



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: July 28, 2017

MAHS Docket No.: [REDACTED] 17-005259

Agency No.: [REDACTED]

Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

HEARING DECISION

Following Petitioner'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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on [REDACTED] [REDACTED] from Detroit, Michigan. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS) was represented by [REDACTED], specialist.

ISSUE

The issue is whether MDHHS properly denied Petitioner's State Disability Assistance (SDA) eligibility for the reason that Petitioner 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 an unspecified date, Petitioner applied for SDA benefits.
2. On an unspecified date, MDHHS approved Petitioner for SDA benefits, in part, based on Petitioner's attendance at Michigan Rehabilitation Services (MRS).
3. On an unspecified date, Petitioner ceased MRS attendance due to a claim of disability.
4. On [REDACTED] [REDACTED], the Disability Determination Service determined that Petitioner was not a disabled individual (see Exhibit 1, pp. 11-17).

5. On [REDACTED], Petitioner turned 50-years-old.
6. On [REDACTED], MDHHS denied Petitioner's application for SDA benefits, effective [REDACTED] based on a determination that Petitioner was not disabled.
7. On [REDACTED], Petitioner requested a hearing disputing the termination of SDA benefits.
8. As of the date of the administrative hearing, Petitioner did not have employment earnings amounting to substantial gainful activity.
9. Petitioner's highest education year completed was the 12th grade.
10. Petitioner has a history of unskilled employment, with no known transferrable job skills.
11. Petitioner has various restrictions which preclude the performance of light employment.

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).

Petitioner requested a hearing to dispute a termination of SDA benefits. Petitioner claimed an inability to work for 90 days due to mental and/or physical disabilities. MDHHS presented a Notice of Case Action (Exhibit 1, pp. 6-9) dated [REDACTED], verifying Petitioner's eligibility was terminated based on a determination that Petitioner was not disabled.

SDA provides financial assistance to disabled adults who are not eligible for Family Independence Program (FIP) benefits. BEM 100 (April 2017), p. 5. 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 (April 2017), p. 1. A person is disabled for SDA purposes if he or she meets any of the following criteria:

- Receives other specified disability-related benefits or services....
- Resides in a qualified Special Living Arrangement (SLA) facility.
- Is certified as unable to work due to mental or physical disability for at least 90 days from the onset of the disability.

- Is diagnosed as having Acquired Immunodeficiency Syndrome (AIDS)...
Id., pp. 1-2.

When the person does not meet one of the [above] criteria, [MDHHS is to] follow the instructions in BAM 815, Medical Determination and Disability Determination Service (DDS), Steps for Medical Determination Applications. *Id.*, p. 4. The DDS will gather and review the medical evidence and either certify or deny the disability claim based on the medical evidence. *Id.* The review of medical evidence is primarily outlined by federal law.

[State agencies] must use the same definition of disability as used under SSI... 42 C.F.R. § 435.540(a). [Federal] law defines disability as the inability to do any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months. 20 C.F.R. § 416.905(a).

MDHHS adopted a functionally identical definition of disability (see BEM 260 (July 2015), p. 10). The same definition applies to SDA, though SDA eligibility factors only a 90-day period of disability.

The disability analysis for applications is different from benefit terminations. Generally, when MDHHS terminates SDA eligibility, an analysis based on benefit termination is appropriate. The present case is unusual in that Petitioner received SDA benefits without yet being certified as disabled for more than 90 days. Due to the absence of a determination of disability justifying Petitioner's SDA eligibility, it is found that the disability analysis based on applications is applicable.

In general, you have to prove... that you are blind or disabled. 20 C.F.R. § 416.912(a). You must inform us about or submit all evidence known... that relates to whether or not you are blind or disabled. *Id.* Evidence includes, but is not limited to objective medical evidence (e.g. medical signs and laboratory findings), evidence from other medical sources (e.g. medical history and opinions), and non-medical statements about symptoms (e.g. testimony) (see *Id.*).

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

The first step in the process considers a person's current work activity (see 20 C.F.R. §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. The 2017 monthly income limit considered SGA for non-blind individuals is [REDACTED]

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.*

Petitioner credibly denied performing current employment; no evidence was submitted to contradict Petitioner's testimony. Based on the presented evidence, it is found that Petitioner is not performing SGA. Accordingly, the disability analysis may proceed to the second step.

At the second step, we consider the medical severity of your impairment(s). 20 C.F.R. §416.920 (a)(4)(ii). If you do not have a severe medically determinable physical or mental impairment that meets the duration requirement in §416.909, or a combination of impairments that is severe and meets the duration requirement, we will find that you are not disabled. *Id.*

Generally, federal courts have imposed a de minimus standard upon petitioners 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, SSR 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 requirements are 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 (see 20 C.F.R. § 416.920 (5)(c)). In determining whether Petitioner's impairments amount to a severe impairment, all other relevant evidence may be considered. The analysis will begin with a summary of presented medical documentation and Petitioner's testimony.

Primary care physician (PCP) notes (Exhibit 1, pp. 71-82) dated [REDACTED], were presented. It was noted that Petitioner presented for ongoing treatment of psoriasis, arthritis, and depression. Complaints of fatigue, edema, and dyspnea were noted. Lumbar range of motion was moderately reduced. Knee swelling and moderate pain were noted. Visual psoriatic lesions were noted. Xanax, Lisinopril, and citalopram were continued.

Various medical assessments (Exhibit 1, pp. 126-131) dated [REDACTED], were provided by Petitioner's PCP. Petitioner's PCP indicated Petitioner was seen every 2-3 months. Symptoms included rash, dyspnea, and anxiety. Cited clinical findings included blood pressure of 140/100, PQ2 test score of 9, and "severe" plaque psoriasis. It was noted that psoriasis medications were unhelpful. Petitioner was deemed capable of standing less than an hour over an 8-hour workday, in part, due to obesity and arthritis. Petitioner was deemed capable of sitting 2 hours over an 8-hour workday. Petitioner was limited to lifting/carrying of less than 10 pounds. Petitioner's pain level was 5/10. Petitioner's disability was noted as unlikely to change. Petitioner was deemed "never" able to return to work.

PCP office visit notes (Exhibit 1, pp. 83-92) dated [REDACTED], were presented. It was noted that Petitioner presented for ongoing treatment of psoriasis, arthritis, and depression. Reported pain was 2/10. Right and left knee swelling was noted. Visual psoriatic lesions were noted. Xanax, Lisinopril, and citalopram were continued.

A mental status examination report (Exhibit 1, pp. 38-43) dated [REDACTED], was presented. The report was noted as completed by a consultative licensed psychologist. The following mental health symptoms were reported by Petitioner: "mild" suicidal thoughts, anxiety, panic attacks (occurring twice per week), and difficulty with concentration. Noted observations of Petitioner made by the consultative examiner include the following: adequate contact with reality, diminished self-esteem, fair eye contact, logical speech, and depressed mood. Diagnoses of major depressive disorder (recurrent and moderate) and generalized anxiety disorder were noted. Continued mental health treatment and continued medications were recommended. A fair prognosis was noted. Moderate impairments to social interaction, understanding and remembering, and withstanding pressure were noted. Mild impairment to concentration was noted.

An internal medicine examination report (Exhibit 1, pp. 45-52) dated [REDACTED], was presented. Complaints of arthritis and psoriasis were noted. Petitioner reported he is reducing his cigarette intake after smoking 2½ packs per day. Psoriasis on hands, knees, elbows, and abdomen were noted to discharge fluid. Petitioner's weight was 366 pounds. Petitioner walked with a slow gait without ambulatory assistance. Climbing stairs was noted to be "very difficult." Petitioner was assessed as capable of each of the following (without restriction): walk, stand, sit, lift, carry, stoop, dress, bend, and push/pull were noted. The examiner stated that clinical evidence did not justify a need for a cane. Various lumbar and bilateral knee ranges of motion were restricted.

A Psychiatric Review Technique and Mental Residual Functional Capacity (Exhibit 1, pp. 53-67, 107-125) dated [REDACTED], were presented. The documents were signed by a licensed psychologist as part of Petitioner's SSA claim of disability. Moderate restrictions to understanding and remembering, interaction, concentration, and adaptation were noted. A moderate concentration obstacle was noted. It was noted Petitioner reported being socially active. A consultative examination report dated

██████████, was the cited basis of support for restrictions. No marked restrictions were noted.

Petitioner testified he has psoriasis on his hands, elbows, back of knees, stomach, and ankles; during the hearing, discoloration was apparent on a significant percentage of Petitioner's forearms. Petitioner testified his psoriasis flares whenever he is stressed. Petitioner testified that the psoriasis is not particularly painful and does not affect his ability to perform employment.

Petitioner testified he has arthritis in his knees. Petitioner testified ambulation, particularly climbing stairs, is difficult. Petitioner testified he takes over-the-counter pain medication.

Petitioner testified he is 5'5" and his weight is ██████ pounds. Petitioner's testimony is indicative of a BMI of about 60. Petitioner's morbid obesity is certainly an obstacle in Petitioner's ambulation.

Petitioner also alleged impairments, in part, due to depression and anxiety. Petitioner testified he takes Celexa and Xanax to combat depression and anxiety.

Petitioner's treatment history was consistent with degrees of standing, ambulation, bending, and non-exertional restrictions. Petitioner's treatment history was established to have lasted at least 90 days and at least since Petitioner's date of SDA application. Accordingly, it is found that Petitioner established having a severe impairment and the disability analysis may proceed to Step 3.

At the third step, we also consider the medical severity of your impairment(s). 20 C.F.R. § 416.920 (4)(iii). If you have an impairment(s) that meets or equal one of our listings in appendix 1 to subpart P of part 404 of this chapter and meets the duration requirement, we will find that you are disabled. *Id.* If you have an impairment(s) which meets the duration requirement and is listed in appendix 1 or is equal to a listed impairment(s), we will find you disabled without considering your age, education, and work experience. *Id.* 20 C.F.R. § 416.920 (d).

Petitioner's most visually obvious impairment was based on psoriasis. The relevant SSA listing reads as follows:

8.05 Dermatitis (for example, psoriasis, dyshidrosis, atopic dermatitis, exfoliative dermatitis, allergic contact dermatitis), with extensive skin lesions that persist for at least 3 months despite continuing treatment as prescribed.

Petitioner's psoriasis appeared to have lasted for more than 3 months. Skin lesions were documented throughout Petitioner's medical records. It is debatable if Petitioner complied with treatment.

It is curious that Petitioner alleged disability primarily based on a skin condition yet never saw a skin specialist. Petitioner testimony implied he trusts the opinion of his physician, with whom he has a 21-year history. It is possible that Petitioner's primary care physician's treatment is as helpful as that of a specialist, however, it is not appreciated that Petitioner never pursued a specialist's opinion. This consideration detracts from a finding that Petitioner followed prescribed treatment, though it is acknowledged Petitioner's physician apparently never recommended treatment by a specialist.

Petitioner testified prescribed medications are not successful, though an over-the-counter medication is very good at controlling his psoriasis. Petitioner did not explain why psoriasis was so prevalent if a medication could control it. This consideration also raises doubts about Petitioner's compliance with medication.

Petitioner testified a lighting treatment could be helpful in controlling psoriasis. Petitioner testified he is unable to afford the transportation to attend appointments. Petitioner's lack of transportation is a factor of life, however, it is not a persuasive excuse for never even attempting the treatment. It should be noted that Petitioner alleged psoriasis ongoing for several years.

A listing for affective disorder (Listing 12.04) was considered based on a diagnosis of depression. The listing was rejected due to a failure to establish an extreme restriction or multiple marked restrictions to understanding or applying information, interacting with others, concentration or persistence, and/or adaptation. It was also not established that Petitioner had minimal capacity to adapt to changes in environment or to demands that are not already part of daily life.

A listing for inflammatory arthritis (Listing 14.09) was considered based on Petitioner's complaints of arthritis. The presented medical records were insufficient to establish that Petitioner has an inability to ambulate effectively, perform fine and gross movements, or suffers inflammation or deformities with a diagnosis of ankylosing spondylitis or other spondyloarthropathies, or suffers repeated manifestations of inflammatory arthritis.

It is found Petitioner does not meet any SSA listings. Accordingly, the analysis may proceed to the final steps of the disability analysis.

If your impairment(s) does not meet or equal a listed impairment, we will assess and make a finding about your residual functional capacity based on all the relevant medical and other evidence in your case record.... 20 C.F.R. § 416.920 (e). We use our residual functional capacity assessment at the fourth step of the sequential evaluation process to determine if you can do your past relevant work... and at the fifth step of the sequential evaluation process (if the evaluation proceeds to this step) to determine if you can adjust to other work... *Id.*

Your impairment(s), and any related symptoms, such as pain, may cause physical and mental limitations that affect what you can do in a work setting. 20 C.F.R. § 416.945

(a)(1). Your residual functional capacity is the most you can still do despite your limitations. *Id.* We will assess your residual functional capacity based on all the relevant evidence in your case record. *Id.* We will consider all of your medically determinable impairments of which we are aware, including your medically determinable impairments that are not “severe,”... when we assess your residual functional capacity. 20 C.F.R. § 416.945 (a)(2). We will assess your residual functional capacity based on all of the relevant medical and other evidence. 20 C.F.R. § 416.945(a)(3). We will first use our residual functional capacity assessment at step four of the sequential evaluation process to decide if you can do your past relevant work. 20 C.F.R. § 416.945(a)(5).

Petitioner testified he uses a cane 3 times per week. Petitioner testified he was not prescribed a cane. A consultative examiner found no need for Petitioner’s use of a cane. Presented evidence was not indicative that Petitioner requires a cane.

Petitioner testified he can walk 1- 1½ blocks before knee pain prevents further walking. Petitioner testified he is limited to standing of 15 minutes, also due to knee pain. Petitioner testified he is restricted to sitting for 15-20 minute periods. Petitioner testified he would need a break of 30-45 minutes before again sitting 15-20 minutes. Petitioner testified he could sit 4 hours and stand/walk 2-3 hours of an 8-hour workday. Petitioner testified he is limited to lifting/carrying of 20 pounds.

Petitioner testified he uses a shower chair when showering. Petitioner testified he has no difficulties with dressing or grooming. Petitioner testified he can vacuum and wash dishes, though he cannot move furniture when dusting. Petitioner testified he perform laundry without notable problems. Petitioner testified he has a friend assist with loading and unloading groceries.

Petitioner’s stated sitting and standing restrictions were consistent with an inability to perform most employment amounting to SGA. Petitioner’s testimony will be evaluated with presented medical records.

A Physical Residual Functional Capacity Assessment (Exhibit 1, pp. 99-106) dated [REDACTED], was presented. The assessment was signed by a consultant physician as part of Petitioner’s SSA claim of disability. The stated basis for assessments were uncited medical records. Petitioner’s abilities included occasional and frequent lifting of 10 pounds, standing or walking about 2 hours in an 8-hour workday, sitting about 6 hours in an 8 hour workday, and unlimited pushing/pulling. Morbid obesity was noted to limit lifting/carrying and walking. Occasional climbing, stooping, and kneeling were noted; Petitioner was deemed incapable of climbing high places.

The assessments from SSA were consistent with an ability to perform sit-down jobs, but not more strenuous work. The assessments were consistent with the few treatment documents that were presented.

The fourth step in analyzing a disability claim requires an assessment of the Petitioner's residual functional capacity (RFC) and past relevant employment. 20 C.F.R. § 416.920(a)(4)(iv). An individual is not disabled if it is determined that a petitioner 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 C.F.R. § 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 C.F.R. § 416.960(b)(3).

Petitioner testified he performed past employment as a custodian. Petitioner testified his duties included cleaning bathrooms, classrooms, and snow removal.

Petitioner testified he is unable to perform the ambulation required of his past employment. Petitioner's testimony was consistent with presented medical evidence.

It is found Petitioner is unable to perform past employment. Accordingly, the analysis may proceed to the final step.

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 C.F.R. § 416.967.

Sedentary work involves lifting of no more than 10 pounds at a time and occasionally lifting or carrying articles like docket files, ledgers, and small tools. 20 C.F.R. § 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 C.F.R. § 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 C.F.R. § 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 C.F.R. § 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 C.F.R. § 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 non-exertional. 20 C.F.R. § 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 (e.g. can't tolerate dust or fumes); or difficulty performing the manipulative or postural functions of some work such as reaching, handling, stooping, climbing, crawling, or crouching. 20 C.F.R. § 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 C.F.R. § 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).

Petitioner happened to turn 50 years-of-age in the month that MDHHS denied his SDA application. The denial happened to affect Petitioner's SDA eligibility for May 2017 (2 months after Petitioner turned 50). Thus, Petitioner's age must be factored as closely approaching advance age in the medical-vocational rule evaluation.

Petitioner's RFC is consistent with a limitation of performing sedentary employment, but not light employment. It is found that Petitioner is limited to performance of sedentary employment.

Based on Petitioner's exertional work level (sedentary), age (closely approaching advanced age), education (high school with no direct entry into skilled work), and employment history (no transferrable skills), Medical-Vocational Rule 201.14 is found to apply. This rule dictates a finding that Petitioner is disabled. Accordingly, it is found that MDHHS improperly found Petitioner to be not disabled for purposes of SDA eligibility.

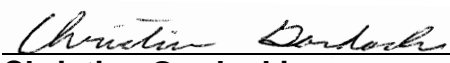
DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law finds that MDHHS improperly denied Petitioner's application for SDA benefits. It is ordered that MDHHS begin to perform the following actions within 10 days of the date of mailing of this decision:

- (1) reinstate Petitioner's SDA eligibility from [REDACTED];
- (2) evaluate Petitioner's eligibility subject to the finding that Petitioner is a disabled individual;
- (3) initiate a supplement for any benefits not issued as a result of the improper application denial; and
- (4) schedule a review of benefits in one year from the date of this administrative decision, if Petitioner is found eligible for future benefits.

The actions taken by MDHHS are **REVERSED**.

CG/hw



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

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

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

DHHS

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Petitioner

[REDACTED]
[REDACTED]
[REDACTED]