



GRETCHEN WHITMER  
GOVERNOR

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

MARLON I. BROWN, DPA  
DIRECTOR

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Date Mailed: April 26, 2024  
MOAHR Docket No.: 24-002984  
Agency No.: ██████████  
Petitioner: █████ █████

**ADMINISTRATIVE LAW JUDGE: Caralyce M. Lassner**

**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 hearing was held by telephone on April 24, 2024. Petitioner appeared and requested to be represented by his daughter, █████ █████ as his Authorized Hearing Representative (AHR). The Department of Health and Human Services (Department) was represented by Quron Williamson, Eligibility Specialist. The Department did not object to Ms. █████ appearing as the AHR.

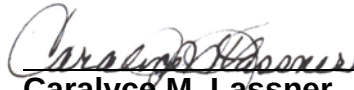
Petitioner requested a hearing regarding Medicaid (MA) coverage for himself and his spouse. After the commencement of the hearing, the AHR testified that Petitioner's issue was resolved prior to the hearing and requested to withdraw Petitioner's Request for Hearing.

The Request for Hearing was withdrawn on the record, and the Department had no objection.

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

IT IS SO ORDERED.

CML/dm



**Caralyce M. Lassner**

Administrative Law Judge

**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**  
Chelsea McCune  
Macomb County DHHS Warren Dist.  
**MDHHS-Macomb-20-**  
**Hearings@michigan.gov**

**SchaeferM**

**EQADHearings**

**BSC4HearingDecisions**

**MOAHR**

**Via-First Class Mail :**

**Petitioner**  
[REDACTED]  
[REDACTED]  
[REDACTED]