

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2012 66534
Issue No.: 2009,
Case No.: [REDACTED]
Hearing Date: October 29, 2012
DHS County: Oakland (04)

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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, an in person hearing was held in Pontiac, Michigan, on October 29, 2012. The Claimant appeared and testified. [REDACTED] the Claimant's Authorized Hearing Representative (AHR), also appeared on behalf of the Claimant. [REDACTED] Assistance Payments Supervisor, 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") 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. The Claimant submitted an application for public assistance seeking Medical Assistance (MA-P) and Retro MA-P (February 2012) benefits on April 3, 2012.
2. On July 2, 2012 the Medical Review Team ("MRT") found the Claimant not disabled. (Exhibit 1)
3. The Department notified the Claimant of the MRT determination on July 3, 2012.

4. On July 18, 2012 the Department received the Claimant's timely written request for hearing.
5. On November 4, 2012 the State Hearing Review Team ("SHRT") found the Claimant not disabled. (Exhibit 2)
6. An Interim Order was issued on November 9, 2012 ordering that the Department obtain additional medical information for review.
7. The Medical Evidence was submitted to the State Hearing Review Team on January 31, and February 22, 2013; and on March 18, 2013 the SHRT found the Claimant not disabled.
8. The Claimant alleged physical disabling impairments due to diabetes, cataract in both eyes, a limp secondary to a fractured ankle, and a broken wrist fracture.
9. The Claimant has alleged mental disabling impairment(s) including major depression, and post traumatic stress disorder.
10. At the time of hearing, the Claimant was [REDACTED] years old with a [REDACTED] birth date. The Claimant is not [REDACTED] years of age. The Claimant was 5'11" in height; and weighed 190 pounds.
11. The Claimant went through high school and completed one year of college. The Claimant's employment has consisted of serving as a cook preparing meals and food preparation. Claimant also was a production operator in a manufacturing setting standing all day and making and lifting car parts weighing 25 pounds. Claimant also worked in a fast food restaurant cooking, cashiering, dishwashing and doing food preparation.
12. The Claimant's impairments have lasted or are expected to last for 12 months or more duration.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department, 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 Manual ("BRM").

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 413.913. 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 (e.g., 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 to 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 impairment does not meet or equal a listed impairment, an individual's residual functional capacity is assessed before moving from Step 3 to Step 4. 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 945(a)(1). An individual's residual

functional capacity assessment is evaluated at both Steps 4 and 5. 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 are 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.*

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 916.920(a)(4)(ii); 20 CFR 916.920(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 916.920(a)(4)(ii); 20 CFR 916.920(c). Basic work activities means the abilities and aptitudes necessary to do most jobs. 20 CFR 916.921(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).

The Claimant has alleged physical impairments due to diabetes, cataract in both eyes, a limp secondary to a fractured ankle, and a broken wrist fracture.

The Claimant alleges mental disabling impairment due to major depression and post traumatic stress disorder.

The summary of the Claimant's medical evidence follows.

An eye examination report dated [REDACTED] was reviewed and indicated that the Claimant had cataracts and underwent cataract surgery indicating that Claimant's vision is 20/20. That chief diagnosis was due to cataracts.

The Claimant began therapy on [REDACTED] and was seen for depression and sleep problems, as he reported bad dreams and flashback to his accident when he broke his wrist and leg roller skating. The Claimant's evaluation noted he was disheveled, his attitude was guarded, he was hypoactive, his affect was worrisome and blunted. The Claimant's mood was worrisome, sad and apathetic, anxious, depressed and irritable. Thought process was noted as cognitive slowing. Judgment and insight were left open for evaluation with a question mark. The evaluator was an M.D. The GAF score was 38, noted borderline intellectual functioning and mixed personality disorder was noted.

A DHS 49 D was also completed by the examining Doctor on the same date. At that time the diagnosis was major depressive disorder, and post-traumatic stress disorder, rule out borderline intellectual functioning and mixed personality disorder, the GAF score was 38. The report also noted that Claimant has pain and physical limitation. A DHS 49 was also completed and found the Claimant was markedly limited in all categories except for the ability to ask simple questions or request assistance. Under the notes the doctor noted that "he is unable to maintain persistence, performance, pace in a work-like setting.

A Medical Examination Report was completed [REDACTED]. The Claimant had been previously seen on [REDACTED]. The clinical impression was that Claimant was improving. The evaluation noted that Claimant need assistance in his household and ambulation aid. It noted decreased right ankle range of motion with sensation intact. The evaluation was based on review of an x-ray noting the bone was healing. This report was 2 months post surgery for tri malleolar ankle fracture and wrist fracture both right.

On [REDACTED] the Claimant was admitted to the hospital with an impacted comminuted fracture of the distal right radius with also a fracture of the ulnar styloid, partially impacted comminuted fracture of the distal right radius of the forearm with minimal dorsal and lateral displacement of the distal fracture fragment. Right ankle showed interval internal fixation of the trimalleolar fracture low fibular fracture.

On [REDACTED] a consultative psychiatric examination was conducted. The Examiner concluded that Claimant was diagnosed with adjustment disorder and anxiety. The report Impressions noted a long history of criminal behavior and noted that Claimant is on the Sexual Offender List which places a lot of limits on job opportunities and trust in the community. The Claimant's cognitive functions are intact. The examiner found that the core of his problems is the physical injury. He fits the criteria for adjustment disorder with anxiety which is directly related to his injuries. The GAF score was 64. Claimant's mental ability to relate to others, including fellow workers and supervisors, is within average limits. He would fare well in a small group setting with

defined goals. Claimant's ability to understand, remember and carry out tasks does not appear to be significantly impaired. He should have little or no difficulty with familiar routine tasks involving the performance of multiple steps. Claimant's ability to maintain attention, concentration, persistence and pace to perform routine tasks is mildly impaired. He is preoccupied with his pain and may not be able to maintain focus effectively. Lastly, Claimant's mental ability to withstand the stress and pressures associated with day-to-day work activity is at least mildly impaired. He is anxious about his condition and does not always deal with situational stressors appropriately.

As previously noted, the Claimant bears the burden to present sufficient objective medical evidence to substantiate the alleged disabling impairment(s). As summarized above, the Claimant has presented some medical evidence establishing that he does have some physical limitations on his ability to perform basic work activities. The medical evidence has established that the Claimant has an impairment, or combination thereof, that has more than a *de minimis* effect on the Claimant's basic work activities. Further, the impairments have lasted continuously for twelve months; therefore, the Claimant is not disqualified from receipt of MA-P benefits under Step 2.

In the third step of the sequential analysis of a disability claim, the trier of fact must determine if the Claimant's impairment, or combination of impairments, is listed in Appendix 1 of Subpart P of 20 CFR, Part 404.

Listings regarding 1.00 Musculoskeletal System, specifically Listing 1.02 Major Disorder of a Joint, (due to any cause) was not met due to the Claimant still has the ability to ambulate and thus the listing was not met. Listing 2.04 Affective Disorders (depression), 1204 was reviewed and considered; however, based on the evaluation that was done on the basis of only one visit, it is determined that the records were not complete. It is however noted that the examiner did find that the Claimant was severely limited in pace, persistence or performance in a work-like setting and was markedly limited in all categories except the ability to ask simple questions and request assistance. Although the Claimant indicated that he had eye problems due to cataracts and diabetes health problems, the medical evidence submitted with regard to the eye examination and cataract laser surgery would not require a finding of disability as the condition is resolved. Likewise, no medical evidence with regards to ongoing problem with diabetes was noted. Based upon the available medical evidence, it was determined that none of the listings were met and thus the Claimant is found not disabled at Step 3, and thus analysis of disability under Step 4 is required.

The fourth step in analyzing a disability claim requires an assessment of the claimant's residual function capacity (RFC) and past relevant work. 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 are not considered. 20 CFR 416.960(b)(3). RFC is assessed based on impairment(s) and any related symptoms, such as pain, which may cause physical and mental limitations that affect what can be done in a work setting. RFC is the most that can be done, despite the limitations.

To determine the physical demands (exertional requirements) of work in the national economy, jobs are classified as sedentary, light, medium, heavy, and very heavy. 20 CFR 416.967.

Sedentary work involves 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 job is defined as one which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. *Id.* Jobs are sedentary if walking and standing are required 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 additional 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, e.g., 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 to the demands of past relevant work must be made. *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 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 (e.g., 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.*

The Claimant's prior work history consists of employment of serving as a cook preparing meals and food preparation. Claimant also was a production operator in a manufacturing setting standing all day and making and lifting car parts weighing 25 pounds. Claimant also worked in a fast food restaurant cooking, cashiering, dishwashing and doing food preparation. All these jobs required that the Claimant be on his feet all day. The manufacturing job required stooping, lifting and moving heavy crates and using both hands to make the parts, lift and package them. The Claimant's work as a cook required using his hands for food prep and Claimant is right handed and the wrist that was fractured was his right wrist. He currently wears a wrist brace and credibly testified that he cannot write for more than five minutes and cannot type but can use a fork and has minimal range of motion. The Claimant's past relevant work would be characterized as medium to light and unskilled to semi-skilled. In light of the medical evidence and the observation at the hearing that the Claimant walks with a limp and his ankle swells when standing and wears a soft brace, it is determined that the Claimant cannot perform his past relevant work.

Claimant's past relevant work was semi-skilled and unskilled and the rigor of his work is characterized as medium to light work. In light of the Claimant's testimony and records, and in consideration of the Occupational Code, the Claimant's prior work is classified as semi-skilled light and medium work.

The Claimant credibly testified that he can stand for 15 minutes and can sit for 15 minutes. The Claimant has problems with lifting weight with his right hand and wrist, credibly testifying that he can lift less than 10 pounds with his right hand and probably 10 pounds with both his hands. The Claimant testified that he cannot squat, and indicated that he could lift/carry 10 pounds. Unfortunately the Department did not have the DHS 49 completed in the format requested so that his treating doctor could express any limitations. The Doctor did opine that the Claimant, 3 months post-operation, had decreased range of motions and that an ambulatory aid was necessary. The doctor indicated that household assistance was necessary.

The Claimant suffers from insomnia and credibly testified to depression since before his accident when he fractured his ankle and wrist. The Claimant testified to loss of appetite and shortness with anger issues, and that his concentration was bad. He does not see friends and family and isolates himself. The examiner noted additional mood and affect indicating feelings of hopelessness and that Claimant reported bad dreams and flashback to his accident when he broke his wrist and leg roller skating. The Claimant's evaluation noted he was disheveled, his attitude was guarded, he was hypoactive, and his affect was worrisome and blunted. The Claimant's mood was sad and apathetic, anxious, depressed and irritable. Thought process was noted as cognitive slowing. Judgment and insight were left open for evaluation with a question mark. The evaluator was an M.D. The GAF score was 38, noted borderline intellectual functioning, and mixed personality disorder was noted. As regards the Claimant's mental impairments, the Claimant was found on the mental residual function capacity to be incapable of engaging and functioning in work-type activities. The consultative medical examination report was also considered but it is determined that as the Claimant is currently in treatment the medical examination done by his treating physician was given greater weight.

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 consideration of the Claimant's testimony, medical records, and current limitations, it is found that the Claimant is not able to return to past relevant work; thus, the fifth step in the sequential analysis is required.

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). The Claimant is [REDACTED] years old and, thus, is considered to be a person closely approaching advanced age for MA purposes. The Claimant attended school through the high school with one year of college. 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 evidence reveals that the Claimant suffers physical disabling impairments and mental disabling impairments. His physical impairments are due to residual pain and functional capacity due to serious fracture of his ankle and wrist which restricts his ability to stand for long periods of time and restricts the use of his dominant right hand. The Claimant has alleged mental disabling impairment(s) including major depression, and post-traumatic stress disorder. The total impact caused by the combination of medical problems suffered by the Claimant must be considered. In so doing, it is found that the combination of the Claimant's physical and mental impairments have a major effect on his ability to perform basic work activities. In light of the foregoing, it is found that the Claimant maintains the residual functional capacity for work activities on a regular and continuing basis includes the ability to meet the physical and mental demands required to perform sedentary work as defined in 20 CFR 416.967(a). After review of the entire record and using the Medical-Vocational Guidelines [20 CFR 404, Subpart P, Appendix II] as a guide, specifically Rule 201.14, it is found that the Claimant is disabled for purposes of the MA-P program at Step 5.

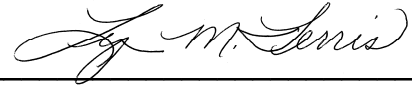
In this case, the Claimant is found disabled for purposes of the MA-P program.

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.

1. Accordingly, the Department's decision is REVERSED.
2. The Department shall initiate processing of the April 3, 2012 application and retro MA-P application (February 2012) to determine if all other non-medical criteria are met and inform the Claimant of the determination in accordance with Department policy.

3. The Department shall review the Claimant's continued eligibility in April 2014 in accordance with Department policy.



Lynn M. Ferris
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: April 9, 2013

Date Mailed: April 9, 2013

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 to:

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

2012-66543/LMF

LMF/cl

cc:

