STATE OF MICHIGAN

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

IN THE MATTER OF: Reg. No: 20133982

Issue No: 4031 Case No:

Hearing Date: February 21, 2013

Ionia 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 Cla imant's request for a hearing. After due notice, an in person hearing was held on Thursday; February 21, 2013. Claimant appeared an d provided t estimony on her beh alf with Department of Human Services (Department) included

<u>ISSUE</u>

Was disability, as defined below, 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:

- 1. Claimant's SDA application on F ebruary 7, 2012 was denied on October 2, 2012 per BEM 260/261, with a hearing request on October 10, 2012.
- 2. Vocational factors: Age 12th grade education, and past 15-year work experience as an unskilled factory worker and semi-skilled farm worker.
- 3. Claimant's last employment ended in 2010.
- 4. Claimant's medically diagnosed disorders are lower back pain, paranoia, delusions, right hand numbness, and anxiety. (DHS Exhibit A, Pg. 290).
- Claimant's disabling symptoms are paranoi a, delusions, and hallucinations; and physically chronic right hand numbness, low back pain, and two toes on each foot in winter and otherwise intermittent in warmer weather.
- 6. Medical reports of exams state the claimant on:

- a. February 7, 2012: Has a *normal* motor; that he is orientated in a II spheres; that his c oncentration-attention is *appropriate*; that his mood, thought processes, are *unremarkable*; that his memory, insight, and judgment are *appropriate*; and that his in telligence is *average*. (DHS Exhibit A, Pgs. 81-83)
- b. March 26, 2012: Has a *normal* motor; that he is or iented in a ll spheres; that his c oncentration-attention is *appropriate*; that his mood, thought proces ses, and memory are all *appropriate*; that he is of *average* intelligence; that hi s insight and judgment are *appropriate* and *mild*; and that he had a GAF score of 60. (DHS Exhibit A, Pgs. 92-96).
- 7. State Hearing Review Team decision dated December 11, 2012 states the Claimant's impairments do not meet/equal a Social Se curity listing for the required duration. (DHS Exhibit A, Pg. 290).

CONCLUSIONS OF LAW

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) admin isters the SDA program pursuant to MCL 400.10, et seq., and MAC R 400.3151-400.3180. Department polic ies are found in the Bridge es Administrative Manual (BAM), the Bridges Elig ibility Manual (B EM) and the Bridges Reference Manual (BRM).

The Adult Medical Program (AMP) is established by Title XXI of the Social Security Act; (1115)(a)(1) of the Social Security Act, and is administered by the Department of Human Services (DHS or department) pursuant to MCL 400.10, *et seq*. Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Bridges Reference Manual (BRM).

Facts above are undisputed.

DISABILITY

A person is disabled for SDA purposes if he:

- . receives other specified disability-related benefits or services, or
- . resides in a qualified S pecial Living Arrangement facility, or
- is certified as unable to work due to mental or physical disability f or at least 90 d ays from the onset of the disability.

 is diagnos ed as hav ing Ac quired Immunodeficiency Syndrome (AIDS).

If the client's circumstances change so that the basis of his/her disability is no longer valid, det ermine if he/she meets any of the other disability criteria. Do NOT simply initiate case closure. BEM, Item 261, p. 1.

...We follow a set order to determine whether you are disabled. We review any current work ac tivity, the severity of your impairment(s), your residual functional capacity, your past work, and your age, education and work experience. If we can find that you are disabled or not disabled at any point in the review, we do not review your claim further.... 20 CFR 416.920.

The burden of proof is on the claimant to establish disability by the objective medical evidence of record that he is disabled in accordance with the five step sequentia I evaluation below. ...20 CFR 416.912(a).

The burden of proof shifts to the DHS at step five20 CFR 416.994 (b)(1)(v).

Acceptable medical verification sources about your impairments are by an M.D. or D.O. or fully licensed psychologist. BEM260. Medical reports would include:

- Your ability to do work-re lated activities such as sitting, standing, moving ab out, lifting, carrying, handling objects, hearing, speaking, and traveling.
- In cases of mental impairments, your ability to reason or make occupational, personal, or social adjustments. ...20 CFR 416.913(a)(b)(1) and (2).

When determining disability, the federal regulations are used as a guideline and require that several considerations be analyzed in sequentia I order. If dis ability can be ruled out at any step, analysis of the next step is <u>not</u> required. These steps are:

- Does the client perf orm S ubstantial Gainful Activity (SGA)? If yes, the client is ineligible for MA. If no, the analysis continues to Step 2. 20 CFR 416.920(b).
- 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 analysis c ontinues to Step 3. 20 CF R 416.920(c).

- 3. Does the impairment appear on a spec ial listing of impairments or are the cli ent's symptoms, signs, and laboratory findings at least eq uivalent in s everity to the set of medical findings specified for the listed impairment? If no, the analys is 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).

Step 1, dis ability is not denied. The objective medical evidence of record established the Claim and has not been engaged in substantial gainful activities s ince 201 0. Therefore the sequential evaluation is required to continue to the next step.

Step 2, disability is denied. The objective medical evidence of record, on date of application, does not establish the Claimant's significant functional incapacity, based on the deminimus standard, to perform basic work activities due to a mental/sever ephysical impairment in combination for the required one year continuous duration, as defined below.

Severe/Non-Severe Impairment

...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 di sabled. We will not consider your age, education, and work experience. 20 CFR 416.920(c).

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

Basic w ork activities. When we talk about basic work activities, we m ean the abilities and aptitudes necessary to do most jobs. Examples of these include:

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- 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).

The medic al reports of record are mostly examination, diagnostic, treatment and progress reports. They do not provide medical assessments of Claimant's basic work limitations for the required duration. Stated differently, how do the Claimant's medically diagnosed disorders significantly incapacitate her functional ability to perform basic work activities for the required duration? Do the disorders impair the Claimant's ability slightly, mildly, moderately (non-severe impairment, as defined above) or severely, as defined above?

The claimants disabling symptoms (Findings of Fact #5) are not supported by the objective medical evidence of record (Findings of Fact #6).

The medical evidence state the Claimant has mild insight and judgment (not severe).

In March, 2012 the claimant had a GAF score of 60. This is considered a menta I impairment of moderate severity (not-sever e) with occ upational function. DSM IV (4 th edition-revised).

Therefore, the sequential evaluation is required to stop at Step 2.

Therefore, claimant has not sustained her defined above, by the competent, material record. bur den of proof to establish disability, as and substantial evidence on the whole

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusion sof law, decides disability was not medically established.

Accordingly, MA-P denial is **UPHELD** and so ORDERED.

William A. Sundquist
Administrative Law Judge

For Maura D. Corrigan, Director Department of Human Services

Date Signed: April 5, 2013

Date Mailed: April 5, 2013

NOTICE: Administrative Hearings may or der a re hearing 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 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 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.

WAS/hj

CC:

