

RICK SNYDER GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR



Date Mailed: October 27, 2017 MAHS Docket No.: 17-009317

Agency No.: Petitioner:

#### **ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie**

### **HEARING DECISION**

Following Petitioner'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. After due notice, a telephone hearing was held on September 5, 2017, from Michigan. Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by Facilitator.

### **ISSUE**

Whether the Department properly determined that Petitioner was not disabled for purposes of State Disability Assistance (SDA) benefits?

# FINDINGS OF FACT

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

- 1. On Petitioner applied for SDA.
- 2. On \_\_\_\_\_\_, the Medical Review Team (MRT) denied Petitioner's application for SDA per BEM 261 because the nature and severity of Petitioner's impairments would not preclude work activity at the above stated level for 90 days and is capable of performing other work under Medical Vocation Grid Rule 202.10 per 20 CFR 416.920(f).
- 3. On section of the Department Caseworker sent Petitioner a notice that her application was denied.

4.	On the Department received a hearing request from Petitioner, contesting the Department's negative action.
5.	Petitioner is a 54-year-old woman whose date of birth is Petitioner is 6' tall and weighs 210 pounds. Petitioner completed High School and 1 year in trade school for a cosmetology license. Petitioner can read and write and do basic math. Petitioner was last employed as a hairdresser for the past 26 years that ended in May or June 2017 where she still worked, but on a part time basis as a hairdresser.
6.	Petitioner's alleged impairments are degenerative disc disease, swelling ankles, right side goes numb, severe varicose veins, bleeding ulcers, anxiety, and severe arthritis in the lower right back.
7.	Petitioner was seen for an independent medical examination from on She had a history of a bleeding gastric ulcer and chronic pain of the lumbar spine. Her blood pressure was elevated at 146/94. Her gait was normal, but she does use an assistive device to ambulate of a cane. She had limited range of motion of the lumbar spine and bilateral shoulders. Petitioner had decreased bilateral grip strength at 3/5. She had moderately difficulty squatting due to pain. Department Exhibit 1, pgs. 29-33.
8.	On medical examination at about anxiety and depression. Petitioner walked slowly and appeared off balance. There was no evidence of a severe thought disorder or risk factors. She was diagnosed with general anxiety disorder. Her prognosis was guarded due to her chronic health problems. She was able to manage her benefit funds. Petitioner is able to understand, remember, and complete simple and repetitive tasks. In regard to complex tasks, she may complete them at a mild to moderately decreased rate of pace, due to decrease in concentration, supported by anxiety. Socially, Petitioner appears to be able to interact appropriately. Department Exhibit 1, pgs. 24-27.
9.	On, Petitioner was seen by her treating psychiatrist for a medication review from the She had moderate improvement where decided improvement and partial remission of symptoms with no side effects. Her medications were changed as medically required. There was no evidence of a severe thought disorder or risk factors. Therapy has helped her cope and handle things. She believes that she needs medication for her anxiety. She feels like her thoughts are all over the place and difficulty finishing tasks. Petitioner was diagnosed with depression and anxiety. Department Exhibit 1, pgs. 112-116.
10.	On, Petitioner was admitted to with a discharge date of Her discharge diagnosis was acute upper

GI hemorrhage, large gastric ulcer, severe anemia, episode of syncope, GERD, musculoskeletal pain, hypertension, anxiety, and history of multiple gastric ulcers. She was treated as medically required. No further bleeding was noted. Petitioner was started on Nexium and advised to avoid NSAIDs. She was stable on discharge. Department Exhibit 1, pgs. 190-194.

#### **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 State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, was established by 2004 PA 344. The Department administers the SDA program purusant 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 impariment 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.

The Department conforms to State statute in administering the SDA program.

2000 PA 294, Sec. 604, of the statute states:

Sec. 604. (1) The department shall operate a state disability assistance program. Except as provided in subsection (3), persons eligible for this program shall include needy citizens of the United States or aliens exempted from the supplemental security income citizenship requirement who are at least 18 years of age or emancipated minors meeting 1 or more of the following requirements:

- (a) A recipient of supplemental security income, social security, or medical assistance due to disability or 65 years of age or older.
- (b) A person with a physical or mental impairment which meets federal supplemental security income disability standards, except that the minimum duration of the disability shall be 90 days. Substance abuse alone is not defined as a basis for eligibility.

Pursuant to Federal Rule 42 CFR 435.540, the Department uses the Federal Supplemental Security Income (SSI) policy in determining eligibility for disability. 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.

A set order is used to determine disability. Current work activity, severity of impairments, residual functional capacity, past work, age, or education and work experience are 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.

Medical evidence may contain medical opinions. Medical opinions are statements from physicians and psychologists or other acceptable medical sources that reflect judgments about the nature and severity of the impairment(s), including symptoms, diagnosis and prognosis, what an individual can do despite impairment(s), and the physical or mental restrictions. 20 CFR 416.927(a)(2).

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).

For mental disorders, severity is assessed in terms of the functional limitations imposed by the impairment. Functional limitations are assessed using the criteria in paragraph (B) of the listings for mental disorders (descriptions of restrictions of activities of daily living, social functioning; concentration, persistence or pace; and ability to tolerate increased mental demands associated with competitive work). 20 CFR, Part 404, Subpart P, Appendix 1, 12.00(C).

The residual functional capacity is what an individual can do despite 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 classify 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.

Pursuant to 20 CFR 416.920, a five-step sequential evaluation process is used to determine disability. An individual's current work activity, the severity of the impairment, the residual functional capacity, past work, age, education and work experience are evaluated. If an individual is found disabled or not disabled at any point, no further review is made.

The first step is to determine if an individual is working and if that work is "substantial gainful activity" (SGA). If the work is SGA, an individual is not considered disabled regardless of medical condition, age or other vocational factors. 20 CFR 416.920(b).

Secondly, the individual must have a medically determinable impairment that is "severe" or a combination of impairments that is "severe." 20 CFR 404.1520(c). An impairment or combination of impairments is "severe" within the meaning of regulations if it significantly limits an individual's ability to perform basic work activities. An impairment or combination of impairments is "not severe" when medical and other evidence establish only a slight abnormality or a combination of slight abnormalities that would have no more than a minimal effect on an individual's ability to work. 20 CFR 404.1521; Social Security Rulings (SSRs) 85-28, 96-3p, and 96-4p. If the Petitioner does not have a severe medically determinable impairment or combination of impairments, the Petitioner is not disabled. If the Petitioner has a severe impairment or combination of impairments, the analysis proceeds to the third step.

The third step in the process is to assess whether the impairment or combination of impairments meets a Social Security listing. If the impairment or combination of impairments meets or is the medically equivalent of a listed impairment as set forth in Appendix 1 and meets the durational requirements of 20 CFR 404.1509, the individual is considered disabled. If it does not, the analysis proceeds to the next step.

Before considering step four of the sequential evaluation process, the trier must determine the Petitioner's residual functional capacity. 20 CFR 404.1520(e). An individual's residual functional capacity is his ability to do physical and mental work activities on a sustained basis despite limitations from his impairments. In making this finding, the trier must consider all of the Petitioner's impairments, including impairments that are not severe. 20 CFR 404.1520(e) and 404.1545; SSR 96-8p.

The fourth step of the process is whether the Petitioner has the residual functional capacity to perform the requirements of his past relevant work. 20 CFR 404.1520(f). The term past relevant work means work performed (either as the Petitioner actually performed it or as is it generally performed in the national economy) within the last 15 years or 15 years prior to the date that disability must be established. If the Petitioner has the residual functional capacity to do past relevant work, then the Petitioner is not disabled. If the Petitioner is unable to do any past relevant work or does not have any past relevant work, the analysis proceeds to the fifth step.

In the fifth step, an individual's residual functional capacity is considered in determining whether disability exists. An individual's age, education, work experience and skills are used to evaluate whether an individual has the residual functional capacity to perform work despite limitations. 20 CFR 416.920(e).

Here, Petitioner has satisfied requirements as set forth in steps one and two of the sequential evaluation. However, Petitioner's impairments do not meet a listing as set forth in Appendix 1, 20 CFR 416.926 for step 3. Therefore, vocational factors will be

considered to determine Petitioner's residual functional capacity to do relevant work and past relevant work.

In the present case, Petitioner was seen for an independent medical examination from on . She had a history of a bleeding gastric ulcer and chronic pain of the lumbar spine. Her blood pressure was elevated at 146/94. Her gait was normal, but she does use an assistive device to ambulate of a cane. She had limited range of motion of the lumbar spine and bilateral shoulders. Petitioner had decreased bilateral grip strength at 3/5. She had moderately difficulty squatting due to pain. Department Exhibit 1, pgs. 29-33.

On \_\_\_\_\_\_\_\_, Petitioner underwent a psychological/psychiatric independent modical examination at \_\_\_\_\_\_\_\_. She complained about

medical examination at anxiety and depression. Petitioner walked slowly and appeared off balance. There was no evidence of a severe thought disorder or risk factors. She was diagnosed with general anxiety disorder. Her prognosis was guarded due to her chronic health problems. She was able to manage her benefit funds. Petitioner is able to understand, remember, and complete simple and repetitive tasks. In regards to complex tasks, she may complete them at a mild to moderately decreased rate of pace, due to decrease in concentration, supported by anxiety. Socially, Petitioner appears to be able to interact appropriately. Department Exhibit 1, pgs. 22-27.

On \_\_\_\_\_\_, Petitioner was seen by her treating psychiatrist for a medication review from the \_\_\_\_\_. She had moderate improvement where decided improvement and partial remission of symptoms with no side effects. Her medications were changed as medically required. There was no evidence of a severe thought disorder or risk factors. Therapy has helped her cope and handle things. She believes that she needs medication for her anxiety. She feels like her thoughts are all over the place and difficulty finishing tasks. Petitioner was diagnosed with depression and anxiety. Department Exhibit 1, pgs. 112-116.

On \_\_\_\_\_\_, Petitioner was admitted to \_\_\_\_\_\_ with a discharge date of \_\_\_\_\_\_. Her discharge diagnosis was acute upper GI hemorrhage, large gastric ulcer, severe anemia, episode of syncope, GERD, musculoskeletal pain, hypertension, anxiety, and history of multiple gastric ulcers. She was treated as medically required. No further bleeding was noted. Petitioner was started on Nexium and advised to avoid NSAIDs. She was stable on discharge. Department Exhibit 1, pgs. 190-194.

The Administrative Law Judge finds Petitioner is capable of performing at least light work. She is in therapy and taking medications for her mental impairments. There was no evidence of a severe thought disorder or risk factors. Because of her NSAIDs use, she developed a large gastric ulcer with an acute upper GI hemorrhage that required hospitalization. She was treated and released in stable condition and advised to stop taking NSAIDs on

It is the finding of this Administrative Law Judge, based upon the medical evidence and objective, physical and psychological findings that Petitioner testified that she does perform some of her daily living activities. Petitioner does feel that her condition has worsened because she has not been able to work as a hairdresser. Petitioner stated that she does have mental impairments where she is taking medication and in therapy at the Hope Network. Petitioner stopped smoking cigarettes 30 years ago, where before a pack of cigarettes lasted 2 weeks. She stopped drinking 3 years ago, where before she drank socially. She does not or has ever used illegal and illicit drugs. Petitioner did not feel there was any work she could do because she cannot sit and do hair.

At Step 4, this Administrative Law Judge finds that Petitioner has established that she cannot perform any of her prior work. She was previously employed as a hairdresser for the past 26 years that ended in May or June 2017 where she still worked, but on a part time basis as a hairdresser. Petitioner is taking medication and in therapy for her mental impairments. She had an issue with the standing to perform her job as a hairdresser. Therefore, Petitioner is not disqualified from receiving disability at Step 4. Petitioner is not capable of performing her past work. However, the Administrative Law Judge will still proceed through the sequential evaluation process to determine whether or not Petitioner has the residual functional capacity to perform some other less strenuous tasks than in her prior jobs.

The objective medical evidence on the record is insufficient that Petitioner lacks the residual functional capacity to perform some other less strenuous tasks than in her previous employment or that she is physically unable to do any tasks demanded of her. Petitioner's testimony as to her limitation indicates her limitations are non-exertional and exertional.

For mental disorders, severity is assessed in terms of the functional limitations imposed by the impairment. Functional limitations are assessed using the criteria in paragraph (B) of the listings for mental disorders (descriptions of restrictions of activities of daily living, social functioning; concentration, persistence, or pace; and ability to tolerate increased mental demands associated with competitive work)... 20 CFR, Part 404, Subpart P, App. 1, 12.00(C).

In the instant case, Petitioner testified that she has depression and anxiety. Petitioner is taking medication and in therapy for her mental impairments. See MA analysis Step 2. There was no evidence of a serious thought disorder or risk factors. Based on the independent psychiatric evaluation, she should be able to perform work.

In the final step of the analysis, the trier of fact must determine if the Petitioner's impairment(s) prevent the Petitioner from doing other work. 20 CFR 416.920(f). This determination is based upon the Petitioner's:

1. residual functional capacity defined simply as "what can you still do despite your limitations?" 20 CFR 416.945;

- 2. age, education, and work experience, 20 CFR 416.963-965; and
- 3. the kinds of work which exist in significant numbers in the national economy which the Petitioner could perform despite her limitations. 20 CFR 416.966.

The residual functional capacity is what an individual can do despite 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 classify 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. 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 defined as one which involves sitting, a certain amount of walking and standing is often necessary 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. 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 walking or standing, or when it involves sitting most of the time with some pushing and pulling of arm or leg controls. 20 CFR 416.967(b).

Medium work. Medium work involves lifting no more than 50 pounds at a time with 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 sedentary and light work. 20 CFR 416.967(c).

Heavy work. Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying of objects weighing up to 50 pounds. If someone can do heavy work, we determine that he or she can also do medium, light, and sedentary work. 20 CFR 416.967(d).

At Step 5, the Petitioner can meet the physical requirements of light work, based upon the Petitioner's physical abilities. Under the Medical-Vocational guidelines, a closely approaching advanced aged individual with a high school education, and a semi-skilled work history, who is limited to light work, is considered not disabled. 20 CFR 404, Subpart P, Appendix 2, Rule 202.14. The Medical-Vocational guidelines are not strictly applied with non-exertional impairments such as depression and anxiety. 20 CFR 404, Subpart P, Appendix 2, Section 200.00. Using the Medical-Vocational guidelines as a framework for making this decision and after giving full consideration to Petitioner's mental and physical impairments, the Administrative Law Judge finds that Petitioner could perform light work and that Petitioner does not meet the definition of disabled under the SDA program.

# **DECISION AND ORDER**

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds Petitioner not disabled for purposes of the SDA benefit program. Petitioner could perform light work and that the Petitioner does not meet the definition of disabled under the SDA program.

Accordingly, the Department's determination is **AFFIRMED**.

CF/hb

Carmen G. Fahie

Administrative Law Judge for Nick Lyon, Director

Department of Health and Human Services

**NOTICE OF APPEAL**: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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 48909-8139

DHHS	
Petitioner	