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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS
DIRECTOR

[REDACTED]
MI [REDACTED]

Date Mailed: January 3, 2020
MOAHR Docket No.: 19-010002
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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 November 13, 2019, from Lansing, Michigan. Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by Veronica Bracey, Eligibility Specialist and Cheryl Latinen, Eligibility Specialist. Department Exhibit 1, pgs. 1-367 were admitted and made a part of the record. The record was left open for additional medical evidence that was received on December 5, 2019.

ISSUE

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

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 [REDACTED], Petitioner applied for SDA.
2. On September 6, 2019, 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 202.21 per 20 CFR 416.920(f).
3. On September 11, 2019, the Department Caseworker sent Petitioner a notice that her application was denied.

4. On September 18, 2019, the Department received a hearing request from Petitioner, contesting the Department's negative action.
5. Petitioner is a [REDACTED] year-old woman whose date of birth is [REDACTED], 1974. Petitioner is [REDACTED] tall and weighs 191 pounds. Petitioner completed 8th grade of school and has a GED. Petitioner can read and write and do basic math. Petitioner was last employed as a salesperson in October 2018. She was also employed as a housekeeper, taxi driver, and personal trainer.
6. Petitioner's alleged impairments are anti-social personality disorder, borderline personality disorder, COPD, PTSD, panic disorder with agoraphobia, bipolar disorder, severe with psychotic features, and gender dysphoria.

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 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.

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 her ability to do physical and mental work activities on a sustained basis despite limitations from her 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 her 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 by her treating psychiatrist from [REDACTED] on [REDACTED], for a medication review. She was seen for a follow-up and medical case should review. She has been compliant with her medication and claimed weight gain as a side effect. Despite compliance, Petitioner has been struggling with anxiety, depression, and poor sleep due to a series of unfortunate events that happened from the time she went to Covenant for her needle lung biopsy and had complications. She continues to deny having any suicidal thoughts but admits that with multiple stressors that she is overwhelmed. Petitioner needs housing assistance, applying for Social Security, with limited social support. She has intermittent auditory and visual hallucinations that add to her anxiety and poor sleep. She has been having flashbacks and nightmares. Her medication was changed as medically needed. Her symptoms were consistent with depression with a moderate risk of harm to self and others. Her judgment was impaired by life decisions. Her mood was depressed and anxious. Her appetite was overeating resulting in weight gain. Petitioner's thinking was impaired due to attention span. She had difficulty sleeping. Her memory was recently impaired. She had reports of pain from the biopsy area where the chest tube was placed. She was diagnosed with bipolar disorder, posttraumatic stress disorder, anxiety, and gender dysphoria. Her Axis II diagnosis was borderline personality disorder. She was given a GAF of 45-55. The goals were to improve her mental and emotional health. She wanted to get her surgery and calm her mood swings. The plan was to continue therapy and medication monitoring. She was given a provisional diagnosis of severe major depression. Petitioner Exhibit 1, pgs. A-H.

On [REDACTED], the Petitioner was seen by a potential new physician to establish care. She had an essentially normal physical examination. The treating physician did note that her psychiatric behavior was normal, but she was irritable, labile with abnormal judgment/poor insight/external locus of control. Due to threats of violence if anyone were to misgender her, the physician reviewed the standards of behavioral contact at the office. Petitioner refused to comply, and they agreed this would not be a good fit for provider/patient. All information was provided to Petitioner. Request for records were completed but will not be sent as she will not continue care here. A copy of today's note will be sent to her PCP. She walked out without her papers. Department Exhibit 1, pgs. 277-280.

On [REDACTED], Petitioner underwent a psychiatric evaluation from [REDACTED]. She was on time for scheduling appointment. She is a transgender male to female who has been living as a female for the past seven years. She has been

struggling with anxiety and depression since she was six or seven years old with family trauma. She was diagnosed with depression with a low risk to self and others. Her current symptoms were insomnia, fatigue, anhedonia, increased appetite, weight gain, decreased motivation, and hallucinations. Her medications were changed as medically needed. She had impaired thinking based on attention span. She also had difficulty sleeping. She was diagnosed with bipolar disorder, generalized anxiety disorder, posttraumatic stress disorder, and gender dysphoria. Her Axis II diagnosis was borderline personality disorder and antisocial personality traits. Her GAF was 55-65. There was no evidence of a severe thought disorder or risk factors. The plan was to continue therapy and medication monitoring. She was given a provisional diagnosis of severe major depression. Petitioner Exhibit 1, pgs. I-O.

On [REDACTED], Petitioner underwent a physical examination at [REDACTED]. She is a [REDACTED]-year-old transgender person seen here today for internal medicine Social Security disability evaluation for emphysema, antisocial disorder, anxiety, and depression. She had an essentially normal physical examination. She is getting hormone therapy to make her look like a female. Because of her transgender feelings, she is being abused by many people mentally and physically. She also retaliated by becoming violent and aggressive. She has many arrests for assault and antisocial disorder. She has been in prison for threatening to kill people. She takes medication for anxiety and depression. She states that she is not suicidal or homicidal at this time, but she says she can flip any time someone asked the wrong question. She has emphysema by history. Pulmonary function test showed mild obstructive airway disease. She has a nodule in the right lower lobe and is being evaluated for lung cancer pending biopsy. She does not have any physical limitation on clinical examination today. Department Exhibit 1, pgs. 5-15.

On [REDACTED], Petitioner underwent a psychiatric examination by an independent medical evaluator. This [REDACTED]-year-old Caucasian transgender female has been diagnosed with antisocial disorder, anxiety, depression, bipolar disorder, and posttraumatic stress disorder. She has had numerous childhood traumas and was recently sexually assaulted since she moved back to Michigan in August 2018. Petitioner has nightmares on a nightly basis, flashbacks in regards to assault, and for past actions. Petitioner would demonstrate difficulty relating with coworkers and supervisors. Tasks should be simplified to start, gradually increasing in complexity. She likely would work best in a quiet environment. Her prognosis was guarded. She is able to manage her benefit funds. She was diagnosed with posttraumatic stress disorder, schizoaffective disorder, bipolar type, panic disorder, agoraphobia, social anxiety disorder, and antisocial personality disorder. There was no evidence of a severe thought disorder and risk factors. Department Exhibit 1, pgs. 21-27.

This Administrative Law Judge finds that Petitioner is not physically limited but may be mentally limited. She is in therapy and taking medications at Great Lakes Bay Health Center. She will be limited to simple and unskilled work.

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 not perform most of her daily living activities. However, the objective medical evidence in the record does not support that level of impairment. Petitioner does feel that her condition has worsened. Petitioner stated that she does have mental impairments where she is taking medication and in therapy. The Petitioner smokes one pack of cigarettes a day. She drinks alcohol. She does use illegal and illicit drugs of marijuana. Petitioner did not feel there was any work she could do.

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 salesperson in October 2018. She was also employed as a housekeeper, taxi driver, and personal trainer. Petitioner is taking medication and in therapy for her mental impairments. There was no evidence of a severe thought disorder or risk factors. She would work better in a quiet environment with limited or no contact with the public performing simple and unskilled work. Therefore, Petitioner is 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 anti-social personality disorder, borderline personality disorder, PTSD, panic disorder with agoraphobia, bipolar disorder, severe with psychotic features, and gender dysphoria. 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 simple, unskilled work in a quiet environment with limited to no contact with the public.

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, Petitioner can meet the physical requirements of work, based upon Petitioner's physical abilities. Under the Medical-Vocational guidelines, a younger aged individual with a high school equivalent education, and an unskilled work history, who is limited to work, is considered not disabled. 20 CFR 404, Subpart P, Appendix 2, Rule 204.00. The Medical-Vocational guidelines are not strictly applied with non-exertional impairments such as anti-social personality disorder, borderline personality disorder, PTSD, panic disorder with agoraphobia, bipolar disorder, severe with psychotic features, and gender dysphoria. 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 simple and unskilled 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 simple and unskilled work and 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 Robert Gordon, 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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

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

Michigan Office of Administrative Hearings and Rules
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-8139

DHHS

Kathleen Verdoni
411 East Genesee
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Saginaw County, DHHS

BSC2 via electronic mail

L. Karadsheh via electronic mail

Petitioner

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