

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Reg. No: 2010-24009
Issue No: 2009; 4031
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
April 7, 2010
Otsego County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain for Ivona Rairigh

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on April 7, 2010. Claimant personally appeared and testified. This hearing was originally held by Administrative Law Judge Ivona Rairigh. Judge Rairigh is no longer affiliated with the State Office of Administrative Hearings and Rules and this hearing decision was completed by Administrative Law Judge Landis Y. Lain by considering the record in its entirety. Claimant was represented at the hearing by his authorized representative [REDACTED]

ISSUE

Did the Department of Human Services (the department) properly deny claimant's application for Medical Assistance (MA-P), retroactive Medical Assistance (retro MA-P) and State Disability 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 December 15, 2009, claimant filed an application for Medical Assistance and State Disability Assistance benefits alleging disability.
- (2) On February 18, 2010, the Medical Review Team denied claimant's application stating that claimant could perform his prior work.
- (3) On February 19, 2010, the department caseworker sent claimant notice that his application was denied.

- (4) On March 3, 2010, claimant filed a request for a hearing to contest the department's negative action.
- (5) On March 12, 2010, the State Hearing Review Team again denied claimant's application stating in its' analysis and recommendation: the claimant was in a motor vehicle accident. He reports neck and back pain. He had tenderness in spasms without significant neurological abnormalities. The claimant's impairments do not meet/equal the intent or severity of a Social Security listing. The medical evidence of record indicates that the claimant retains the capacity to perform a wide range of at least simple unskilled light work. Therefore, based on the claimant's vocational profile of a younger individual, more than a high school education, and a history of semi-skilled and skilled work, MA-P is denied using Vocational Rule 202.21 as a guide. Retroactive MA-P was considered in this case and is also denied. SDA is denied per PEM 261 because the nature and severity of the claimant's impairments would not preclude work activity at the above stated level for 90 days.
- (6) The hearing was held on April 17, 2010. At the hearing, claimant waived the time periods and requested to submit additional medical information.
- (7) Additional medical information was submitted and sent to the State Hearing Review Team on September 20, 2010.
- (8) On September 23, 2010, the State Hearing Review Team again denied claimant's application stating in its' analysis and recommendation: there are multiple treating source opinions are not able to be afforded great weight nor statements during evaluations as claimant's own statements and activities form indicates a higher level of functioning. It is evident that the claimant does have severe conditions that would limit them to reasonably retain the ability to perform light exertional simple and repetitive tasks. The claimant's impairments do not meet/equal the intent or severity of a Social Security listing. The medical evidence of record indicates that the claimant retains the capacity to perform a wide range of light exertional simple and repetitive work. Therefore, based on the claimant's vocational profile of 47 years old, at least a high school education and a history of heavy skilled employment, MA-P is denied using Vocational Rule 202.20 as a guide. Retroactive MA-P was considered in this case and is also denied. SDA is denied per PEM 261 because the nature and severity of the claimant's impairments would not preclude work activity at the above stated level for 90 days. Listings 1.02, 1.03, 1.04, 9.02, 11.14, 12.02, 12.04, and 12.07 were considered in this determination.
- (9) On the date of hearing claimant was a 46-year-old man whose birth date is [REDACTED]. Claimant is 6' tall and weighs 160 pounds. Claimant is a

high school graduate and has a 2 year degree. Claimant is able to read and write and does have basic math skills.

- (10) Claimant last worked in April 2009 and was self-employed. Claimant also worked at [REDACTED] in the lumbar department.
- (11) Claimant alleges as disabling impairments: brain injury, depression, dizziness, graves disease, neck and back injury, and nerve damage.

CONCLUSIONS OF LAW

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Services (DHS or department) administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS or department) 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 Program Reference Manual (PRM).

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 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 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 experience. 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 laboratory findings which demonstrate a medical impairment.... 20 CFR 416.929(a).

...Medical reports should include –

- (1) Medical history.
- (2) Clinical findings (such as the results of physical or mental status examinations);
- (3) Laboratory findings (such as blood pressure, X-rays);
- (4) Diagnosis (statement of disease 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 basic work activities is evaluated. If an individual has the ability to perform basic work activities without 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).

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 your symptoms, diagnosis and prognosis, what an individual can do despite impairment(s), and the physical or mental restrictions. 20 CFR 416.927(a)(2).

All of the evidence relevant to the claim, including medical opinions, is reviewed and findings are made. 20 CFR 416.927(c).

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).

A statement by a medical source finding that an individual is "disabled" or "unable to work" does not mean that disability exists for the purposes of the program. 20 CFR 416.927(e).

When determining disability, the federal regulations require that several 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:

1. Does the client perform Substantial Gainful Activity (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 client is ineligible for MA. If yes, the analysis continues to Step 3. 20 CFR 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 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).

At Step 1, claimant is not engaged in substantial gainful activity and has not worked since 2009. Claimant is not disqualified from receiving disability at Step 1.

The subjective and objective medical evidence on the record indicates that claimant testified that he had a motor vehicle accident in 2009. Claimant testified that he lives alone in a house and he stays there for free because it's his sister's house. He does have a driver's license and only drives during the day when he absolutely has to. He does make sandwiches and doesn't really cook and he does grocery shop twice per week and he does do light cleaning in his home. He doesn't do any outside work and his hobby is reading and he walks the dog around the farm on his 10 acre farm. Claimant had no physical impairments prior to his accident and his condition has worsened and he had a head injury and is taking anti-depressants. Claimant testified that his level of pain on a scale from 1-10 without medication is an 8-9 and it decreases sometimes with his medication, but sometimes he might lie down in bed four times per day. Claimant testified that he does smoke 10-15 cigarettes per day and he stopped drinking alcohol 2 months before the hearing because of the Vicodin he was taking and the head trauma and he does not take any drugs. Claimant testified that in a typical day he drinks a cup of coffee, microwaves his food, showers, then rests because he loses his footing and balance after about 20 minutes. He walks around the farm, reads, gets up, cleans up, does laundry and simple things. He has problems with operating some appliances.

A medical form indicates that claimant does have a brain injury, depression and dizziness and he is ambulatory and he does not need special transportation, he does not need someone to come to his appointments with him, but he does need some help with meal preparation, shopping, house work, money management, and taking medications and he could not work at his usual occupation for 6-12 months and he could not work for 6-12 months (p. A2).

A December 21, 2010, physical medicine letter from [REDACTED] indicates that claimant was involved in a motor vehicle accident and since that time he has been having problems with dizziness and the inability to focus. It has impaired his ability to program and repair/remodify actions of robots which was his previous job. The dizziness is another impairment as well as some difficulty focusing, a slight photophobia that is

bothering him as well. All these factors have caused me to recommend that he go off work. He will be off work for at least 6-12 months (p. A1).

A Medical examination in the report dated March 17, 2010, indicates that the clinical impression is that the claimant is stable and that he can carry 10 pounds or less occasionally and rarely carry 25 pounds or less and he could stand or walk at least 2 hours in an 8 hour work day and he can sit less than 2 hours in an 8 hour work day and she should not drive. He could not use his upper extremities for simple grasping, reaching, pushing and pulling and fine manipulating and he could not operate foot and leg controls with either foot (p. A4-A5).

A Michigan Disability Determination Services report dated July 9, 2010, indicates that claimant was oriented to person, place, and date except for the day of the month as he was in error by two days. He repeated 5 digits forward and 4 backwards. Immediate recall was good for 3 of 3 objects with delayed recall being 0 for 3 objects. He correctly identified his birth date. He named Obama as the current president and identified preceding presidents to include Bush, Clinton and he didn't know. He named 5 large cities to include Detroit, Grand Rapids, Denver, San Francisco, and Phoenix. He couldn't identify the names of current famous people with respect to current world events he noted the oil thing. In subtracting serial 7's from 100 5 times he made one error. He correctly solved simple addition, subtraction, multiplication, and division problems. In response to the proverb, the grass is greener on the other side of the fence, he stated that people typically aren't grateful for what they have. In response to the proverb, don't cry over spilled milk, he stated learn from our mistakes. He reported that a bush and a tree are alike because they both have limbs, leaves and roots. He indicated that they are different because one is tall and one is short. If he found a stamped addressed envelope, he said that he would pick it up and put it in the mailbox. He discovered a fire in a theatre he would yell fire. His global assessment of functioning score was 60. He was diagnosed with post concussion syndrome, a cognitive disorder, adjustment disorder, and pain disorder. His prognosis would be fair and would be improved with mental health treatment and he appears to be able to manage his own benefit funds (pp. A10 – A13).

A September 7, 2010, Northern Michigan Re-integration Services letter indicates that claimant has progress with the organization and memory intervention. The depression has moderated somewhat (p. A11).

A December 23, 2009, MRI of the cervical spine without contrast indicates that claimant has a small disc protrusion type of herniation and mild degenerative disc space narrowing of C-5- C-6 on the right (p. A12).

A December 16, 2009, MRI examination of the brain with and without I V contrast indicates that the impression that claimant had a small left parietal meningioma. No evidence for an acoustic neuroma or other pathologic process of significance is identified at this time (p. A13).

There was no convincing evidence of any demyelinating disease noted. No pathologic enhancement, vascular malformation, or neurovascularity noted. Diffusion weighted image revealed no evidence of hyperacute ischemia. The pituitary gland and optic chiasm are within normal limits. The tuber cinereum and infundibulum are normal. No expansion of the pituitary fossa, or erosion of the sella turcica seen. There is normal physiologic flow void within the cavernous portions of the internal carotid arteries as well as the basilar artery. Globes and optic nerves are unremarkable. The paranasal and mastoid sinuses are well-pneumatized (p. A14).

A February 2, 2010, progress note indicates that claimant was diagnosed with anxiety disorder and chronic pains from strain injury but the examination revealed no change in strength. No tremor present other than occasionally when he closes his eyes he will shake his head, apparently unconsciously. A February 17, 2010, progress notes indicates that claimant had no changes in his strength or posture and his reflexes are normal. His cervical and lumbar strain with anxiety reaction to the motor vehicle accident was the impression (p. A15).

A physical therapy initial evaluation dated February 4, 2010, indicates that claimant exhibited normal strength through out the upper and lower extremities with moderate deficits and core stabilization, greater on the left than on the right, although, the right side seems to be tighter. He does complain of pain and an increase of paresthesia with resistance testing through the upper and lower extremities. The claimant reported wide spread sensory changes and although he was not able to differentiate joint position in sharp and dull. Light touch appears equal bilaterally. He does not have a reproduction of paresthesia with straight leg raise or slump test or with quadrant testing in a cervical spine only that the paresthesia is constant. He has fairly good rehabilitation potential. He demonstrated improved cervical extension, cervical left rotation and lumbar side bending as well as hamstring flexibility greater than 35 degrees bilaterally. The physical therapy goals were to decrease the pain at rest to 1-2 out of 10 and with activity 3-4 out of 10 (pp. A15-A16).

A December 10, 2009, consultation indicates that on physical examination claimant was 6' tall and 176 pounds. He was alert well-developed male and was pleasant. He did have a list of complaints that he referred to. His skeletal examination good range of motion throughout. No excessive crepitus noted in any joints. No synovitis or excessive spurring indicating any extensive arthritic problem. The muscular examination revealed normal and symmetric strength. No focal point atrophy. His reflexes were symmetric. Spurling's maneuvers elicited neck pain but no paresthesias. In the neurologic area phalen's are negative. Tinel's are negative. Straight leg raises are negative. His gait and station are normal (p. A18-A19).

Michigan Spine and Pain evaluation dated August 19, 2009, indicates that claimant is a certified robotics engineer which requires sitting at a computer and mechanically disassembling and assembling robots with lifting and precision work (p. 120). Vital signs: weight was 170 pounds, blood pressure is 112/80, heart rate was 68, current pain scale is 7-10. He had an appearance of no acute distress, appears stated age, well-

nourished, well-hydrated, body habit is normal. Asymmetry: none. Abnormal color: none. Erythema: none. Masses: none appreciated grossly. Grooming appears appropriate. Rash: none grossly appreciated. Lymphadenopathy: none grossly. He was alert and oriented times 3 to person place and time. He was not in acute distress. His affect was normal and his mood was appropriate. His responses were appropriate to questions. He had normal volume speech, normal spontaneity, normal rate, fluent, and coherent. In the cardiovascular area: rate and rhythm were regular. Heart sounds had no murmurs appreciated, no gallops appreciated, capillary refill was brisk. Extremities were warm. Pulses: radial pulses intact bilaterally. Edema: none grossly evident. Varicosities: none grossly evident. Breath sounds were clear to auscultation bilaterally and equal bilaterally. Good air entry bilaterally. There were no wheezes, crackles, cyanosis and breathing was unlabored. The abdomen was soft to palpation and non-tender with no rebound tenderness, and it was also non-distended. Bowel sounds were present to auscultation. Eyes were normal. Ears, nose, mouth and throat are all normal in appearance. He had a range of motion 75% limitation to extension, right side bending, left side bending and 25% limitation to flexion, right rotation, left rotation. He had pain to extension, pain to right side bending, pain to left side bending. He had some tenderness in spinal palpation. He has bilateral tenderness in the present and in the parispinal palpation. No tenderness in the trapezius and no tenderness in the occipital (p. 122). Cranial nerves II-XII were grossly intact. He could use all extremities, he had no crepitus. He had negative bilateral drop arm test. He resisted the shoulder abduction (p. 123).

This Administrative Law Judge did consider all approximately 200 pages of medical reports contained in the file in making this decision.

At Step 2, claimant has the burden of proof of establishing that he has a severely restrictive physical or mental impairment that has lasted or is expected to last for the duration of at least 12 months. There is insufficient objective clinical medical evidence in the record that claimant suffers a severely restrictive physical or mental impairment. Claimant has reports of pain in multiple areas of his body; however, there are no corresponding clinical findings that support the reports of symptoms and limitations made by the claimant. There are no laboratory or x-ray findings listed in the file. The clinical impression is that claimant is stable. There is no medical finding that claimant has any muscle atrophy or trauma, abnormality or injury that is consistent with a deteriorating condition. In short, claimant has restricted himself from tasks associated with occupational functioning based upon his reports of pain (symptoms) rather than medical findings. Reported symptoms are an insufficient basis upon which a finding that claimant has met the evidentiary burden of proof can be made. This Administrative Law Judge finds that the medical record is insufficient to establish that claimant has a severely restrictive physical impairment.

Claimant alleges the following disabling mental impairments: depression, anxiety, had closed head traumatic brain injury.

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).

There is insufficient objective medical/psychiatric evidence in the record indicating claimant suffers severe mental limitations. There is no mental residual functional capacity assessment in the record. There is insufficient evidence contained in the file of depression or a cognitive dysfunction that is so severe that it would prevent claimant from working at any job. Claimant was oriented to time, person and place during the hearing. Claimant was able to answer all of the questions at the hearing and was responsive to the questions. The evidentiary record is insufficient to find that claimant suffers a severely restrictive mental impairment. For these reasons, this Administrative Law Judge finds that claimant has failed to meet his burden of proof at Step 2. Claimant must be denied benefits at this step based upon his failure to meet the evidentiary burden.

If claimant had not been denied at Step 2, the analysis would proceed to Step 3 where the medical evidence of claimant's condition does not give rise to a finding that he would meet a statutory listing in the code of federal regulations.

If claimant had not already been denied at Step 2, this Administrative Law Judge would have to deny him again at Step 4 based upon his ability to perform his past relevant work. There is no evidence upon which this Administrative Law Judge could base a finding that claimant is unable to perform work in which he has engaged in, in the past. Therefore, if claimant had not already been denied at Step 2, he would be denied again at Step 4.

The Administrative Law Judge will continue to proceed through the sequential evaluation process to determine whether or not claimant has the residual functional capacity to perform some other less strenuous tasks than in his prior jobs.

At Step 5, the burden of proof shifts to the department to establish that claimant does not have residual functional capacity.

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).

Claimant has submitted insufficient objective medical evidence that he lacks the residual functional capacity to perform some other less strenuous tasks than in his prior employment or that he is physically unable to do light or sedentary tasks if demanded of him. Claimant's activities of daily living do not appear to be very limited and he should be able to perform light or sedentary work even with his impairments. Claimant has failed to provide the necessary objective medical evidence to establish that he has a severe impairment or combination of impairments which prevent him from performing any level of work for a period of 12 months. The claimant's testimony as to his limitations indicates that he should be able to perform light or sedentary work.

There is insufficient objective medical/psychiatric evidence contained in the file of depression or a cognitive dysfunction that is so severe that it would prevent claimant from working at any job. Claimant was able to answer all the questions at the hearing and was responsive to the questions. Claimant was oriented to time, person and place during the hearing. Claimant's complaints of pain, while profound and credible, are out of proportion to the objective medical evidence contained in the file as it relates to claimant's ability to perform work. Therefore, this Administrative Law Judge finds that the objective medical evidence on the record does not establish that claimant has no residual functional capacity. Claimant is disqualified from receiving disability at Step 5 based upon the fact that he has not established by objective medical evidence that he cannot perform light or sedentary work even with his impairments. Under the Medical-Vocational guidelines, a younger individual (age 46), with a more than high school education and an unskilled and skilled work history who is limited to light work is not considered disabled pursuant to Medical Vocational Rule 202.21.

It should be noted that claimant continues to smoke despite the fact that his doctor has told him to quit. Claimant is not in compliance with his treatment program.

If an individual fails to follow prescribed treatment which would be expected to restore their ability to engage in substantial activity without good cause there will not be a finding of disability.... 20 CFR 416.994(b)(4)(iv).

The department's Program Eligibility Manual contains the following policy statements and instructions for caseworkers regarding the State Disability Assistance program: to receive State Disability Assistance, a person must be disabled, caring for a disabled person or age 65 or older. BEM, Item 261, p. 1. Because the claimant does not meet the definition of disabled under the MA-P program and because the evidence of record does not establish that claimant is unable to work for a period exceeding 90 days, the claimant does not meet the disability criteria for State Disability Assistance benefits either

The Department has established by the necessary competent, material and substantial evidence on the record that it was acting in compliance with department policy when it determined that claimant was not eligible to receive Medical Assistance and/or State Disability Assistance.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department has appropriately established on the record that it was acting in compliance with department policy when it denied claimant's application for Medical Assistance, retroactive Medical Assistance and State Disability Assistance benefits. The claimant should be able to perform a wide range of light or sedentary work even with his impairments. The department has established its case by a preponderance of the evidence.

Accordingly, the department's decision is AFFIRMED.

Landis

/s/

Y. Lain

Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: February 22, 2010

Date Mailed: February 22, 2010

NOTICE: Administrative Hearings may order 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 Hearings 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 timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

LYL/alc

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