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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

MARLON I. BROWN, DPA DIRECTOR



Date Mailed: March 28, 2024 MOAHR Docket No.: 24-001295

Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Colleen Lack

ORDER OF DISMISSAL PURSUANT TO WITHDRAWAL OF HEARING REQUEST AT HEARING

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; 42 CFR 438.400 to 438.424; 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 March 19, 2024, from Lansing, Michigan. The Petitioner was represented by Authorized Hearing Representative (AHR), Language L

The hearing was requested to dispute the Department's action taken with respect to Medical Assistance (MA) benefits. On March 26, 2024, Petitioner's AHR submitted a Hearing Request Withdrawal indicating the Department has changed its action in the case and Petitioner is now satisfied.

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

IT IS SO ORDERED.

CL/dm

Colleen Lack

Administrative Law Judge

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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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules Reconsideration/Rehearing Request P.O. Box 30639 Lansing, Michigan 48909-8139

Via-Electronic Mail :	DHHS Jessica Sheely Hillsdale County DHHS MDHHS-Hillsdale- Hearings@michigan.gov
	SchaeferM
	EQADHearings
	BSC4HearingDecisions
	MOAHR
Via-First Class Mail :	Petitioner
	Authorized Hearing Rep.