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

IN THE MATTER OF:

[redacted]

Reg No.: 2012-43445
Issue No.: 2009, 4031
Case No.: [redacted]
Hearing Date: June 6, 2012
Wayne County DHS (49)

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant 's request for a hearing. After due notice, a telephone hearing was conducted from Detroit, Michigan on Wednesday, June 6, 2012. The Claimant appeared and testified. [redacted] appeared on behalf of the Department of Human Services ("Department").

ISSUE

Whether the Department properly determined that the Claimant was not disabled for purposes of the Medical Assistance ("MA-P ") 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. The Claimant submitted an application for public assistance seeking MA-P and SDA benefits on October 3, 2011.

2. On March 13, 2012, the Medical Review Team ("MRT") found the Claimant not disabled. (Exhibit 1, pp. 7, 8)

3. The Department notified the Claimant of the MRT determination on March 27, 2012. (Exhibit 1, pp. 1 – 2)

4. On April 2, 2012, the Department received the Claimant's timely written request for hearing.

5. On May 10, 2012, the State Hearing Review Team ("SHRT") found the Claimant not disabled. (Exhibit 2)

6. The Claimant alleged physical disabling impairments due to back pain, Hepatitis C, kidney stones, kidney disease, urinary tract pain, bowel/bladder incontinence, and hypertension.

7. The Claimant alleged mental disabling impairments due to anxiety and depression.

8. At the time of hearing, the Claimant was [redacted] years old with a [redacted] birth date; was 5'4" in height; and weighed 202 pounds.

9. The Claimant is a college graduate and vocational training and an employment history as a security guard.

10. The Claimant's impairments have lasted, or are expected to last, continuously for a period of 12 months or longer.

CONCLUSIONS OF LAW

The Medical Assistance program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department of Human Services, formerly known as the Family Independence Agency, 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 Bridges Reference Tables ("RFT").

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). 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 his or her medical history, clinical/laboratory findings, diagnosis/prescribed treatment, prognosis for recovery and/or medical assessment of ability to do work-related activities or ability to reason and make appropriate mental adjustments, if a mental disability is alleged. 20 CFR 416.913. An individual's subjective pain complaints are not, in and of themselves, sufficient to establish disability. 20 CFR 416.908; 20 CFR 416.929(a). Similarly, conclusory statements by a physician or mental health professional that an individual is disabled or

blind, absent supporting medical evidence, is insufficient to establish disability. 20 CFR 416.927.

When determining disability, the federal regulations require several factors to be considered including: (1) the location/duration/frequency/intensity of an applicant's pain; (2) the type/dosage/effectiveness/side effects of any medication the applicant takes to relieve pain; (3) any treatment other than pain medication that the applicant has received to relieve pain; and (4) the effect of the applicant's pain on his or her ability to do basic work activities. 20 CFR 416.929(c)(3). The applicant's pain must be assessed to determine the extent of his or her functional limitation(s) in light of the objective medical evidence presented. 20 CFR 416.929(c)(2).

In order to determine whether or not an individual is disabled, federal regulations require a five-step sequential evaluation process be utilized. 20 CFR 416.920(a)(1). The five-step analysis requires the trier of fact to consider an individual's current work activity; the severity of the impairment(s) both in duration and whether it meets or equals a listed impairment in Appendix 1; residual functional capacity to determine whether an individual can perform past relevant work; and residual functional capacity along with vocational factors (i.e. age, education, and work experience) to determine if an individual can adjust to other work. 20 CFR 416.920(a)(4); 20 CFR 416.945.

If an individual is found disabled, or not disabled, at any step, a determination or decision is made with no need evaluate subsequent steps. 20 CFR 416.920(a)(4). If a determination cannot be made that an individual is disabled, or not disabled, at a particular step, the next step is required. 20 CFR 416.920(a)(4). If an impairment does not meet or equal a listed impairment, an individual's residual functional capacity is assessed before moving from step three to step four. 20 CFR 416.920(a)(4); 20 CFR 416.945. Residual functional capacity is the most an individual can do despite the limitations based on all relevant evidence. 20 CFR 416.945(a)(1). An individual's residual functional capacity assessment is evaluated at both steps four and five. 20 CFR 416.920(a)(4). In determining disability, an individual's functional capacity to perform basic work activities is evaluated and if found that the individual has the ability to perform basic work activities without significant limitation, disability will not be found. 20 CFR 416.994(b)(1)(iv). In general, the individual has the responsibility to prove disability. 20 CFR 416.912(a). An impairment or combination of impairments is not severe if it does not significantly limit an individual's physical or mental ability to do basic work activities. 20 CFR 416.921(a). The individual has the responsibility to provide evidence of prior work experience; efforts to work; and any other factor showing how the impairment affects the ability to work. 20 CFR 416.912(c)(3)(5)(6).

In addition to the above, when evaluating mental impairments, a special technique is utilized. 20 CFR 416.920a(a). First, an individual's pertinent symptoms, signs, and laboratory findings are evaluated to determine whether a medically determinable mental

impairment exists. 20 CFR 416.920a(b)(1). When a medically determinable mental impairment is established, the symptoms, signs and laboratory findings that substantiate the impairment are documented to include the individual's significant history, laboratory findings, and functional limitations. 20 CFR 416.920a(e)(2). Functional limitation(s) is assessed based upon the extent to which the impairment(s) interferes with an individual's ability to function independently, appropriately, effectively, and on a sustained basis. *Id.;* 20 CFR 416.920a(c)(2). Chronic mental disorders, structured settings, medication, and other treatment and the effect on the overall degree of functionality is considered. 20 CFR 416.920a(c)(1). In addition, four broad functional areas (activities of daily living; social functioning; concentration, persistence or pace; and episodes of decompensation) are considered when determining an individual's degree of functional limitation. 20 CFR 416.920a(c)(3). The degree of limitation for the first three functional areas is rated by a five point scale: none, mild, moderate, marked, and extreme. 20 CFR 416.920a(c)(4). A four point scale (none, one or two, three, four or more) is used to rate the degree of limitation in the fourth functional area. *Id.* The last point on each scale represents a degree of limitation that is incompatible with the ability to do any gainful activity. *Id.*

After the degree of functional limitation is determined, the severity of the mental impairment is determined. 20 CFR 416.920a(d). If severe, a determination of whether the impairment meets or is the equivalent of a listed mental disorder is made. 20 CFR 416.920a(d)(2). If the severe mental impairment does not meet (or equal) a listed impairment, an individual's residual functional capacity is assessed. 20 CFR 416.920a(d)(3).

As outlined above, the first step looks at the individual's current work activity. In the record presented, the Claimant is not involved in substantial gainful activity and, therefore, is not ineligible for disability benefits under Step 1.

The severity of the Claimant's alleged impairment(s) is considered under Step 2. The Claimant bears the burden to present sufficient objective medical evidence to substantiate the alleged disabling impairments. In order to be considered disabled for MA purposes, the impairment must be severe. 20 CFR 416.920(a)(4)(ii); 20 CFR 416.920(b). An impairment, or combination of impairments, is severe if it significantly limits an individual's physical or mental ability to do basic work activities regardless of age, education and work experience. 20 CFR 416.920(a)(4)(ii); 20 CFR 416.920(c). Basic work activities means the abilities and aptitudes necessary to do most jobs. 20 CFR 416.921(b). Examples 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.

Id.

The second step allows for dismissal of a disability claim obviously lacking in medical merit. *Higgs v Bowen,* 880 F2d 860, 862 (CA 6, 1988). The severity requirement may still be employed as an administrative convenience to screen out claims that are totally groundless solely from a medical standpoint. *Id.* at 863 *citing Farris v Sec of Health and Human Services,* 773 F2d 85, 90 n.1 (CA 6, 1985). An impairment qualifies as non-severe only if, regardless of a claimant's age, education, or work experience, the impairment would not affect the claimant's ability to work. *Salmi v Sec of Health and Human Services,* 774 F2d 685, 692 (CA 6, 1985).

In the present case, the Claimant alleges disability due to back pain, Hepatitis C, kidney stones, kidney disease, urinary tract pain, bowel/bladder incontinence, hypertension, anxiety, and depression.

On [redacted] the Claimant sought treatment for increased depressed mood. The diagnoses were major depressive disorder, recurrent, moderate, and generalized anxiety disorder. The Global Assessment Functioning ("GAF") was 55. The Claimant was placed on medication and instructed to follow up in 2 weeks.

On [redacted] the Claimant underwent a right inguinal hernia repair without complication.

On [redacted] the Claimant was admitted to the hospital with complaints of lower abdominal pain. A CT revealed subcutaneous collection. The Claimant was treated and discharged the following day with the diagnoses of cellulitis of the abdominal wall and vaginitis.

On [redacted] the Claimant was diagnosed with a cyst on the breast and hiatal hernia. The following day, the Claimant was diagnosed with gastritis, renal stone, and pancreatitis.

On [redacted] the Claimant sought treatment for right flank pain. A CT revealed a 9 mm right renal calculus and two renal calculi on the left and right kidney. The abdominal examination was benign noting a mass on her liver. The Claimant was treated and discharged with the diagnoses of right flank pain and non-obstructive nephrolithiasis.

On [redacted] the Claimant was admitted to the hospital with complaints of abdominal and back pain. A CT revealed a mass in the inferior part of her right lobe of the liver of unknown etiology. The liver was slightly enlarged. The final impressions were renal stones, pelvic inflammatory disease, suspected bacterial vaginosis, liver mass, and constipation. The Claimant was treated and discharged the following day.

On [redacted] the Claimant was diagnosed with liver cancer.

On [redacted] the Claimant was diagnosed with major depressive disorder, recurrent, moderate, and generalized anxiety. The Claimant was placed on medication.

On [redacted] the Claimant attended a medication review where she was diagnosed with major depressive disorder, recurrent, moderate, and generalized anxiety disorder.

On [redacted] a CT revealed non-obstructive uropathy and kidney stones.

On [redacted] the Claimant attended a medication review where she was diagnosed with major depressive disorder, recurrent, moderate, and generalized anxiety. The Claimant's medication was increased.

On [redacted] the Claimant attended a medication review where the diagnoses and medication remained unchanged.

On [redacted] a CT of the abdomen confirmed kidney stones.

On [redacted] the Claimant attended a medication review. The diagnoses remained the same and the Claimant's medication was increased.

On [redacted] the Claimant attended a medication review. The diagnoses and medication remained the same.

On [redacted] a CT revealed stable appearing hemangioma in the inferior tip of the liver; cholelithiasis without evidence of cholecystitis; bilateral nephrolithiasis without hydronephrosis; and no evidence of appendicitis.

On [redacted] the Claimant was admitted to the hospital with complaints of right lower quadrant pain. The Claimant was treated and discharged the following day with the diagnoses of abdominal pain (resolved) and history of prior right inguinal herniorrhaphy with possible mesh removal required in the future.

On [redacted] the Claimant was diagnosed with diabetes mellitus, entrapment neuropathy, hypertension, partial splenectomy, and right inguinal hernia.

On [redacted] the Claimant underwent a neurectomy of right ilioinguinal nerve without complication.

On [redacted] the Claimant presented to the emergency room with post-operative pain. The Claimant was treated and provided pain medication and discharged on stable condition.

On [redacted] the Claimant attended a medication review. The diagnoses remained the same but her medication was increased.

On [redacted] the Claimant attended a medication review. The diagnoses and medication remained unchanged.

On [redacted] the Claimant sought treatment for right groin pain at wound site with foul smelling discharge.

On [redacted] the Claimant attended a follow-up appointment where her incision was opened to allow for the drainage.

On [redacted] the Claimant attended a follow-up appointment following the removal of mesh from the prior hernia repair. The procedure failed to get rid of the Claimant's pain.

On [redacted] the Claimant attended a medication review. The diagnoses were the same; however, her medication was increased.

On [redacted] an ultrasound revealed no obstructive uropathy and non-obstructing multifocal right renal calcifications.

On [redacted] the Claimant attended a follow-up appointment where the medication and diagnoses remained the same.

On [redacted] the Claimant was treated for chronic back pain.

In addition to the above, progress notes from appointments cove ring the period from [redacted] were submitted which document treatment/diagnoses of hypertension, abdo minal pain, hernia, di abetes mellitus, right side pain, and kidney stones.

As previously noted, the Claim ant bears t he burden to present sufficient objective medical evidence to s ubstantiate the alleged disabling im pairment(s). As summarized above, the Claimant has presen ted medical evidence establis hing that she does hav e some physical and mental limitations on her ability to perform basic work activities. The medical evidence has establishe d that the Claimant has an impair ment, or combination thereof, that has more than a *de minimus* effect on the Claimant's basic work activities. Further, the impairments have la sted continuous ly for twelve months; therefore, the Claimant is not disqualified from receipt of MA-P benefits under Step 2.

In the third step of the seque ntial an alysis of a d isability c laim, the trier of fact must determine if the Claimant's impairment, or co mbination of impairm ents, is listed in Appendix 1 of Subpart P of 20 CFR, Part 404. The Claim ant has alleged physical an d mental dis abling impairments due to back pain, Hepatitis C, kidney stones, kidney disease, urinary tract pain, bowel/bladder incontinence, hypertension, anxiety, and depression.

Listing 1.00 (musculoskeletal system), Listi ng 3.00 (respiratory syst em), Listing 4.00 (cardiovascular system); Listing 5.00 (dig estive system), and Listing 12. 00 (mental disorders) were considered in light of the objective findi ngs. Although the objective medical records establish phys ical and mental impairments, these records do not meet the intent and severit y requirements of a lis ting, or its equivalent. Accordingly, the Claimant c annot be found disabled or not disabled at Step 3; therefore, the Claimant' s eligibility is considered under Step 4. 20 CFR 416.905(a).

Before considering the fourth step in t he sequential analys is, a determination of the individual's residual functional capacity ("RFC") is made. 20 CFR 416.945. An individual's RFC is the most he/she can still do o n a sustained bas is despite th e limitations from the impairment(s). *Id.* The total limiting effects of all the impairments, to include those that are not severe, are considered. 20 CFR 416.945(e).

To determine the physical demands (exertional requir ements) of work in the national economy, jobs are c lassified as sedentary, light, medium, heavy, and very heavy. 2 0 CFR 416.967. Sedentary work i nvolves lifting of no more than 10 pounds at a time and occasionally lifting or carrying articles like docket files, ledgers, and small tools. 20 CFR 416.967(a). Although a sedentary j ob is defined as one which involves sitting, a certain amount of walk ing and standing is often necessary in carrying out job duties . *Id.* Jobs are sedentary if walking and standing are r equired occasionally and other sedentary criteria are met. Light work involves lifting no more than 20 pounds at a time with

frequent lifting or carrying objects weighing up to 10 pounds. 20 CFR 416.967(b). Even though 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. *Id.* To be considered capable of performing a full or wide range of light work, an individual must have the ability to do substantially all of these activities. *Id.* An individual capable of light work is also capable of sedentary work, unless there are additionally limiting factors such as loss of fine dexterity or inability to sit for long periods of time. *Id*. Medium work involves lifting no more than 50 pounds at a time with frequent lifting or carrying of objects weighing up to 25 pounds. 20 CFR 416.967(c). An individual capable of performing medium work is also capable of light and sedentary work. *Id.* Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying of objects weighing up to 50 pounds. 20 CFR 416.967(d). An individual capable of heavy work is also capable of medium, light, and sedentary work. *Id.* Finally, very heavy work involves lifting objects weighing more than 100 pounds at a time with frequent lifting or carrying objects weighing 50 pounds or more. 20 CFR 416.967(e). An individual capable of very heavy work is able to perform work under all categories. *Id.*

Limitations or restrictions which affect the ability to meet the demands of jobs other than strength demands (exertional requirements, i.e. sitting, standing, walking, lifting, carrying, pushing, or pulling) are considered nonexertional. 20 CFR 416.969a(a). In considering whether an individual can perform past relevant work, a comparison of the individual's residual functional capacity with the demands of past relevant work. *Id.* If an individual can no longer do past relevant work the same residual functional capacity assessment along with an individual's age, education, and work experience is considered to determine whether an individual can adjust to other work which exists in the national economy. *Id.* Examples of non-exertional limitations or restrictions include difficulty to function due to nervousness, anxiousness, or depression; difficulty maintaining attention or concentration; difficulty understanding or remembering detailed instructions; difficulty in seeing or hearing; difficulty tolerating some physical feature(s) of certain work settings (i.e. can't tolerate dust or fumes); or difficulty performing the manipulative or postural functions of some work such as reaching, handling, stooping, climbing, crawling, or crouching. 20 CFR 416.969a(c)(1)(i) – (vi). If the impairment(s) and related symptoms, such as pain, only affect the ability to perform the non-exertional aspects of work-related activities, the rules in Appendix 2 do not direct factual conclusions of disabled or not disabled. 20 CFR 416.969a(c)(2). The determination of whether disability exists is based upon the principles in the appropriate sections of the regulations, giving consideration to the rules for specific case situations in Appendix 2. *Id.*

In this case, the Claimant alleged disability based on back pain, Hepatitis C, kidney stones, kidney disease, urinary tract pain, bowel/bladder incontinence, hypertension, anxiety, and depression. The Claimant testified that she is able to walk short distances;

grip/grasp with some difficulty due to hand swelling; sit for 1 hour; is unable to lift/carry any weight; stand for less than 2 hours; and is unable to bend and/or squat. The objective medical findings do not document specific limitations. After review of the entire record to include the Claimant's testimony, it is found that the Claimant maintains the residual functional capacity to perform at least unskilled, limited, sedentary work as defined by 20 CFR 416.967(a). Limitations being the alternation between sitting and standing at will.

The fourth step in analyzing a disability claim requires an assessment of the Claimant's residual functional capacity ("RFC") and past relevant employment. 20 CFR 416.920(a)(4)(iv). An individual is not disabled if he/she can perform past relevant work. *Id*.; 20 CFR 416.960(b)(3). Past relevant work is work that has been performed within the past 15 years that was a substantial gainful activity and that lasted long enough for the individual to learn the position. 20 CFR 416.960(b)(1). Vocational factors of age, education, and work experience, and whether the past relevant employment exists in significant numbers in the national economy is not considered. 20 CFR 416.960(b)(3).

The Claimant's prior work history consists of work as a security guard. In light of the Occupational Code, it is found that the Claimant's work is classified as unskilled light work. If the impairment or combination of impairments does not limit physical or mental ability to do basic work activities, it is not a severe impairment(s) and disability does not exist. 20 CFR 416.920. In light of the entire record and the Claimant's RFC (see above), it is found that the Claimant is unable to perform past relevant work.

In Step 5, an assessment of the individual's residual functional capacity and age, education, and work experience is considered to determine whether an adjustment to other work can be made. 20 CFR 416.920(4)(v). At the time of hearing, the Claimant was [redacted] years old thus considered to be of advanced age for MA-P purposes. The Claimant is a college graduate with some vocational training. Disability is found if an individual is unable to adjust to other work. *Id.* At this point in the analysis, the burden shifts from the Claimant to the Department to present proof that the Claimant has the residual capacity to substantial gainful employment. 20 CFR 416.960(2); *Richardson v Sec of Health and Human Services*, 735 F2d 962, 964 (CA 6, 1984). While a vocational expert is not required, a finding supported by substantial evidence that the individual has the vocational qualifications to perform specific jobs is needed to meet the burden. *O'Banner v Sec of Health and Human Services*, 587 F2d 321, 323 (CA 6, 1978). Medical-Vocational guidelines found at 20 CFR Subpart P, Appendix II, may be used to satisfy the burden of proving that the individual can perform specific jobs in the national economy. *Heckler v Campbell*, 461 US 458, 467 (1983); *Kirk v Secretary*, 667 F2d 524, 529 (CA 6, 1981) *cert den* 461 US 957 (1983).

In this case, the objective findings reveal that the Claimant suffers from multiple physical and mental conditions to include right flank pain, back pain, diabetes mellitus, kidney

stones, liv er mass (etiology unknown), depre ssion, anxiety, pancreatic, hernia (post surgical repair), gastritis, and neuropathy. Regarding the liv er mass; the records confirm the mass with at least documentation of liver cancer. In consideration of the Claimant's age, education, wo rk experience and RF C, it is found that the Claimant maintains the physical and mental capacity t o perform sedentary work as defined by 20 CFR 416.967(a). In light of the foregoing, using the M edical-Vocational Guidelines, 20 CFR 404, Subpart P, Appendix II, as a guide, specifically Ru le 201.04, t he Claimant is found disabled for purposes of the MA-P program.

The State Disability Assist ance program, which pr ovides financial assistance for disabled persons, was established by 2004 PA 344. The Depa rtment administers the SDA program pursuant to MCL 400.10 *et seq.* and Mich Admin Code, Rules 400.3151 – 400.3180. Department policie s are found in BAM, BEM, and RFT. A person is considered disabled for SDA purposes if the person has a phys ical or menta l impairment which m eets federal SSI dis ability standards for at least ninety days. Receipt of SSI benefits based on disability or blindness, or the receipt of MA benefit s based on disab ility o r blindness automatically qua lifies an individua l as disab led for purposes of the SDA program

In this case, the Claimant is found disa bled for purposes of the MA-P program; therefore, she is found disabled for purposes of SDA benefit program.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law finds the Claimant disabled for purposes of the MA-P and SDA benefit programs.

Accordingly, It is ORDERED:

1. The Department's determination is REVERSED.

2. The Department shall initiate processing of the October 3, 2011 application to determine if all other non-m edical criteria are met and inform the Claimant of the determination in accordance with Department policy.

3. The Department shall supplement for lo st benefits (if any) that the Claimant was entitled to receiv e if otherwise el igible and qualified in acc ordance with Department policy.

4. The Department shall review the Claimant's continued eligibility in July 2013 in accordance with Department policy.

Colleen M. Mamelka

Colleen M. Mamelka
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: June 20, 2012

Date Mailed: June 20, 2012

NOTICE: Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (60 days for FAP cases)

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt 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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
  - misapplication of manual policy or law in the hearing decision,
  - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
  - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at
Michigan Administrative Hearings
Re consideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

2012-43445/CMM

CMM/cl

cc: [redacted]