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

IN THE MATTER OF:



Reg. No.:	15-007610
Issue No.:	4009
Case No.:	
Hearing Date:	July 2, 2015
County:	Wayne (49)

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

HEARING DECISION

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, a telephone hearing was held on July 2, 2015, from Detroit, Michigan. Participants included the above-named Claimant. Participants on behalf of the Michigan Department of Health and Human Services (MDHHS) included **Department**, medical contact worker.

<u>ISSUE</u>

The issue is whether DHS properly terminated Claimant's eligibility for State Disability Assistance (SDA) for the reason that Claimant is not a disabled individual.

FINDINGS OF FACT

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

- 1. Claimant was an ongoing SDA benefit recipient.
- 2. Claimant's only basis for SDA eligibility was as a disabled individual.
- 3. On **a disabled**, the Medical Review Team (MRT) determined that Claimant was not a disabled individual for purposes of SDA eligibility (see Exhibits 4-6).
- 4. On **Constant of**, DHS terminated Claimant's eligibility for SDA benefits, effective June 2015, and mailed a Notice of Case Action informing Claimant of the termination.
- 5. On **Claimant**, Claimant requested a hearing disputing the termination of SDA benefits.

- 6. As of the date of the administrative hearing, Claimant was a 45-year-old male.
- 7. Claimant's highest education year completed was the 11th grade.
- 8. Claimant alleged disability based on various psychological problems.

CONCLUSIONS OF LAW

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

SDA provides financial assistance to disabled adults who are not eligible for Family Independence Program (FIP) benefits. BEM 100 (January 2013), p. 4. The goal of the SDA program is to provide financial assistance to meet a disabled person's basic personal and shelter needs. *Id.* To receive SDA, a person must be disabled, caring for a disabled person, or age 65 or older. BEM 261 (July 2014), p. 1.

A person is disabled for SDA purposes if he/she:

- receives other specified disability-related benefits or services, see Other Benefits or Services below, or
- resides in a qualified Special Living Arrangement facility, or
- is certified as unable to work due to mental or physical disability for at least 90 days from the onset of the disability; or
- is diagnosed as having Acquired Immunodeficiency Syndrome (AIDS). *Id.*

Generally, state agencies such as DHS must use the same definition of SSI disability as found in the federal regulations. 42 CFR 435.540(a). Disability is federally defined as the inability to do any substantial gainful activity (SGA) 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. The definition of SDA disability is identical except that only a three month period of disability is required.

Substantial gainful activity means a person does the following: performs significant duties, does them for a reasonable length of time, and does a job normally done for pay or profit. BEM 260 (July 2014), p. 10. Significant duties are duties used to do a job or run a business. *Id.* They must also have a degree of economic value. *Id.* The ability to run a household or take care of oneself does not, on its own, constitute substantial gainful activity. *Id.*

Once an individual has been found disabled for purposes of MA benefits, continued entitlement is periodically reviewed in order to make a current determination or decision as to whether disability remains in accordance with the medical improvement review standard. 20 CFR 416.993(a); 20 CFR 416.994. Claimant was previously certified by the DHS Medical Review Team (MRT) as unable to work for at least 90 days. At Claimant's most recent SDA benefit redetermination, DHS determined that Claimant was no longer disabled.

In evaluating a claim for ongoing disability benefits, federal regulations require a sequential evaluation process be utilized. 20 CFR 416.994(b)(5). The review may cease and benefits continued if sufficient evidence supports a finding that an individual is still unable to engage in substantial gainful activity. *Id.* Prior to deciding if an individual's disability has ended, the department will develop, along with the Claimant's cooperation, a complete medical history covering at least the 12 months preceding the date the individual signed a request seeking continuing disability benefits. 20 CFR 416.993(b). The department may order a consultative examination to determine whether or not the disability continues. 20 CFR 416.993(c).

The below described evaluation process is applicable for clients that have not worked during a period of disability benefit eligibility. There was no evidence suggesting that Claimant received any wages since receiving disability benefits.

The first step in the analysis in determining the status of a claimant's disability requires the trier of fact to consider the severity of the impairment(s) and whether it meets or equals a listed impairment in Appendix 1 of subpart P of part 404 of Chapter 20. 20 CFR 416.994(b)(5)(i). If a listing is met, an individual's disability is found to continue and no further analysis is required. This consideration requires a summary and analysis of presented medical documents.

Hospital documents (Exhibits 31-62) from an admission dated were presented. Claimant testified that he was stabbed as part of an argument with an individual. It was noted that Claimant presented after being stabbed in the left side of his chest. A discharge date of was noted.

A Medical Examination Report (Exhibits 8-10) dated was presented. The form was completed by a physician with an unknown history of treating Claimant. Diagnoses of herpes, pneumothorax, hypokalemia, and a stab wound were noted. An impression was given that Claimant's condition was stable. It was noted that Claimant can meet household needs. No physical restrictions were noted.

A Psychiatric/Psychological Examination Report (Exhibits 11-13) dated was presented. The form was completed by a treating psychiatrist. Diagnoses of major depressive disorder and antisocial personality were noted. Claimant's GAF was noted to be 42.

A Mental Residual Functional Capacity Assessment (Exhibits 14-15) dated was presented. The assessment was noted as completed by a treating therapist. This form lists 20 different work-related activities among four areas: understanding and memory, sustained concentration and persistence, social interaction and adaptation. A therapist or physician rates the patient's ability to perform each of the 20 abilities as either "not significantly limited", "moderately limited", "markedly limited" or "no evidence of limitation". Claimant was found moderately restricted in all 20 listed abilities.

A mental status examination report (Exhibits 7-11) dated was presented. The report was noted as completed by a consultative licensed psychologist and a limited licensed psychologist. It was noted that Claimant reported a history of depression and bipolar disorder. Claimant reported that he stopped ongoing psychiatric treatment 8-9 months ago because he wanted to "smell the roses." A 2010 psychiatric hospitalization and a history of drug abuse was noted. Claimant reported that he has no arrests from the prior 10 years. Claimant reported that he has a history of job terminations related to verbal and physical altercations with coworkers. Noted observations of Claimant made by the consultative examiner included the following: clean dress and hygiene, in-touch with reality, apathetic attitude, constricted affect, irritable mood, and logical stream of mental activity. The examiner stated that Claimant presented with no symptoms of depression, anxiety, or thought disturbance. The examiner opined that Claimant had no work-related restrictions. Diagnoses of polysubstance abuse in early remission and personality disorder with antisocial features were noted. A guarded prognosis was noted. Claimant was not thought capable of managing his own funds because of his history of substance abuse.

Mental health agency forms (Exhibits A1-A3) dated were presented. It was noted that Claimant presented to pursue psychiatric treatment. It was noted that Claimant was scheduled for a psychiatric evaluation on the second second

Claimant's most prominent impairment appears to be bipolar disorder. Bipolar disorder is an affective disorder covered by Listing 12.04 which reads as follows:

12.04 *Affective disorders*: Characterized by a disturbance of mood, accompanied by a full or partial manic or depressive syndrome. Mood refers to a prolonged emotion that colors the whole psychic life; it generally involves either depression or elation. The required level of severity for these disorders is met when the requirements in both A and B are satisfied, or when the requirements in C are satisfied.

A. Medically documented persistence, either continuous or intermittent, of one of the following:

1. Depressive syndrome characterized by at least four of the following:

- a. Anhedonia or pervasive loss of interest in almost all activities; or
- b. Appetite disturbance with change in weight; or
- c. Sleep disturbance; or

- d. Psychomotor agitation or retardation; or
- e. Decreased energy; or
- f. Feelings of guilt or worthlessness; or
- g. Difficulty concentrating or thinking; or
- h. Thoughts of suicide; or
- I. Hallucinations, delusions, or paranoid thinking

OR

2. Manic syndrome characterized by at least three of the following:

- a. Hyperactivity; or
- b. Pressure of speech; or
- c. Flight of ideas; or
- d. Inflated self-esteem; or
- e. Decreased need for sleep; or
- f. Easy distractibility; or

g. Involvement in activities that have a high probability of painful consequences which are not recognized; or

h. Hallucinations, delusions or paranoid thinking

OR

3. Bipolar syndrome with a history of episodic periods manifested by the full symptomatic picture of both manic and depressive syndromes (and currently characterized by either or both syndromes);

AND

B. Resulting in at least two of the following:

1. Marked restriction of activities of daily living; or

2. Marked difficulties in maintaining social functioning; or

3. Marked difficulties in maintaining concentration, persistence, or pace; or

4. Repeated episodes of decompensation, each of extended duration

OR

C. Medically documented history of a chronic affective disorder of at least 2 years' duration that has caused more than a minimal limitation of ability to do basic work activities, with symptoms or signs currently attenuated by medication or psychosocial support, and one of the following:

1. Repeated episodes of decompensation, each of extended duration; or

2. A residual disease process that has resulted in such marginal adjustment that even a minimal increase in mental demands or change in the environment would be predicted to cause the individual to decompensate; or

3. Current history of 1 or more years' inability to function outside a highly supportive living arrangement, with an indication of continued need for such an arrangement.

Presented evidence was very mixed concerning Claimant's restrictions. A consultative psychologist determined that Claimant has no work-related restrictions. The same

examiner diagnosed Claimant with antisocial personality and provided a guarded prognosis. A guarded prognosis is one that is generally indicative of work-related restrictions. The examiner should have been alerted to restrictions based various statements by Claimant.

The examiner noted that Claimant reported that he was recently approached to become a terrorist. Claimant responded that "it sounded good." The anecdote was compelling evidence of poor judgment, a fairly obvious work restriction.

Claimant's physician also provided evidence of work restrictions. On a Medical Examination Report dated Claimant's physician stated that Claimant was restricted in comprehension, sustaining concentration, reading/writing, memory, following simple directions, and social interaction were noted. The stated restrictions were very odd when factoring that the same form listed only exertional-related diagnoses.

GAFs of 49 (see Exhibit 19) and 42 were verified. The Diagnostic and Statistical Manual of Mental Disorders (4th edition) (DSM IV) states that a GAF within the range of 41-50 is representative of a person with "serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) or any serious impairment in social, occupational, or school functioning (e.g. no friends, unable to keep a job)." Claimant's low GAF is indicative of meeting a SSA listing, however, the GAF of 49 was provided at least 1 ½ years before the hearing date. A more recent GAF of 42 was provided, but with little evidence of marked restrictions. The only reference to the degree of Claimant's restrictions came from his therapist who indicated that Claimant has numerous moderate restrictions, but no marked restrictions. A consultative examiner was even less supportive by opining that Claimant had no work-related restrictions whatsoever.

A GAF of 42 may have been persuasive if recent psychiatric treatment records were presented. As it happened, none were presented because Claimant ceased treatment.

Based on the presented evidence, it is found that Claimant does not meet a SSA listing and the analysis may proceed to the second step.

The second step of the analysis considers whether medical improvement occurred. CFR 416.994(b)(5)(ii). Medical improvement is defined as any decrease in the medical severity of the impairment(s) which was present at the time of the most favorable medical decision that the individual was disabled or continues to be disabled. 20 CFR 416.994(b)(1)(i). The analysis will begin with a summary of medical documents that supported a previous finding of disability.

An administrative hearing decision (Exhibits 26-30) dated was presented. The authoring ALJ relied on statements within an unsubmitted document made by a social worker that Claimant has marked restrictions in concentration, social interaction, memory, and adaptation.

A Psychiatric Evaluation (Exhibits 17-19) dated was presented. It was noted that Claimant was an ongoing clinic patient for 2 years. Claimant was described as moody and impulsive. Claimant's medication compliance was noted to be inconsistent. It was noted that Claimant recently used alcohol and marijuana (Claimant testified that he was clean and sober for approximately 10 years); Claimant reported that he wanted to stop future usage. It was noted that Claimant was HIV positive. Diagnoses of bipolar disorder, alcohol dependence, and marijuana dependence were noted. Claimant's GAF was noted to be 49.

A Medication Review Note dated was presented. A diagnosis of bipolar disorder was noted. Claimant's GAF was noted to be 46. It was noted that Claimant was not compliant with medications or group therapy.

Claimant's most recently submitted document indicated that Claimant has moderate restrictions (upgraded from marked restrictions), no work-related restrictions (though Claimant's judgment is in doubt), and very little psychiatric treatment from the prior 12 months.

It is also worth noting that Claimant's low GAF was much closer in time to when Claimant was abusing drugs. It is reasonable to presume improvement as Claimant extends his period of sobriety.

Claimant testimony denied any psyche improvement over the last few years. Claimant testified that he still feels bad emotions and experiences recurring dilemmas. Claimant testified that he is has been depressed over the past 6-7 months because of an illness afflicting his mother.

Claimant may still have ongoing restrictions (see the analysis at Step 5), however, the evidence established that Claimant's psyche has improved and his restrictions have lessened. Accordingly, it is found that medical improvement occurred and the analysis may proceed to the third step.

The third step of the analysis considers medical improvement and its effect on the ability to perform SGA. Medical improvement is not related to the ability to work if there has been a decrease in the severity of the impairment(s) present at the time of the most recent favorable medical decision, but *no* increase in functional capacity to do basic work activities. 20 CFR 416.994(b)(1)(ii). If there has been any medical improvement, but it is not related to the ability to do work and none of the exceptions applies, benefits will be continued. *Id.* If medical improvement is related to the ability to do work, the process moves to step five.

An increase in memory, social, concentration, and adaptation restrictions from markedto-moderate is indicative of an increase in Claimant's functional capacity to work. It is found that Clamant experienced medical improvement in the ability to work; accordingly, the analysis proceeds directly to Step 5. Step 5 of the analysis considers whether all the current impairments in combination are severe. 20 CFR 416.994(b)(5)(v). When the evidence shows that all current impairments in combination do not significantly limit physical or mental abilities to do basic work activities, these impairments will not be considered severe and the claimant will not be considered disabled. *Id.* If the impairments are considered severe, the analysis moves to step six. *Id.*

The impairments must significantly limit a person's basic work activities. 20 CFR 416.921 (a). "Basic work activities" refers to the abilities and aptitudes necessary to do most jobs. 20 CFR 416.921 (b). Examples of basic work activities include:

- physical functions (e.g. walking, standing, sitting, lifting, pushing, pulling, reaching, carrying, or handling)
- capacities for seeing, hearing, and speaking, understanding; carrying out, and remembering simple instructions
- use of judgment
- responding appropriately to supervision, co-workers and usual work situations; and/or
- dealing with changes in a routine work setting. (*Id.*)

Generally, federal courts have imposed a de minimus standard upon claimants to establish the existence of a severe impairment. *Grogan v. Barnhart*, 399 F.3d 1257, 1263 (10th Cir. 2005); *Hinkle v. Apfel*, 132 F.3d 1349, 1352 (10th Cir. 1997). *Higgs v Bowen*, 880 F2d 860, 862 (6th Cir. 1988). Similarly, Social Security Ruling 85-28 has been interpreted so that a claim may be denied at step two for lack of a severe impairment only when the medical evidence establishes a slight abnormality or combination of slight abnormalities that would have no more than a minimal effect on an individual's ability to work even if the individual's age, education, or work experience were specifically considered. *Barrientos v. Secretary of Health and Human Servs.*, 820 F.2d 1, 2 (1st Cir. 1987). Social Security Ruling 85-28 has been clarified so that the step two severity requirement is intended "to do no more than screen out groundless claims." *McDonald v. Secretary of Health and Human Servs.*, 795 F.2d 1118, 1124 (1st Cir. 1986).

Claimant testified that he stopped attending psychotherapy because he moved further away from his treating mental health treating agency. Claimant also testified that he stopped because he wanted to clear his head from the medications that he was taking. Claimant testified that he restarted psychotherapy three times per week after receiving a notice that MDHHS terminated his SDA eligibility. A stoppage in treatment is generally consistent with a lack of restrictions. In Claimant's case, the stoppage is also indicative of poor judgment.

As noted above, Claimant thought that being a terrorist was a good idea. Claimant also provided testimony of another incident which is not indicative of good judgment.

Claimant testified that he was recently sitting on his awning which was high above the ground. Claimant testified that the police were called. Claimant testified that the police thought he was attempting suicide which resulted in a 12 hour hospital stay. Claimant testimony denied the incident as a suicide attempt, but poor judgment was a factor if police were dispatched and Claimant was briefly hospitalized. Poor judgment is also consistent with getting stabbed over an argument. It is worth noting that Claimant testified that he was not taking his medications at the time that he was stabbed.

Claimant testified that he was last psychiatrically hospitalized approximately 3 years earlier (not counting the recent 12 hour hospital encounter). Claimant estimated that he was admitted for an 11 day period. Little consideration can be given to the hospital admission as no documents were presented and there is reasonable probability that Claimant was not medication compliant.

Presented documents sufficiently verified that Claimant has antisocial tendencies and poor judgment, though significant improvement in both areas when he is medication compliant. Moderate restrictions in areas of memory, adaptability, social interaction, and persistence were stated by Claimant's therapist.

It is found that Claimant established significant impairment to basic work activities for a period longer than 90 days. Accordingly, it is found that Claimant established having a severe impairment and the disability analysis may proceed to Step 6.

The sixth step in analyzing a disability claim requires an assessment of the Claimant's RFC and past relevant employment. 20 CFR 416.994(b)(5)(vi). An individual is not disabled if it is determined that a claimant can perform past relevant work. *Id*.

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). 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.

Claimant testified that he has never had a full-time job. Claimant testified that he never earned more than \$1,000/month in employment income. Claimant's testimony was credible, particularly given Claimant's history of drug abuse. Without employment amounting to SGA income limits, it can only be found that Claimant cannot return to perform past employment and the analysis may proceed to the final step.

In the final step in the process, the individual's RFC in conjunction with his or her age, education, and work experience, are considered to determine whether the individual can engage in any other substantial gainful work which exists in the national economy. SSR 83-10. 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).

To determine the physical demands (i.e. exertional requirements) of work in the national economy, jobs are classified as sedentary, light, medium, heavy, and very heavy. 20 CFR 416.967. The definitions for each are listed below.

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 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 are considered nonexertional. 20 CFR 416.969a(a). Examples of non-exertional limitations include difficulty functioning 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 using the rules of Appendix 2, an individual's circumstances, as indicated by the findings with respect to RFC, age, education, and work experience, is compared to the pertinent rule(s).

Presented evidence verified that Claimant was stabbed in May 2014. Claimant testimony conceded that he has no ongoing restrictions related to the stab wound. Claimant testimony also essentially conceded that he has no ongoing exertional restrictions.

As noted throughout the analysis, Claimant has poor judgment. Moderate restrictions to Claimant's persistence, memory, social interaction, and adaptation were stated by a therapist. Claimant testimony speculated that he would likely be fired in any employment scenario. Claimant would have difficulty with social interactions, however, less so, if he were to remain medication compliant and performed jobs requiring a minimal of social interaction.

Claimant's restrictions should allow him to perform non-supervisory and non-complex physical labor (e.g. yardwork, assembly, light construction, janitorial...) with a minimum of teamwork and required social interactions. It is presumed that such employment is available in sufficient quantities within Claimant's residential area.

Based on the presented evidence, it is found that Claimant is not disabled. Accordingly, it is found that MDHHS properly terminated Claimant's SDA eligibility.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly terminated Claimant's SDA benefit eligibility, effective June 2015, based on a determination that Claimant is not disabled.

The actions taken by DHS are **AFFIRMED**.

Thurtin Bordoch

Christian Gardocki Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

Date Signed: 7/8/2015

Date Mailed: 7/8/2015

CG / hw

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights
 of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The party requesting a rehearing or reconsideration must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

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

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

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