CFR 416.920.

Statements about pain or other symptoms do not alone establish disability. There must be medical signs and laborator y findings which demons trate a medical impairment. 20 CFR 416.929(a).

Medical reports should include -

- (1) Medical history.
- (2) Clinical findings (suc h as the results of physical or mental status examinations);
- (3) Laboratory findings (such as blood pressure, X-rays);
- (4) Diagnosis (statement of dis ease or injury based on its signs and symptoms). 20 CFR 416.913(b).

In determining disability under the law, the ability to work is measured. An individual's functional capacity for doing bas ic work activities is evaluated. If an individual has the ability to perform basic work activities with out significant limitations, he or she is not considered disabled. 20 CFR 416.994(b)(1)(iv). Basic work activities are 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).

Medical findings must allow a determination of (1) the nature and limiting effects of your impairment(s) for any period in question; (2) the probable duration of the impairment ;

and (3) the residual functional capacity to do work-related physical and mental activities. 20 CFR 416.913(d).

The residual functional capac ity is what an individual can do desp ite limitations. All impairments will be considered in addition to ability to meet certain demands of jobs in the national economy. Physical demands, mental demands, sensory requirements and other functions will be evaluated. 20 CFR 416.945(a).

To determine the physical demands (exertional requirements) of work in the national economy, we class ify jobs as sedentary, light, medium and 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 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 def ined as one which involves sitting, a certain amount of wa lking and standing is often necess ary 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). Light work involves lifting no more than 20 pounds at a time with frequent lifting or carrying of objects weighing up to 10 pounds. Even though the weight lifted may be very little, a job is in this category when it requires a good deal of walk ing or standing, or when it involves sitting most of the time with some pushing and pulling of arm or leg c ontrols. 20 CFR 416.967(b). Medium work involves lifting no more t han 50 pounds at a time wit h frequent lifting or carrying of objects weighing up to 25 pounds. If someone can do medium work, we determine that he or she can also do sedentar y and light work. 20 CFR 416. 967(c). Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying o f objects weighing up to 50 pounds. If som eone can do heavy work, we deter mine that he or she can also do medium, light, and sedentary work. 20 CFR 416.967(d).

The Administrative Law Judge is responsible for making the determination or decision about whether the statutory definition of disability is met. The Administrative Law Judge reviews all medical findings and other evidence that support a medical source's statement of disability. 20 CFR 416.927(e).

When determining disability, the federal regulations require that s everal 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:

- Does the client perf orm Substantial Gainful Activit y (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 cli ent is ineligible for MA. If yes, the analys is c ontinues t o Step 3. 20 CF R 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 year s? If yes, the client is ineligible for MA. If no, the analysis continues to Step 5. 20 CFR 416.920(e).
- 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).

Based on Finding of Fact #6-#13 above this Administrative Law Judge answers:

Step 1: No.

Step 2: Yes.

Step 3: Yes. Claimant has show n, by clear and convincing documentary evidence and credib le testimony, her mental impairments meet or equal Listing 12.04(A) and 12.04(B):

12.04 Affective disorders: Characterized by a distur bance of mood, accompanied by a full or partial manic or depressive syndrome. Mood refers to a prolonged emotion that colors the whole psychic life; it generally involves either depression or elation.

The requir ed level of severity for these disorders is met when the requirements in both A and B are satisfied.

A. Medically documented persist ence, either continuous or intermittent, of one of the following:

- 1. Depressive syndrome characterized by at least four of the following:
- a. Anhedonia or per vasive los s of intere st in a lmost all activities; or

- b. Appetite disturbance with change in weight; or
- c. Sleep disturbance; or
- d. Psychomotor agitation or retardation; or
- e. Decreased energy; or
- f. Feelings of guilt or worthlessness; or
- g. Difficulty concentrating or thinking; or
- h. Thoughts of suicide; or
- i. Hallucinations, delusions, or paranoid thinking; or
- 2. Manic s yndrome characterized by at least three of the following:
- a. Hyperactivity; or
- b. Pressure of speech; or
- c. Flight of ideas; or
- d. Inflated self-esteem; or
- e. Decreased need for sleep; or
- f. Easy distractibility; or
- g. Involvement in activities that have a high probability of painful consequences which are not recognized; or
- h. Hallucinations, delusions or paranoid thinking; or
- 3. Bipolar syndrome with a history of episodic periods manifested by the full symptomatic picture of both manic and depressive syndromes (and currently characterized by either or both syndromes);

AND

- B. Resulting in at least two of the following:
- 1. Marked restriction of activities of daily living; or
- 2. Marked difficulties in maintaining social functioning; or
- 3. Marked difficulties in maintaining concentration, persistence, or pace; or

4. Repeated episodes of decomp ensation, each of extended duration;

Accordingly, this Ad ministrative Law Judg e concludes that Claimant is disabled for purposes of the MA/Retro-MA and SDA progr ams. Consequently, the department's denial of her June 5, 2012, MA/Retro-MA and SDA application cannot be upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusion sof law, decides the department erred in determining Claimant is not currently disabled for MA/Retro-MA and SDA eligibility purposes.

Accordingly, the department's decision is **REVERSED**, and it is ORDERED that:

- 1. The department shall process Claimant's June 5, 2012, MA/Retro-MA and SDA application, and shall award her all the benefit s she may be entitled to receive, as long as she meets the remaining financial and non-financial eligibility factors.
- 2. The department shall rev iew Claimant's medica I cond ition for improvement in January, 2015, unless her Social Se curity Administration disability status is approved by that time.
- 3. The department shall obtain updated medical evidence from Claimant's treating physicians, physical therapists, pain clinic notes, etc. regarding her continued treatment, progress and prognosis at review.

It is SO ORDERED.		
	/s/	
		Vicki L. Armstrong
		Administrative Law Judge
		for Maura D. Corrigan, Director
		Department of Human Services

Date Signed: January 2, 2013

Date Mailed: January 2, 2013

NOTICE: Administrative Hearings may or der 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 Hear ings will not order a rehearing or

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reconsideration on the Department's mo tion where the final decis ion 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 mailing of the Decision and Order or, if a ti mely 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 <u>MAY</u> 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

VLA/las

CC:

