

**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.: 15-006890
Issue No.: 4009
Case No.: ██████████
Hearing Date: June 22, 2015
County: Genesee-District 2

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, a telephone hearing was held on June 22, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and ██████████, Claimant's father. Participants on behalf of the Department of Health and Human Services (Department) included ██████████ Hearing Facilitator.

During the hearing, Claimant waived the time period for the issuance of this decision in order to allow for the submission of additional records. Although requested hospital records were not received, a review of the record shows that the medical file included documents from the identified hospitals. The record closed on July 22, 2015, and the matter is now before the undersigned for a final determination.

ISSUE

Did the Department properly determine that Claimant was not disabled for purposes of the State Disability Assistance (SDA) 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. On January 26, 2015, Claimant submitted an application for public assistance seeking SDA benefits (Exhibit A, pp. 10-39).
2. On April 16, 2015, the Medical Review Team (MRT) found Claimant not disabled (Exhibit A, pp. 40-42).
3. On April 16, 2015, the Department sent Claimant a Notice of Case Action denying the application based on MRT's finding of no disability (Exhibit A, pp. 6-9).

4. On April 27, 2015, the Department received Claimant's timely written request for hearing (Exhibit A, p. 5).
5. Claimant alleged physical disabling impairment due to closed head injury, left eye blindness, left hand permanent nerve damage, permanent nerve injury in arms and legs, and incontinence.
6. Claimant alleged mental disabling impairment due to depression.
7. On the date of the hearing, Claimant was [REDACTED] years old with a [REDACTED], birth date; he is [REDACTED]" in height and weighs about [REDACTED] pounds.
8. Claimant graduated from college and can read and write and do basic math.
9. Claimant has an employment history of work as an automotive technician, a fast food employee, a loss prevention employee, and a teaching assistant.
10. Claimant's impairments have lasted, or are expected to last, continuously for a period of 90 days or longer.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Health and Human Services Bridges Administrative Manual (BAM), Department of Health and Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT).

The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, was established by 2004 PA 344. The Department administers the SDA program pursuant to 42 CFR 435, MCL 400.10 *et seq.* and Mich Admin Code, Rules 400.3151 – 400.3180.

A disabled person is eligible for SDA. BEM 261 (July 2014), p. 1. An individual automatically qualifies as disabled for purposes of the SDA program if the individual receives Supplemental Security Income (SSI) or Medical Assistance (MA-P) benefits based on disability or blindness. BEM 261, p. 2. Otherwise, to be considered disabled for SDA purposes, a person must have a physical or mental impairment for at least ninety days which meets federal SSI disability standards, meaning the person is unable to do any substantial gainful activity by reason of any medically determinable physical or mental impairment. BEM 261, pp. 1-2; 20 CFR 416.901; 20 CFR 416.905(a).

To determine whether an individual is disabled for SSI purposes, the trier of fact must apply a five-step sequential evaluation process and consider the following:

- (1) whether the individual is engaged in substantial gainful activity (SGA);
 - (2) whether the individual's impairment is severe;
 - (3) whether the impairment and its duration meet or equal a listed impairment in Appendix 1 Subpart P of 20 CFR 404;
 - (4) whether the individual has the residual functional capacity to perform past relevant work; and
 - (5) whether the individual has the residual functional capacity and vocational factors (based on age, education and work experience) to adjust to other work.
- 20 CFR 416.920(a)(1) and (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).

In general, the individual has the responsibility 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, if a mental disability is alleged, to reason and make appropriate mental adjustments. 20 CFR 416.912(a); 20 CFR 416.913. An individual's subjective pain complaints are not, in and of themselves, sufficient to establish disability. 20 CFR 416.908; 20 CFR 416.929(a). Similarly, conclusory statements by a physician or mental health professional that an individual is disabled or blind, absent supporting medical evidence, are insufficient to establish disability. 20 CFR 416.927(d).

Step One

As outlined above, the first step in determining whether an individual is disabled requires consideration of the individual's current work activity. 20 CFR 416.920(a)(4)(i). If an individual is working and the work is SGA, then the individual must be considered not disabled, regardless of medical condition, age, education, or work experience. 20 CFR 416.920(b); 20 CFR 416.971. SGA means work that involves doing significant and productive physical or mental duties and that is done, or intended to be done, for pay or profit. 20 CFR 416.972.

In this case, Claimant has not engaged in SGA activity during the period for which assistance might be available. Therefore, Claimant is not ineligible under Step 1 and the analysis continues to Step 2.

Step Two

Under Step 2, the severity of an individual's alleged impairment(s) is considered. If the individual does not have a severe medically determinable physical or mental impairment that meets the duration requirement, or a combination of impairments that is severe and meets the duration requirement, the individual is not disabled. 20 CFR 416.920(a)(4)(ii). The duration requirement for SDA means that the impairment is expected to result in

death or has lasted, or is expected to last, for a continuous period of at least 90 days. 20 CFR 416.922; BEM 261, p. 2.

An impairment, or combination of impairments, is severe if it significantly limits an individual's physical or mental ability to do basic work activities regardless of age, education and work experience. 20 CFR 416.920(a)(4)(ii); 20 CFR 416.920(c). Basic work activities mean the abilities and aptitudes necessary to do most jobs. 20 CFR 416.921(b). Examples include (i) physical functions such as walking, standing, sitting, lifting, pushing, pulling, reaching, carrying, or handling; (ii) the capacity to see, hear, and speak; (iii) the ability to understand, carry out, and remember simple instructions; (iv) use of judgment; (v) responding appropriately to supervision, co-workers and usual work situations; and (vi) dealing with changes in a routine work setting. 20 CFR 416.921(b).

The individual bears the burden to present sufficient objective medical evidence to substantiate the alleged disabling impairments. While the Step 2 severity requirement may be employed as an administrative convenience to screen out claims that are totally groundless solely from a medical standpoint, under the *de minimus* standard applied at Step 2, an impairment is severe unless it is only a slight abnormality that minimally affects work ability regardless of age, education and experience. *Higgs v Bowen*, 880 F2d 860, 862-863 (CA 6, 1988), citing *Farris v Sec of Health and Human Services*, 773 F2d 85, 90 n.1 (CA 6, 1985).

In the present case, Claimant alleges physical disabling impairment due to closed head injury, left eye blindness, left hand permanent nerve damage, permanent nerve injury in arms and legs, and incontinence and mental disabling impairment due to depression. The medical evidence presented at the hearing was reviewed and is summarized below.

Claimant was involved in a moped accident in October 2014 resulting in an intracranial bleed, respiratory failure and prolonged intubation at [REDACTED] in [REDACTED]. He was removed from the ventilator and decannulated on October 24, 2014. He was transferred to [REDACTED] on November 26, 2014, for treatment of nausea and vomiting. Claimant's records also show past medical history of diabetes mellitus, hypertension, resolved acute renal failure, chronic lower leg pain, resolved dysphagia, left optic nerve paralysis and urinary retention. He was released on December 3, 2014 (Exhibit 1, pp. 2-6).

A December 31, 2014, discharge summary for [REDACTED] Center referenced treatment for nausea and vomiting. In the physical examination, tenderness of the lumbar area with palpitation was noted. Claimant was diagnosed with asymptomatic cholelithiasis (Exhibit 1, pp. 27-37, 71-80).

On February 3, 2015, Claimant's primary care physician completed a physical exam report, DHS-49, listing Claimant's diagnoses as closed head injury (CHI), partial

blindness in left eye, insomnia, back pain, incontinence, hypertension, and gastroesophageal reflux disease (GERD) . The doctor noted that Claimant had an unstable gait, his foot dragged, there was no real movement on the left side, and he did not talk. The doctor concluded that Claimant's condition was stable and identified the following limitations: (i) he could not lift any weight; (ii) he could not stand/walk or sit; (iii) he could not use his left arm or hand to grasp, reach or push/pull and neither hand to fine manipulate; and (iv) he could use neither foot or leg to operate foot and leg controls. The doctor also noted limitations to Claimant's memory, sustained concentration, reading and writing, social interaction, and following simple directions due to his closed head injury. The doctor found that he could not meet his needs in the home with respect to cleaning, cooking, laundry, dressing, mobility, grooming and bathing (Exhibit 1, pp. 7-9; Exhibit A, pp. 81-83).

In progress notes for the May 11, 2015, office visit, Claimant's doctor noted that current treatment for hypertension had provided significant improvement; Claimant reported lumbar spine aching pain aggravated by bending, lying down, standing, twisting and sitting; and Claimant suffered from blurred vision, memory loss, numbness and weakness due to a motor vehicle accident with moderate relief from symptoms with prescription drugs (Exhibit 1, pp 17-23).

On March 17, 2015, Claimant participated in a psychological examination by a consulting psychologist at the Department's request. In a report prepared in connection with the examination, the psychologist noted that Claimant had a depressed affect with underlying frustration and disclosed his goal was to get healthy. The psychologist's current diagnostic impression was reactive depression secondary to medical stress and assigned him a global assessment of functioning (GAF) score of 50. He recommended outpatient psychiatric treatment for Claimant designed to reduce psychiatric symptoms, stabilize daily functioning, and provide emotional support during rehabilitation efforts, and ongoing use of psychotropic medication (Exhibit A, pp. 44-46).

On March 17, 2015, Claimant participated in a physical examination by a consulting internist at the Department's request. In a report prepared in connection with the examination, the doctor noted that Claimant reported that, following the motor vehicle accident while he was riding a moped, he was hospitalized from August 2014 to December 2014, comatose for two months during that time. He reported a traumatic brain injury and skull fracture resulting in a metal plate in the skull. The doctor noted that Claimant could walk independently and his left hand was paralyzed with a drop wrist. Claimant reported memory lapses since the accident; marked weakness in the left upper extremity, with sharp pain shooting in the first web of the thumb and index finger radiating towards the left upper extremity all the way to the shoulder, more on the left than on the right extremity; chronic headaches every day lasting up to a few minutes; loss of vision in the left eye as a result of the accident; and numbness and tingling in the left hand more than the right and in both lower extremities and toe area. In his physical examination of Claimant's left hand, the doctor noted wrist drop, wrist strength of 0, no ability to dorsiflex, hand grip grade 2/5, and limited finger movement.

Lower extremity and right hand finger movements were normal. The doctor concluded that Claimant had significant injury resulting in traumatic brain injury with brachial nerve neuropathy causing left wrist and hand paralysis with wrist drop and possible brain injury causing memory loss and needing neuropsychiatric or neurocognitive evaluation. The doctor noted that Claimant could benefit from physical and occupational therapy but the left hand was not usable for any meaningful function. The doctor concluded that Claimant was totally disabled at the present (Exhibit A, pp. 47-48).

On March 26, 2015, an ophthalmologist performed a visual field test of Claimant's vision at the request of the Department. The results showed visual field constriction 77/120 in Claimant's left eye. Claimant had uncorrected vision of 20/25 in the right eye (Exhibit A, pp. 49-55).

On June 22, 2015, Claimant's urologist completed a medical examination report, DHS-49, identifying Claimant's diagnoses as urethral strictures and indicating that Claimant had no limitations due to this condition (Exhibit 2).

In consideration of the de minimus standard necessary to establish a severe impairment under Step 2, the foregoing medical evidence is sufficient to establish that Claimant suffers from severe impairments that have lasted or are expected to last for a continuous period of not less than 90 days. Therefore, Claimant has satisfied the requirements under Step 2, and the analysis will proceed to Step 3.

Step Three

Step 3 of the sequential analysis of a disability claim requires a determination if the individual'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 an individual's impairment, or combination of impairments, is of a severity to meet or medically equal the criteria of a listing and meets the duration requirement (20 CFR 416.909), the individual is disabled. If not, the analysis proceeds to the next step.

The medical evidence presented does **not** show that Claimant's impairments meet or equal the required level of severity of any of the listings in Appendix 1 to be considered as disabling without further consideration. Listings 1.02 (major dysfunction of a joint); 2.00 (special senses and speech), particularly 2.03 (contraction of the visual fields in the better eye); 6.00 (genitourinary disorders); 11.18 (cerebral trauma); 11.14 (peripheral neuropathies); and 12.04 (affective disorders) were considered. Because Claimant's impairments are insufficient to meet, or to equal, the severity of a listing, Claimant is not disabled under Step 3 and the analysis continues to Step 4.

Residual Functional Capacity

If an individual's impairment does not meet or equal a listed impairment under Step 3, before proceeding to Step 4, the individual's residual functional capacity (RFC) is assessed. 20 CFR 416.920(a)(4); 20 CFR 416.945. Impairments, and any related symptoms, may cause physical and mental limitations that affect what a person can do

in a work setting. 20 CFR 416.945(a)(1). RFC is the most an individual can do, based on all relevant evidence, despite the limitations from the impairment(s) and takes into consideration an individual's ability to meet the physical, mental, sensory and other requirements of work. 20 CFR 416.945(a)(1), (4). The RFC takes into consideration the total limiting effects of all impairments, including those that are not severe. 20 CFR 416.945(e).

RFC is assessed based on all relevant medical and other evidence such as statements provided by medical sources, whether or not they are addressed on formal medical examinations, and descriptions and observations of the limitations from impairment(s) provided by the individual or other persons. 20 CFR 416.945(a)(3). This includes consideration of (1) the location/duration/frequency/intensity of an applicant's pain; (2) the type/dosage/effectiveness/side effects of any medication the applicants 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).

Limitations can be exertional, nonexertional, or a combination of both. 20 CFR 416.969a. If the limitations and restrictions imposed by the individual's impairment(s) and related symptoms, such as pain, affect only the ability to meet the strength demands of jobs (i.e., sitting, standing, walking, lifting, carrying, pushing, and pulling), the individual is considered to have only exertional limitations. 20 CFR 416.969a(b). To determine the exertional requirements, or physical demands, of work in the national economy, jobs are classified as sedentary, light, medium, heavy, and very heavy. 20 CFR 416.967; 20 CFR 416.969a(a).

Sedentary work.

Sedentary work involves lifting no more than 10 pounds at a time and occasionally lifting or carrying articles like docket files, ledgers, and small tools. Although a sedentary job is defined as one which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required occasionally and other sedentary criteria are met.

Light work.

Light work involves lifting no more than 20 pounds at a time with frequent lifting or carrying of objects weighing up to 10 pounds. Even though the weight lifted may be very little, a job is in this category when it requires a good deal of walking or standing, or when it involves sitting most of the time with some pushing and pulling of arm or leg controls. 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. If someone can do light work, . . . he or she can also do sedentary work, unless there are additional limiting factors such as loss of fine dexterity or inability to sit for long periods of time.

Medium work.

Medium work involves lifting no more than 50 pounds at a time with frequent lifting or carrying of

objects weighing up to 25 pounds. If someone can do medium work, . . . he or she can also do sedentary and light work.

Heavy work.

Heavy work involves lifting no more than 100 pounds at a time with frequent lifting or carrying of objects weighing up to 50 pounds. If someone can do heavy work, . . . he or she can also do medium, light, and sedentary work.

Very heavy work.

Very heavy work involves lifting objects weighing more than 100 pounds at a time with frequent lifting or carrying of objects weighing 50 pounds or more. If someone can do very heavy work, . . . he or she can also do heavy, medium, light, and sedentary work. 20 CFR 416.967.

If an individual has limitations or restrictions that affect the ability to meet demands of jobs **other than** strength, or exertional, demands, the individual is considered to have only nonexertional limitations or restrictions. 20 CFR 416.969a(a) and (c). Examples of non-exertional limitations or restrictions 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).

In this case, Claimant alleges both exertional and nonexertional limitations due to his medical condition. Claimant testified that he walked with a limp and could not walk further than a block without getting tired; he could not use his left hand at all which affected his ability to use his right hand effectively; he could not stand longer than 5 minutes; he could not sit longer than 90 minutes because his back and bottom hurt; he used a chair lift at home for climbing stairs; he could not bend or squat; and he suffered from incontinence. He lived alone but his mother and sister helped him bathe and dress. He relied on family to complete chores and shop for him. He could not drive. He added that he rarely left home and was depressed over his circumstances.

Claimant's medical record shows that both his treating doctor and the consulting physician Claimant was referred to by the Department concluded that he could not use his left hand at all. Claimant's treating doctor identified the following limitations for Claimant: (i) he could not lift any weight; (ii) he could not stand/walk or sit; (iii) he could not use his left arm or hand to grasp, reach or push/pull and neither hand to fine manipulate; and (iv) he could use neither foot or leg to operate foot and leg controls. Both Claimant's doctor and the consulting doctor noted limitations to Claimant's memory, sustained concentration, reading and writing, social interaction, and following simple directions due to his closed head injury, with the consulting doctor finding that Claimant sustained possible brain injury causing memory loss that needed neuropsychiatric or neurocognitive evaluation. Claimant's treating doctor, consistent with Claimant's testimony, found that Claimant could not meet his needs in the home with respect to cleaning, cooking, laundry, dressing, mobility, grooming and bathing.

Claimant's medical file also shows that Claimant had restricted vision in his left eye, with a visual field construction of 77/120. His medical situation had resulted in the consulting psychologist finding that Claimant suffered from reactive depression secondary to medical stress. However, there is no evidence of ongoing incontinency issues.

A review of the entire record including the reports from Claimant's treating physician and the consulting physician and Claimant's testimony, it is found that Claimant maintains the physical capacity to perform at best sedentary work as defined by 20 CFR 416.967(a) and his work capacity is further limited by his vision issues and his depression.

Claimant's RFC is considered at both steps four and five. 20 CFR 416.920(a)(4), (f) and (g).

Step Four

Step 4 in analyzing a disability claim requires an assessment of Claimant's RFC and past relevant employment. 20 CFR 416.920(a)(4)(iv). Past relevant work is work that has been performed within the past 15 years that was SGA and that lasted long enough for the individual to learn the position. 20 CFR 416.960(b)(1). An individual who has the RFC to meet the physical and mental demands of work done in the past is not disabled. *Id.*; 20 CFR 416.960(b)(3); 20 CFR 416.920. 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).

As determined in the RFC analysis above, Claimant is limited to no more than sedentary work activities and has further nonexertional limitations in his ability to perform basic work activities due to his limited left eye vision and his depression over his medical condition. Claimant's work history in the 15 years prior to the application consists of work as an automotive technician (heavy, skilled), a fast food employee (light, unskilled), a loss prevention employee (light, unskilled), and a teaching assistant (sedentary, skilled). In light of the entire record and Claimant's RFC, including his nonexertional limitations, it is found that Claimant is unable to perform past relevant work. Accordingly, Claimant cannot be found disabled, or not disabled, at Step 4 and the assessment continues to Step 5.

Step 5

In Step 5, an assessment of Claimant's RFC 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). If the individual can adjust to other work, then there is no disability. Disability is found if an individual is unable to adjust to other work.

At this point in the analysis, the burden shifts from Claimant to the Department to present proof that Claimant has the RFC to obtain and maintain 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).

When the impairment(s) and related symptoms, such as pain, only affect the ability to perform the exertional aspects of work-related activities, Medical-Vocational guidelines found at 20 CFR Subpart P, Appendix 2, 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). However, 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). When a person has a combination of exertional and nonexertional limitations or restrictions, the rules pertaining to the strength limitations provide a framework to guide the disability determination **unless** there is a rule that directs a conclusion that the individual is disabled based upon strength limitations. 20 CFR 416.969a(d).

In this case, Claimant was ■■■ years old at application and ■■■ years old at the time of hearing and, thus, considered to be a younger individual (age 18-44) for purposes of Appendix 2. He is a college graduate with a history of skilled work experience as an automotive technician, but those skills, which are dependent on a capacity to perform heavy work, are not transferable. As discussed above, Claimant maintains the exertional RFC for work activities on a regular and continuing basis to meet the physical demands to perform at best sedentary work activities. The Medical-Vocational Guidelines, 201.28, do not result in a disability finding based on Claimant's exertional limitations. However, Claimant's ability to engage in sustained work activities is significantly limited by his nonexertional limitations. Claimant's inability to use his left hand, when coupled with his limited vision in the left eye and depression over his circumstances, renders him unable to perform basic work activities. The Department has failed to counter with evidence of significant numbers of jobs in the national economy which Claimant could perform despite his limitations. Therefore, the Department has failed to establish that, based on his RFC and age, education, and work experience, Claimant can adjust to other work. Accordingly, Claimant is disabled at Step 5 for purposes of SDA benefit program.

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds Claimant **disabled** for purposes of the SDA benefit program.

DECISION AND ORDER

Accordingly, the Department's determination is **REVERSED**.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Process Claimant's January 26, 2015, SDA application to determine if all the other non-medical criteria are satisfied and notify Claimant of its determination;
2. Supplement Claimant for lost benefits, if any, that Claimant was entitled to receive if otherwise eligible and qualified;
3. Review Claimant's continued eligibility in January 2016.



Alice C. Elkin

Administrative Law Judge
for Nick Lyon, Director

Department of Health and Human Services

Date Signed: **7/24/2015**

Date Mailed: **7/24/2015**

ACE / tlf

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

[illegible]