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

SHELLY EDGERTON DIRECTOR



Date Mailed: May 16, 2016 MAHS Docket No.: 16-004699 Agency No.: Petitioner:

## ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

## ORDER OF DISMISSAL PURSUANT TO WITHDRAWAL OF HEARING REQUEST AT HEARING

This matter is before the Michigan Administrative Hearing System upon Petitioner's request for hearing made pursuant to MCL 400.9 and MCL 400.37, and Titles 7, 42, and 45 of the Code of Federal Regulations, which govern the administrative hearing and appeal process. After due notice, a telephone hearing was commenced on from Detroit, Michigan. The Petitioner was represented by from Detroit, Michigan. The Detroit, Alter and Human Services (Department) was represented by from Detroit, Michigan, Assistance Payments Supervisor.

The hearing was requested to dispute the Department's action taken with respect to the closure of the Petitioner's Medical Assistance application program benefits. Shortly after commencement of the hearing, Petitioner's AHR testified that she now understood the actions taken by the Department and had already signed a Hearing Withdrawal (which was not received by MAHS prior to the hearing), and did not wish to proceed with the hearing. The Request for Hearing was withdrawn. The Department agreed to the dismissal of the hearing request.

Pursuant to the withdrawal of the hearing request filed in this matter, the Request for Hearing is, hereby, **DISMISSED**.

IT IS SO ORDERED.

LMF/jaf

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Lyáň M. Ferris 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.

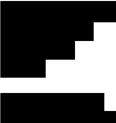
A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; Attention: MAHS Rehearing/Reconsideration Request.

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

Authorized Hearing Rep.

Petitioner







CC:

