

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

IN THE MATTER OF:

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Reg. No.: 15-008766
Issue No.: 4009
Case No.: ██████████
Hearing Date: July 23, 2015
County: Grand Traverse

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 23, 2015, from Detroit, Michigan. Participants included the above-named Claimant. Participants on behalf of the Michigan Department of Health and Human Services (MDHHS) included ██████████, specialist.

ISSUE

The issue is whether MDHHS properly denied Claimant's State Disability Assistance (SDA) eligibility 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. On March 31, 2014, Claimant applied for SDA benefits.
2. Claimant's only basis for SDA benefits was as a disabled individual.
3. On April 23, 2015, the Medical Review Team (MRT) determined that Claimant was not a disabled individual (see Exhibits 351-356).
4. On April 23, 2015, MDHHS denied Claimant's application for SDA benefits and mailed a Notice of Case Action informing Claimant of the denial.
5. On June 5, 2015, Claimant requested a hearing disputing the denial of SDA benefits (see Exhibits 4-5).

6. As of the date of the administrative hearing, Claimant was a 37 year old female.
7. Claimant has not earned substantial gainful activity since before the first month of benefits sought.
8. Claimant obtained a [REDACTED] degree in Counseling.
9. Claimant has a history of semi-skilled employment, with no transferrable job skills.
10. Claimant alleged disability based on restrictions related to pituitary gland dysfunction, adrenal insufficiency, osteoporosis, fatigue and various mental health problems including obsessive-compulsive disorder (OCD).

CONCLUSIONS OF LAW

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. MDHHS administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. MDHHS 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 (1/2013), 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 (1/2012), 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.*

There was no evidence that any of the above circumstances apply to Claimant. Accordingly, Claimant may not be considered for SDA eligibility without undergoing a medical review process (see BAM 815) which determines whether Claimant is a disabled individual. *Id.*, p. 3.

Generally, state agencies such as MDHHS 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. As noted above, SDA eligibility is based on a 90 day period of disability.

SGA 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. *Id.*, p. 9. 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 SGA. *Id.*

The person claiming a physical or mental disability has the burden to establish a disability 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).

Federal regulations describe a sequential five step process that is to be followed in determining whether a person is disabled. 20 CFR 416.920. If there is no finding of disability or lack of disability at each step, the process moves to the next step. 20 CFR 416.920 (a)(4).

The first step in the process considers a person's current work activity. 20 CFR 416.920 (a)(4)(i). A person who is earning more than a certain monthly amount is ordinarily considered to be engaging in SGA. The monthly amount depends on whether a person is statutorily blind or not. "Current" work activity is interpreted to include all time since the date of application. The 2014 monthly income limit considered SGA for non-blind individuals is \$1,070.

Claimant credibly denied performing any employment since the date of the SDA application; no evidence was submitted to contradict Claimant's testimony. Based on the presented evidence, it is found that Claimant is not performing SGA and has not performed SGA since the date of application. Accordingly, the disability analysis may proceed to Step 2.

The second step in the disability evaluation is to determine whether a severe medically determinable physical or mental impairment exists to meet the 12 month duration requirement. 20 CFR 416.920 (a)(4)(ii). The impairments may be combined to meet the severity requirement. If a severe impairment is not found, then a person is deemed not disabled. *Id.* The 12 month durational period is applicable to MA benefits; as noted above, SDA eligibility requires only a disability duration of 90 days.

The impairments must significantly limit a person's basic work activities. 20 CFR 416.920 (a)(5)(c). "Basic work activities" refers to the abilities and aptitudes necessary to do most jobs. *Id.* 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.

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 F.2d 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).

SSA specifically notes that age, education, and work experience are not considered at the second step of the disability analysis. 20 CFR 416.920 (5)(c). In determining whether Claimant's impairments amount to a severe impairment, all other relevant evidence may be considered. The analysis will begin with a summary of presented evidence.

Claimant testified that she was diagnosed with a pituitary tumor in 2010. Claimant testified that the tumor was benign, but it wrapped around her carotid artery and compressed her optic nerve. Claimant testified that surgery removed most of the tumor. Claimant testified that she underwent radiation after surgery to attack remnants of the tumor. Claimant testified that only a small growth of the tumor remains. Claimant testified that the tumor caused permanent damage to her pituitary gland function; in particular, Claimant testified that her adrenal production is limited. Claimant testified that her bone density is also affected and that she has severe osteoporosis in thighs, hips, and back.

Various documents from Claimant's previous applications alleging disability and treatment documents from 2010-2012 were presented (see Exhibits 6-349; 429-443; 475-480). A consistent complaint of dyspnea was noted. An MRI report of Claimant's brain was noted to be normal. On March 22, 2011, Claimant's corrected vision was

20/20 for each eye and Claimant's visual fields were noted to be full (see Exhibit 28). Treatment for amenorrhea (see Exhibit 57), dyspnea (see Exhibits 76-85) was also noted. On January 4, 2012, an impression of moderate restriction was noted following pulmonary function testing (see Exhibits 118; 136). A mental status examination report (Exhibits 447-453) dated May 22, 2012 noted diagnoses of depression and PTSD; Claimant's GAF was noted to be 38 and a guarded prognosis was noted.

Pulmonary function testing documents (Exhibits 127-128) dated May 8, 2012, were presented. Claimant's best post-bronchodilator FVC was 3.25 (79% of predicted). Claimant's best post-bronchodilator FEV1 was 2.54 (75% of predicted). On May 9, 2012, a diagnosis of mild obstructive lung disease was noted (see Exhibit 140).

A bone density scan report (Exhibits 74; 432) dated June 11, 2012, was presented. Findings included the following T-scores: lumbar spine -3.6, left femoral neck -1.6, left hip -2.3, right femoral neck -1.4, and right total hip -2.4. An impression of stable osteoporosis (in comparison to 2010 dated study) was noted.

Medical center documents (Exhibits 404-411; 469-474) dated March 21, 2013, were presented. It was noted that Claimant complained of abdominal pain. Following radiology, an impression of fatty liver disease was noted following radiology.

Medical center documents (Exhibits 398-403; 463-468) dated August 5, 2013, were presented. It was noted that Claimant complained of vomiting and diarrhea. It was noted that Claimant was given IV fluids and IV Zofran. Claimant was noted as stable throughout her emergency room visit and discharged.

Medical center documents (Exhibits 394-397; 460-462) dated August 17, 2013, were presented. It was noted that Claimant complained of nausea, diarrhea, headache, and jitteriness. It was noted that Claimant's complaints were likely related to Zoloft side effects.

Physician office visit notes (Exhibits 444-4445) dated November 15, 2013, were presented. It was noted that Claimant was treated for pituitary gland neoplasm. It was noted that Claimant's medication list included 10 medications including Levothroid, Xonopex, Hydrocortisone, and Tylenol (325 mg; as needed).

Hospital documents (Exhibits 382-393) from an encounter dated June 16, 2014, were presented. It was noted that Claimant presented with complaints of a cough. An impression of no acute disease was noted following a chest x-ray. A diagnosis of viral syndrome was noted.

An intake evaluation (Exhibits 357-362) dated September 4, 2014, was presented. The evaluation was completed by a social worker from a newly treating mental health agency. It was noted that Claimant reported a history of being abused as a child. It was noted that Claimant reported a fear of abandonment and rejection stemming from her

childhood. Reported symptoms included the following: OCD, conflicts with others, nervousness, suicidal thoughts (without intent) and dyspnea. Mental examination findings included the following anxious mood, appropriate perception, appropriate insight, appropriate memory, and appropriate thought content.

An integrated psychological/substance abuse report (Exhibits 366-368) dated September 15, 2014, was presented. The report was completed by a licensed psychologist. It was noted that Claimant just started treatment for adrenal insufficiency. Diagnoses of major depression (recurrent and moderate), anxiety disorder, and OCD were noted.

A psychotherapy progress note (Exhibit 365) dated October 15, 2014, was presented. It was noted that Claimant would follow-up with her previous counselor.

Claimant testified that she has joint pain, psychological problems, and recurring fatigue. Claimant's testimony was consistent with diagnoses and treatment history of osteoporosis, depression, OCD, pituitary gland dysfunction, and adrenal insufficiency.

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 3.

The third step of the sequential analysis requires a determination whether the Claimant's impairment, or combination of impairments, is listed in Appendix 1 of Subpart P of 20 CFR, Part 404. 20 CFR 416.920 (a)(4)(iii). If Claimant's impairments are listed and deemed to meet the 12 month requirement, then the claimant is deemed disabled. If the impairment is unlisted, then the analysis proceeds to the next step.

Claimant's primary allegation is based on pituitary gland dysfunction. The pituitary gland is part of the endocrine system which is covered by SSA listings 9.00. The relevant portion of Listing 9.00 reads as follows:

Pituitary gland disorders can disrupt hormone production and normal functioning in other endocrine glands and in many body systems. The effects of pituitary gland disorders vary depending on which hormones are involved. For example, when pituitary hypofunction affects water and electrolyte balance in the kidney and leads to diabetes insipidus, we evaluate the effects of recurrent dehydration under 6.00.

A listing for joint dysfunction (Listing 1.02) was considered based on a diagnosis of osteoporosis. The listing was rejected due to a failure to establish that Claimant is unable to ambulate effectively.

A listing for chronic pulmonary insufficiency (Listing 3.02) was considered based on Claimant's complaints of dyspnea. The listing was rejected due to a lack of testing from

within 1 year of Claimant's application date or any testing that meets listing requirements.

A listing for affective disorder (Listing 12.04) was considered based on a diagnosis of depression. This listing was rejected due to a failure to establish marked restrictions in social functioning, completion of daily activities or concentration. It was also not established that Claimant required a highly supportive living arrangement, suffered repeated episodes of decompensation or that the residual disease process resulted in a marginal adjustment so that even a slight increase in mental demands would cause decompensation.

A listing for anxiety-related disorders (Listing 12.06) was considered based on complaints of anxiety. This listing was rejected due to a failure to establish marked restrictions in social functioning, completion of daily activities or concentration. It was also not established that Claimant had a complete inability to function outside of the home.

A listing for personality disorders (Listing 12.08) was considered based on a diagnosis of OCD. This listing was rejected due to a failure to establish marked restrictions in social functioning, completion of daily activities or concentration. It was also not established that Claimant had periods of decompensation, each of extended duration.

It is found that Claimant failed to establish meeting a SSA listing. Accordingly, the analysis moves to the fourth step.

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 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 she performed past employment involving the following: bill collecting, skip trace investigation, administrative assistant, retail clothing sales, and cashier. Claimant's testimony was indicative that many of her past jobs involved sedentary levels of employment. For purposes of this decision, a discussion of whether Claimant can perform sedentary employment will be reserved for the fifth and final step of the analysis.

In the fifth 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).

Given Claimant's age, education and employment history a determination of disability is dependent on Claimant's ability to perform sedentary employment. For sedentary employment, periods of standing or walking should generally total no more than about 2 hours of an 8-hour workday. Social Security Rule 83-10.

Physician statements of restrictions were provided. Treating source opinions cannot be discounted unless the Administrative Law Judge provides good reasons for discounting the opinion. *Rogers v. Commissioner*, 486 F. 3d 234 (6th Cir. 2007); *Bowen v Commissioner*.

A physician letter (Exhibit 426) August 13, 2013, was presented. It was noted that Claimant reported significant fatigue associated with previous pituitary tumor treatment. Other noted problems included hypopituitarism, osteoporosis, adrenal insufficiency, thyroid insufficiency, and lack of estrogen. Mental problems of depression and anxiety were noted. Claimant's lung function was noted as likely to erode. A diagnosis of gallbladder dyskinesia was noted to cause nausea and joint pain. It was noted that Claimant would likely miss many days if she was expected to work.

The presented letter was indicative that Claimant could perform employment, though work absences would prevent Claimant from maintaining employment. The letter was consistent with Claimant testimony which indicated the same.

The presented letter was dated over five months earlier than Claimant's date of application. Very few treatment documents dated after the physician letter were presented. One of the few treatment documents indicated that Claimant was not treated for adrenal sufficiency until shortly before September 2014. Respiratory testing since

2012 was not presented. References to gallbladder dyskinesia were not apparent outside of the physician letter. Treatment for depression and anxiety was not established other than for a single month period from September 2014 to October 2014. The general absence of treatment documents following August 2013 is supportive in rejecting the letter as a reliable source of establishing Claimant's ongoing restrictions.

Claimant testified that OCD, depression, and anxiety adversely affect her ability to work. As an example of OCD symptoms, Claimant testified that she has to lock her front door five times. Claimant testified that she counts everything that she does. Claimant also testified that her mind sometimes races and that she typically has crying spells every week. Claimant testified that she also has panic attacks related to driving. Claimant testified that she takes Wellbutrin as an anti-depressant and Ativan for her anxiety. Generally, Claimant's testimony was credible.

A finding of restrictions based on mental health is hampered by the lack of treatment records. One month of treatment was verified. It was verified that Claimant had significant functioning difficulties, as established by an alarmingly low GAF of 38. The Diagnostic and Statistical Manual of Mental Disorders (4th edition) (DSM IV) states that a score of 31-40 is described as "some impairment in reality testing or communication OR major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood." Little weight can be given to Claimant's low GAF of 38 because it reflected Claimant's functioning level nearly two full years before applying for SDA benefits. Little weight can also be given due to the near-total absence of treatment since Claimant was diagnosed with a low GAF.

Claimant testified that she must maintain a low stress level or she could suffer adrenal fatigue and failure. Claimant testified that she carries a hydrocortisone needle in case of an emergency. Claimant's testimony was credible. A need to maintain a low stress level would disqualify Claimant from particularly stressful employment.

Claimant testified that she is in constant pain. She testified that her lower spine feels like it could snap. A diagnosis of osteoporosis was verified. Claimant's lumbar T score of -3.6 is understood to be indicative of fairly serious osteoporosis with a history of fracture. A previous fracture was not verified. Claimant's level of osteoporosis would likely preclude the performance of any employment beyond sedentary employment. Osteoporosis test results also indicated stability across a 2 year period. There was no compelling documentary evidence that Claimant requires an ambulation-assistance device, has sitting restrictions, or has difficulty with the walking required of sedentary employment. Though Claimant surely has restrictions related to osteoporosis, restrictions preventing the performance of sedentary employment were not verified.

Mild obstructive lung disease was noted verified by pulmonary function testing. The diagnosis would not preclude the performance of sedentary employment. Claimant's physician indicated that Claimant's lung function is likely to worsen, however, a worse diagnosis cannot be presumed merely based on a prediction of regression.

Claimant testified that she takes steroids for adrenal insufficiency. Claimant testified that her immunity system is harmed by the steroids. Claimant's testimony was credible, however a degree of immune system harm was not verified. Medical records verified one physician encounter for a virus; this was not compelling evidence of a weakened immune system.


Claimant also testified that she has Hashimoto disease and is on hormone replacement. Claimant's testimony was credible, however, the treatment and diagnosis of Hashimoto was not verified.

Based on the presented evidence, it is found that Claimant can perform the requirements of sedentary employment. Though Claimant may have some work absences, presented treatment documents did not verify that absences would prevent Claimant from sustaining employment. Presented mental health records were also insufficient to infer further restrictions beyond avoidance of high-stress jobs. It is presumed that Claimant's sedentary base would not be significantly eroded by such a restriction.

Based on Claimant's exertional work level (sedentary), age (younger individual aged 18-44), education (high school or more), employment history (semi-skilled with no known transferrable skills), Medical-Vocational Rule 201.28 is found to apply. This rule dictates a finding that Claimant is not disabled. Accordingly, it is found that MDHHS properly found Claimant to be not disabled for purposes of SDA benefits.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHHS properly denied Claimant's SDA benefit application dated March 31, 2014, based on a determination that Claimant is not disabled. The actions taken by MDHHS are **AFFIRMED**.


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

Date Signed: **8/11/2015**

Date Mailed: **8/11/2015**

GC/tm

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

CC: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]