

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2013-67118  
Issue No.: 2009, 4009  
Case No.: [REDACTED]  
Hearing Date: October 2, 2014  
County: Saginaw

**ADMINISTRATIVE LAW JUDGE:** Aaron McClintic

**HEARING DECISION**

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, a telephone hearing was held on October 2, 2014, from Lansing, Michigan. Participants on behalf of Claimant included Claimant and a witness, [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

**ISSUE**

Whether the Department properly determined that Claimant was not disabled for purposes of the Medical Assistance (MA) and State Disability Assistance (SDA) benefit programs?

**FINDINGS OF FACT**

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

1. Claimant applied for MA-P and SDA on June 7, 2013
2. The Medical Review Team denied the application on August 23, 2013.
3. Claimant filed a request for hearing on September 5, 2013, regarding the MA and SDA denials.
4. On November 4, 2013, the State Hearing Review Team denied Claimant's appeal because the medical evidence of record does not document a mental/physical impairment that significantly limits the Claimant's ability to perform basic activities
5. A telephone hearing was held on October 2, 2014.

6. Claimant is 5' 4" tall and weighs 245 pounds.
7. Claimant is ■ years of age.
8. Claimant's impairments have been medically diagnosed as back pain, migraines, PTSD.
9. Claimant has the following symptoms: pain, fatigue, memory and concentration problems, crying spells, panic attacks.
10. Claimant completed a 4-year college degree and a master's in social work.
11. Claimant is able to read, write, and perform basic math skills.
12. Claimant is not working. Claimant last worked in July 2011 as a child protection worker. Claimant previously worked as a nanny and cashier.
13. Claimant lives alone.
14. Claimant testified that she cannot perform some household chores.
15. Claimant takes the following prescribed medications:
  - a. Atenolol
  - b. Norvasc
  - c. Flexeril
  - d. Ultram
  - e. Elavil
  - f. Prilosec
  - g. Neurontin
  - h. Naproxen
  - i. Effexor
  - j. Tramadol
  - k. Loratidine
  - l. Levothyroxine
  - m. Klonopin
16. Claimant testified to the following physical limitations:
  - i. Sitting: 3-4 minutes
  - ii. Standing: 1-2 minutes
  - iii. Walking: 1 block
  - iv. Bend/stoop: difficulty
  - v. Lifting: 8 lbs.
  - vi. Grip/grasp: no limitations

17. Claimant testified to experiencing pain, at a high level of 6-7, on an everyday basis with some pain, always present, at a low level of 2-3.
18. Claimant's appeal was previously DISMISSED for failing to appear at a scheduled hearing. That DISMISSAL was VACATED on September 12, 2014, after Claimant submitted a letter asserting that she did not receive notice of the original hearing.
19. In Medication Review notes from [REDACTED], Claimant was found to have a GAF score of 50 with diagnoses of back pain, major depression, recurrent severe, PTSD, generalized anxiety disorder and personality disorder.
20. In a Medical Consultation dated [REDACTED] the examining physician found the following: "I would recommend that [REDACTED] be restricted from lifting more than 10 pounds frequently, 20 pounds occasionally, she should not do any frequent bending or twisting, and she should be given a position change briefly for every 25 minutes of prolonged sitting or standing."
21. In a Mental Status Examination dated [REDACTED], Claimant was found to have a GAF score of 55 with diagnosis of dysthymic disorder.
22. In a discharge summary dated [REDACTED], Claimant was found to have a GAF score of 50 with diagnoses of major depression and generalized anxiety disorder.
23. At hearing, the record was extended to gather medical records. Claimant agreed to this and waived timeliness standards.
24. Updated medical information was received and was considered in making this determination.
25. Claimant's September 2012 Social Security Administration application was denied, and Claimant appealed in May 2013. Claimant received an unfavorable decision on September 8, 2014. This was a final determination and covered the time period subject to this appeal.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family

Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, was established by 2004 PA 344. The Department administers the SDA program pursuant to 42 CFR 435, MCL 400.10 *et seq.* and Mich Admin Code, Rules 400.3151 – 400.3180. A person is considered disabled for SDA purposes if the person has a physical or mental impairment which meets federal Supplemental Security Income (SSI) disability standards for at least ninety days. Receipt of SSI benefits based on disability or blindness, or the receipt of MA benefits based on disability or blindness, automatically qualifies an individual as disabled for purposes of the SDA program.

Pursuant to Federal Rule 42 CFR 435.540, the Department uses the Federal Supplemental Security Income (SSI) policy in determining eligibility for disability under the MA-P program. Under SSI, disability is defined as:

...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.

Federal regulations require that the Department use the same operative definition for “disabled” as used for Supplemental Security Income (SSI) under Title XVI of the Social Security Act. 42 CFR 435.540(a).

“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.

In determining whether an individual is disabled, 20 CFR 416.920 requires the trier of fact to follow a sequential evaluation process by which current work activity, the severity of the impairment(s), residual functional capacity, and vocational factors (i.e., age, education, and work experience) are assessed in that order. When a determination that an individual is, or is not, disabled can be made at any step in the sequential evaluation, evaluation under a subsequent step is not necessary.

First, the trier of fact must determine if the individual is working and if the work is substantial gainful activity. 20 CFR 416.920(b). In this case, the Claimant is not working. Therefore, the Claimant is not disqualified at this step in the evaluation.

The second step to be determined in considering whether the Claimant is considered disabled is the severity of the impairment. In order to qualify the impairment must be considered severe, which is defined as an impairment which significantly limits an

individual's physical or mental ability to perform basic work activities. Examples of these include:

1. Physical functions such as walking, standing, sitting, lifting, pushing, 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).

In this case, the Claimant's medical evidence of record supports a finding that Claimant has significant physical and mental limitations upon Claimant's ability to perform basic work activities such as walking, standing, sitting, lifting, pushing, pulling, reaching, carrying, or handling. Medical evidence has clearly established that the Claimant has an impairment (or combination of impairments) that has more than a minimal effect on the Claimant's work activities. See Social Security Rulings: 85-28, 88-13, and 82-63.

In the third step of the analysis, the trier of fact must determine if the Claimant's impairment (or combination of impairments) is listed in Appendix 1 of Subpart P of 20 CFR, Part 404. This Administrative Law Judge finds that the Claimant's medical record does not support a finding that the Claimant's impairment(s) is a "listed impairment" or equal to a listed impairment. See Appendix 1 of Subpart P of 20 CFR Part 404, Part A. Listings 12.04 and 1.04 were considered.

The person claiming a physical, or mental, disability has the burden to establish it through the use of competent medical evidence from qualified medical sources such as clinical/laboratory findings, diagnosis/prescribed treatment, prognosis for a 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 CFR 416.913. A conclusory 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 416.927.

The fourth step of the analysis to be considered is whether the Claimant has the ability to perform work previously performed by the Claimant within the past 15 years. The trier of fact must determine whether the impairment(s) presented prevent the Claimant from doing past relevant work. In the present case, the Claimant's past employment was as a child protection worker. Working as child protection worker, as described by Claimant at hearing, would be considered sedentary work. The Claimant's impairments

would not prevent her from doing past relevant work. Claimant's testimony regarding the severity of her limitations was not supported by substantial medical evidence.

Therefore, Claimant is found to NOT be disabled. Claimant Social Security appeal was denied on September 8, 2014. Claimant did not present any proof that this final determination was further appealed. Since this was a final determination that was not appealed, that unfavorable decision is binding on this appeal and could also have served as the basis for upholding the Department's determination.

**DECISION AND ORDER**

Accordingly, the Department's decision is hereby **AFFIRMED**.



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**Aaron McClintic**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: **2/25/2015**

Date Mailed: **2/25/2015**

AM/jaf

**NOTICE OF APPEAL**: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS **MAY** order a rehearing or reconsideration on its own motion.

MAHS **MAY** grant a party's Request for Rehearing or Reconsideration when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The party requesting a rehearing or reconsideration must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P.O. Box 30639  
Lansing, Michigan 48909-07322

Cc:

