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**STATE OF ALASKA  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
OFFICE OF HEARINGS AND APPEALS**

In the Matter of )  
 )  
 [REDACTED], ) OHA Case No. 11-FH-132  
 )  
 Claimant. ) Division Case No. [REDACTED]  
 )  
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**FAIR HEARING DECISION**

**STATEMENT OF THE CASE**

[REDACTED] (Claimant) applied for Interim Assistance benefits on March 9, 2011. (Ex. 1) On March 25, 2011, the Division of Public Assistance Eligibility Technician telephoned the Claimant and verbally notified her that her Interim Assistance application was denied. (Ex 4.1) The Claimant verbally requested a Fair Hearing that same day, March 25, 2011. (Ex. 4.13) On March 29, 2011, the Division sent the Claimant written notice her Interim Assistance application was denied. (Ex. 5)

This Office has jurisdiction pursuant to 7 AAC 49.010.

The Claimant's hearing was held on April 26 and June 1, 2011. The Claimant attended the hearing telephonically; she represented herself and testified on her own behalf. [REDACTED], Public Assistance Analyst with the Division, attended in person; she represented the Division and testified on its behalf. [REDACTED], Health Program Manager II with the Division, attended telephonically on April 26, 2011, and testified on behalf of the Division.

The record was left open after the June 1, 2011 hearing, until June 24, 2011, for the Claimant to submit additional information and for the Division to respond. The Claimant did not submit any additional information. As a result, the Division did not file a response.

**ISSUE**

Was the Division correct when it denied the Claimant's March 9, 2011 Interim Assistance application?

## SUMMARY OF DECISION

The Claimant experiences a number of impairments, both mental and physical. There is not sufficient medical evidence in the record to demonstrate that most of her impairments are severe. However, she does experience a medically documented severe physical impairment, specifically spinal stenosis at C5-6 and C6-7. Her severe physical impairment does not meet or equal the Social Security listings of impairments contained in 20 CFR 404 Subpart P, Appendix 1. Nor does it prevent the Claimant from doing her previous relevant work. As a result, the Claimant does not satisfy the Interim Assistance program's eligibility requirement, set forth in 7 AAC 40.180(b)(1), that she is "likely to be found disabled by the Social Security Administration." The Division was therefore correct when it denied the Claimant's March 9, 2011 Interim Assistance application.

## FINDINGS OF FACT

The following facts were proven by a preponderance of the evidence:

1. The Claimant is currently 41 years old (birth date [REDACTED]). (Ex. 1) She has a GED. (Ex. 4.11)
2. The Claimant has been trained as a cosmetologist. (Claimant testimony) She has not worked in the cosmetology field since 2002, because she experiences essential tremor. *Id.* Since 2002, she has worked in fast food/waitressing/customer service fields. *Id.* The last time she worked was in 2006, when she worked for a veterinary clinic caring for dogs. *Id.*
3. The Claimant had been approved for Interim Assistance in the past, based upon a May 5, 2005 application. (Ex. 2.1) On February 16, 2011, her Interim Assistance benefits were terminated effective the end of February 2011 because the Social Security Administration denied her appeal from its decision that she was not disabled. *Id.*
4. The Claimant reapplied for Interim Assistance benefits on March 9, 2011. (Ex. 1)
5. Dr. [REDACTED], M.D., completed a Preliminary Examination for Interim Assistance Form (AD #2) on the Claimant's behalf on March 9, 2011. (Exs. 4.3 – 4.4) He marked the box on the first page of the AD # 2 that indicated the Claimant experienced "[s]evere mental deficiency (developmental disabilities) evidenced by dependence on others for personal needs (e.g., hygiene) and other routine daily activities). Does not include mental disorders." (Ex. 2.3) On the second page of the AD # 2, Dr. [REDACTED] stated the Claimant had diagnoses of Affective Disorder and Personality Disorder (Ex. 2.4) He further indicated the Claimant was expected to recover from her conditions within 6 months. *Id.*
6. The Division's medical reviewer reviewed the Claimant's March 9, 2011 Interim Assistance application and issued his written conclusion, on March 25, 2011, that the Claimant's listed impairments, Affective Disorder and Personality Disorder, did not satisfy the durational requirement that an impairment last 12 months or longer because the physician indicated that the Claimant was expected to recover within 6 months. (Ex 4.2)

7. The Division then informed the Claimant verbally, on March 25, 2011, and in writing, on March 29, 2011, that her Interim Assistance application was denied because the Claimant did not meet the 12 month durational requirement. (Exs. 4.1, 5)

8. The Claimant verbally requested a hearing on March 25, 2011. (Ex. 4.1)

9. After the Claimant requested her hearing, she submitted additional documentation to the Division:

a. A November 24, 2007 Social Security Decision that stated the Claimant had mental health diagnoses of Major Depressive Disorder, Panic Disorder, and Borderline Personality Disorder. (Ex. B7) The Decision found the Claimant was mildly/moderately affected by her mental health disorders. (Ex. B3) That Decision also reviewed the Claimant's history of knee pain and concluded the Claimant was capable of light work and was not disabled. (Exs. B4, B6 – B9)

b. Medical records stating the Claimant had pain near the right shoulder blade on April 11, 16, and 23, 2011. (Exs. A3, A7, and A9) On April 16, 2011, she was in "mild to moderate" distress. (Ex. A8) On April 23, 2011, she was in "mild distress." (Ex. A4) The April 23, 2011 examination report stated the Claimant had right mid-back and right shoulder tenderness, along with right finger numbness. *Id.*

c. Medical records stating the Claimant had an MRI on April 20, 2011, which showed mild to moderate spinal stenosis at C5 - 6, and mild to moderate spinal stenosis at C6 – 7. (Ex. A5)

d. Medical records stating the Claimant had the following medical history:

Anxiety State Unspecified, Depressive Disorder Ot. Other Chronic Pain  
L knee/arthritis, Asthma Unspecified, Mitral Valve Disorder prolapse.  
Obesity Unspecified.

(Ex. A3)

10. The Division's medical reviewer testified as follows:

a. The Claimant's mental health diagnoses of affective disorder and personality disorders are too broad to determine what her specific impairments are, given that affective disorders covers a broad range of impairments, such as depressive disorder and bipolar disorder. Similarly, personality disorder is a broad term that covers a wide range of specific mental impairments.

b. The Claimant does not meet Social Security disability criteria due to her mental impairments because the Preliminary Examination for Interim Assistance form (form

AD #2) specifically indicates that she will recover in a six month time period, i.e. she fails to satisfy the durational requirement.

- c. The Claimant's back problems do not qualify her as disabled. They do not meet the specific requirements for the Social Security musculoskeletal disability category. In addition, the Claimant's gait is not disturbed, and she does not have a loss of use of both her upper extremities.
- d. There was no medical evidence showing the requisite severity for the Claimant's other medical conditions (asthma, knee arthritis, mitral valve prolapse).

11. The Claimant testified as follows:

- a. She had experienced depression, anxiety, obsessive compulsive disorder, and post-traumatic stress disorder for most of her life. She was first diagnosed with these conditions when she was 9 to 11 years old in a foster home. Her doctor wrote down a six month duration on her mental health conditions on her Preliminary Examination for Interim Assistance form (form AD #2) because he wanted her to see a psychiatrist.
- b. Her back issues have just occurred. She knew she was having pain but did not know what was causing it. She needs to see a neurosurgeon, and her access to medical care is very limited.
- c. She has CAMA coverage for her mental health care.
- d. She has substantial memory problems.
- e. Her hand is numb.
- f. She was hospitalized in February of 2010 due to a suicide attempt.
- g. She experiences an incredible level of pain.

## **PRINCIPLES OF LAW**

### **I. Burden of Proof and Standard of Proof**

A party who is seeking a change in the status quo has the burden of proof by a preponderance of the evidence. *State, Alcoholic Beverage Control Board v. Decker*, 700 P.2d 483, 485 (Alaska 1985); *Amerada Hess Pipeline v. Alaska Public Utilities Comm'n*, 711 P.2d 1170, n. 14 at 1179 (Alaska 1986). "Where one has the burden of proving asserted facts by a preponderance of the evidence, he must induce a belief in the minds of the [triers of fact] that the asserted facts are probably true." *Robinson v. Municipality of Anchorage*, 69 P.3d 489, 495 (Alaska 2003).

## II. Interim Assistance Program Requirements

Interim Assistance is a benefit provided by the state to Adult Public Assistance applicants while they are waiting for the Social Security Administration to approve their Supplemental Security Income application. 7 AAC 40.170(a) and (b); AS 47.25.255.

In order to qualify for Interim Assistance, the applicant must be “likely to be found disabled by the Social Security Administration.” 7 AAC 40.180(b)(1). Pursuant to 7 AAC 40.180(b), the Division is to determine the likelihood of whether the applicant would “be found disabled by the Social Security Administration.” The applicant must therefore either fall within the Social Security Administration’s presumptive disability criteria or meet the disability criteria for impairments listed in the Social Security regulations. 7 AAC 40.180(b)(1).

### A. Presumptive Disability

The Interim Assistance eligibility determination process first asks the question if an applicant is presumptively disabled. *See* 7 AAC 40.180(b)(1)(A). In order for a person to qualify for Interim Assistance as presumptively disabled, the applicant’s impairment must meet the Social Security Administration’s Supplemental Security Income program’s “presumptive disability criteria under 20 C.F.R. 416.934, as revised as of April 1, 2005, and adopted by reference.” 7 AAC 40.180(b)(1)(A). The Division’s Preliminary Examination for Interim Assistance form (form AD # 2)<sup>1</sup> contains the Division’s list<sup>2</sup> of presumptively disabling conditions:

1. Amputation of a leg at the hip.
2. Total deafness.
3. The applicant is a recipient of hospice services due to terminal illness.
4. Spinal cord injury which produces an inability to ambulate without the use of a walker or crutches for longer than a two week period.
5. Bed confinement of immobility without a wheelchair, walker, or crutches, due to a longstanding condition, excluding recent accident and surgery. This does not include simple pain.

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<sup>1</sup> <http://dpaweb.hss.state.ak.us/e-forms/pdf/ad2.pdf> (accessed on July 20, 2011).

<sup>2</sup> The Division’s list of presumptively disabling conditions contained on its Preliminary Examination for Interim Assistance form (form AD # 2) is different from the list of presumptively disabling conditions listed in Social Security regulation 7 CFR 416.934. The Preliminary Examination for Interim Assistance form (form AD # 2) does not include the presumptive disabling condition of total blindness listed in 7 CFR 416.934. In addition, the Preliminary Examination for Interim Assistance form (form AD # 2) contains four presumptive disabling conditions not listed in 7 CFR 416.934: individual receiving hospice services due to a terminal illness, spinal cord injury which produces an inability to ambulate without the use of a walker or crutches for longer than a two week period, end stage renal disease with ongoing dialysis, and HIV with a secondary infection which is severe enough for the individual to be considered disabled.

6. Severe mental deficiency (developmental disabilities), which is evidenced by dependence on other for personal needs, such as hygiene, and other routine daily activities. This does not include mental illness.
  7. Downs Syndrome
  8. End stage renal disease with ongoing dialysis.
  9. HIV with a secondary infection which is severe enough for the individual to be considered disabled.
  10. Stroke, which occurred more than 3 months ago, with continued difficulty in walking or using a hand or arm.
  11. Cerebral palsy, muscular dystrophy, or muscle atrophy and marked difficulty in walking, speaking, or coordination of the hands and arms.
  12. Amyotrophic lateral sclerosis (Lou Gehrig's disease).
- B. General (non-presumptive) Disability

If an applicant is not presumptively disabled, the Social Security disability determination process involves a step-by-step "sequential evaluation process," which is described in 20 CFR 416.920:

1. Is the applicant performing substantial gainful employment as defined by the applicable Social Security regulations? If so, the applicant is not disabled. 20 CFR 416.920(a)(4)(i). If the applicant is not performing substantial gainful employment, then the applicant must satisfy the next question.
2. Is the applicant's impairment severe? A severe impairment is one that "significantly limits [a person's] physical or mental ability to do basic work activities." 20 CFR 416.920(c). Medical evidence is required to establish an applicant's impairment. 20 CFR 416.908. If an applicant has multiple impairments, the combined effect of all the impairments must be considered in determining whether an applicant is severely impaired. 20 CFR 416.923. If the impairment is not severe, the applicant is not disabled. 20 CFR 416.920(a)(4)(ii). If an applicant is severely impaired, then the applicant must satisfy the next question.
3. Has the applicant's severe impairment lasted for a continuous period of at least 12 months, or can it be expected to last for a continuous period of at least twelve months? 20 CFR 416.909. If the severe impairment does not satisfy this duration requirement, the applicant is not disabled. 20 CFR 416.920(a)(4)(ii). If the severe impairment satisfies this duration requirement, the applicant must satisfy the next question.
4. Does the applicant's severe impairment meet or medically equal the listing of impairments contained in the Social Security regulations located at 20 CFR Pt. 404, Subpt. P, App. 1? If it does, the

applicant is disabled and no further inquiry is required. 20 CFR 416.920(a)(4)(iii). If the severe impairment does not meet or medically equal the listing of impairments, then the applicant must satisfy the next question.

5. Does the applicant's severe impairment prevent him from doing his previous relevant work? This involves an evaluation of the applicant's residual functional capacity. If the applicant is not prevented from performing his previous relevant work, the applicant is not disabled. 20 CFR 416.920(a)(4)(iv). Otherwise, the applicant must satisfy the next question.

6. Is the applicant capable of performing other work? Answering this question requires the application of the Social Security medical vocational guidelines that include the evaluation of the applicant's residual functional capacity, age, education, English literacy, and previous work experience. If the applicant is not capable of performing other work, he is disabled. 20 CFR 416.920(a)(4)(v).

In determining whether a person can perform other work, the Social Security regulations define the characteristics of different levels of 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 controls. To be considered capable of performing a full or wide range of light work, you must have the ability to do substantially all of these activities.

20 CFR 416.967(b).

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.

20 CFR 416.967(a).

The Social Security medical vocational guidelines for a younger applicant (ages 18 to 44) who is limited to sedentary work, who has a high school diploma or a GED, with unskilled work experience, normally direct a conclusion that the applicant is not disabled. 20 CFR Pt. 404, Subpt. P, App. 2, § 201.27. However, if such a person is not able "to perform a full range of sedentary work" they may be found disabled. 20 CFR Pt. 404, Subpt. P., App. 2, § 201.00(h)(3). Additionally, the medical vocational guidelines, located at 20 CFR Pt. 404, Subpt. P, App. 2, are not strictly applied when an applicant has both exertional and non-exertional limitations that limit his ability to work. 20 CFR 416.969a(d).

Exertional limitations are “limitations and restrictions imposed by [an applicant’s] impairment(s) and related symptoms, such as pain, [that] affect only ... the ability to meet the strength demands of jobs (sitting, standing, walking, lifting, carrying, pushing, and pulling).” 7 CFR 416.969a(b).

Non-exertional limitations are those that are not strength demanding, such as difficulty functioning due to anxiety and depression, or difficulty concentrating, understanding, remembering, seeing, or hearing, or difficulty “reaching, handling, stooping, climbing, crawling, or crouching.” 7 CFR 416.969a(c). Pain is also a nonexertional impairment. *E.g.*, *Baker v. Barnhart*, 457 F.3d 882, 894 (8th Cir.2006); *Haley v. Massanari*; 258 F.3d 742, 747 (8th Cir.2001); *Cline v. Sullivan*, 939 F.2d 560, 565 (8th Cir.1991); *Prince v. Bowen*, 894 F.2d 283, 287 (8th Cir.1990).

### ANALYSIS

The issue in this case is whether the Division was correct when it denied the Claimant’s March 9, 2011 Interim Assistance application. Because Claimant is an applicant for benefits, she is the party seeking to change the status quo. The Claimant therefore has the burden of proof by a preponderance of the evidence.

Applications for Interim Assistance are governed by 7 AAC 40.180, which requires that an applicant appear “likely to be found disabled by the Social Security Administration.” 7 AAC 40.180(b)(1). This requires an applicant be either presumptively disabled according to Social Security criteria or that he have a disabling impairment according to Social Security criteria. 7 AAC 40.180(b).

#### A. Presumptive Disability

In order to qualify for Interim Assistance as presumptively disabled, the Claimant must meet the Supplemental Security Income program’s “presumptive disability criteria under 20 C.F.R. 416.934.” 7 AAC 40.180(b)(1)(A). In this case, Dr. [REDACTED] checked the box on the Division’s Preliminary Examination for Interim Assistance form that indicated the Claimant experienced a presumptive disqualifying condition contained in 20 CFR 416.934. That box reads the Claimant experienced “[s]evere mental deficiency (developmental disabilities) evidenced by dependence on others for personal needs (e.g., hygiene) and other routine daily activities). Does not include mental disorders.” *See* Finding of Fact 5 above.

The Claimant has mental health diagnoses of affective disorder and personality disorder. *See* Finding of Fact 5 above. These are mental illnesses. They, by definition, are not presumptive disabilities, which do not include mental disorders. The Claimant has failed to prove, by a preponderance of the evidence, that she is presumptively disabled.

#### B. General (non-presumptive) Disability

Because the Claimant is not presumptively disabled, it is necessary to follow the Social Security disability determination process “sequential evaluation process” described in 20 CFR 416.920.

1. Current Employment.

The last time the Claimant worked was in 2006, i.e. she is currently unemployed. *See* Finding of Fact 2 above. She therefore satisfies the first step of the Social Security disability analysis. It is therefore necessary to proceed to the next step, and determine if she is severely impaired.

2. Severe Impairment.

a. Mental Impairments

The March 9, 2011 Preliminary Examination for Interim Assistance form (form AD #2) indicates that the Claimant has diagnoses of Affective Disorder and Personality Disorder. *See* Finding of Fact No. 5 above. However, there is no medical evidence in the record that provides any information showing that the Claimant's mental health conditions constitute severe impairments.<sup>3</sup> As a result, the Claimant has not met her burden of proof and demonstrated that her mental health conditions are severe impairments. This decision will therefore not address her mental health conditions further.

b. Physical Impairments

The Claimant has a history of physical impairments. These are left knee/arthritis, asthma, mitral valve disorder prolapse, and obesity. *See* Finding of Fact 9(d) above. However, there is no medical evidence in the record which provides any information demonstrating that these conditions constitute severe impairments as defined by 20 CFR 416.920(c). As a result, the Claimant has not met her burden of proof as to these conditions. This decision will therefore not address these specific conditions further.

The Claimant has a recent history of back problems. The medical records show the following:

- i. She had an MRI conducted on April 20, 2011, which showed mild to moderate spinal stenosis at C5 - 6, and mild to moderate spinal stenosis at C6 – 7. *See* Finding of Fact 9(c) above.
- ii. She experienced right shoulder pain on April 11, 16, and 23, 2011. She was in mild to moderate distress on April 16, 2011. She was in mild distress on April 23, 2011. She experienced numbness in her right fingers on April 23, 2011. *See* Finding of Fact 9(b) and (c) above.

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<sup>3</sup> The Claimant supplied a November 24, 2007 Social Security disability decision which indicated the Claimant was mildly/moderately affected by her mental health disorders. *See* Finding of Fact 9(a) above. However, this is not medical evidence, nor is it current. As a result, the November 24, 2007 Social Security disability decision provides no guidance in this case. In addition, although the Claimant testified she was hospitalized due to a suicide attempt in February 2010 (Finding of Fact 11(f) above), there is no medical document in the record supporting her testimony.

The Claimant also testified that she receives Chronic and Acute Medical Assistance (CAMA) benefits for her mental health conditions. *See* Finding of Fact 11(c) above. However, eligibility for the CAMA program does not require that a recipient experience a disabling condition, merely that she have a specific diagnosis and meet financial requirements. *See* AS 47.08.150 and 7 AAC 48.500 *et. seq.* The mere fact that the Claimant receives CAMA benefits does not constitute proof that her mental health conditions are severe.

The Claimant also testified she was in incredible pain. *See* Finding of Fact 11(g) above.

Because there is medical evidence showing spinal stenosis and medically documented mild to moderate pain, the Claimant's back condition is sufficient to qualify her as meeting the severe impairment requirement due to her back pain alone. It is therefore necessary to move to the next step in the Social Security disability analysis and determine if her severe physical impairment has lasted or can be expected to last for a continuous period of at least 12 months.

3. Duration.

The Claimant's back condition, specifically her spinal stenosis, is a recent condition. There is no medical evidence in the record showing that it is expected to last longer than 12 months. However, spinal stenosis is not the type of condition that can be expected to resolve itself. As such, Claimant's severe physical impairment can be expected to last for over 12 months. It meets the durational requirement.

Because the Claimant's severe physical impairment can be expected to persist for longer than 12 months, it is necessary to proceed to the next step of the Social Security disability analysis and determine if her severe physical impairment meets or medically equals the listing of impairments contained in the Social Security regulations located at 20 CFR Pt. 404, Subpt. P, App. 1.

4. Meeting or Equaling the Social Security Impairment Listings.

The Claimant's severe physical impairment consists of her medically documented spinal stenosis. The Social Security system classifies spinal stenosis under the musculoskeletal category. In order for the Claimant to meet or medically equal the criteria set out in the musculoskeletal listing, she must have "an extreme limitation of the ability to walk" or "an extreme loss of function of both upper extremities." 20 CFR Pt 404, Subpart P, Appendix 1, §§ 1.00(B)(2)(b)(1) and 1.00(B)(2)(c).

An "extreme limitation of the ability to walk" includes the "inability to walk without the use of a walker, two crutches, or two canes" and "the inability to carry out routine ambulatory activities, such as shopping and banking." 20 CFR Subpt. P, App.1, § 1.00(B)(2)(b).

None of the medical evidence presented shows any limitations with regard to the Claimant's ability to walk. She therefore does not have "an extreme limitation of the ability to walk." The medical evidence shows that the Claimant has right shoulder pain and right finger numbness. *See* Finding of Fact 9(b) above. However, this does not constitute "an extreme loss of function of both upper extremities." As a result, she does not meet or medically equal the Social Security listing of impairments for the musculoskeletal category. It is therefore necessary to proceed to the next step of the Social Security disability analysis and determine if she can perform her previous relevant work.

5. Previous Relevant Work.

The Claimant worked as a cosmetologist until 2002. After that she worked in fast food, customer service, and in a veterinary clinic. The Claimant has not worked since 2006. *See* Finding of Fact 2. Despite the fact the Claimant has not worked since 2006, and despite her testimony that she experiences incredible pain, there is no medical evidence in the record that shows she is currently not able to perform her previous relevant work (customer service, fast food, veterinary clinic). As a result, the Claimant has not shown that she cannot perform her previous relevant work.

The Social Security disability rules provide that if the applicant is not prevented from performing her previous relevant work, the applicant is not disabled. 20 CFR 416.920(a)(4)(iv). Because the Claimant did not prove, by preponderance of the evidence, that she was not capable of performing her previous relevant work, she has failed to satisfy the Interim Assistance program's requirement that she is "likely to be found disabled by the Social Security Administration." *See* 7 AAC 40.180(b)(1). The Division was therefore correct to deny the Claimant's March 9, 2011 Interim Assistance application.

### **CONCLUSIONS OF LAW**

1. The Claimant is not currently engaged in substantial gainful employment.
2. The Claimant has severe physical impairments which can be expected to last for longer than 12 months.
3. The Claimant's severe impairments do not satisfy the requirements for a presumptive disability, as contained in 20 C.F.R. 416.934 and 7 AAC 40.180(b)(1)(A).
4. The Claimant's severe impairments do not meet or equal the Social Security Disability listings contained in 20 CFR Section 404, Subpart P, Section 1.
5. The Claimant's severe impairments do not prevent her from performing her previous relevant work.
6. As a result, the Claimant has failed to prove, by a preponderance of the evidence, that she satisfies the Interim Assistance program's eligibility requirement that she is "likely to be found disabled by the Social Security Administration." *See* 7 AAC 40.180(b)(1).

### **DECISION**

The Division was correct when it denied the Claimant's March 9, 2011 Interim Assistance application.

### **APPEAL RIGHTS**

If for any reason the Claimant is not satisfied with this decision, the Claimant has the right to appeal by requesting a review by the Director. If the Claimant appeals, the request must be sent within 15 days from the date of receipt of this Decision. Filing an appeal with the Director could result in the reversal of this Decision. To appeal, send a written request directly to:

