



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]

DECISION

MQB/144379

PRELIMINARY RECITALS

Pursuant to a petition filed October 05, 2012, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Crawford County Department of Human Services in regard to Medical Assistance, a hearing was held on November 28, 2012, at Prairie Du Chien, Wisconsin.

The issue for determination is whether the Department erred in its denial of backdated eligibility for the QMB program.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street
Madison, Wisconsin 53703

By: Mindy Cheeseboro

Crawford County Department of Human Services
225 N Beaumont Rd., Suite 326
Prairie Du Chien, WI 53821

ADMINISTRATIVE LAW JUDGE:

John P. Tedesco
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Crawford County.
2. Petitioner was a member receiving QMB benefits in the first half of 2012.
3. Petitioner's husband was ill and in a nursing home.

4. The Department sent notice to petitioner informing her that she was required to complete a renewal of her QMB case and her institutional MA case in order to have continued benefits.
5. Petitioner did not complete the timely renewal. QMB and MA benefits were terminated.
6. Petitioner re-applied for QMB and MA by application dated June 29. The application sought backdated eligibility for the months of June and July 2012.
7. The Department sought verification documents. These documents were received on July 20. The cases were reopened. Eligibility was backdated as requested for MA. But, backdating for QMB was denied and was effective August 1, 2012.
8. Petitioner's application was approved effective

DISCUSSION

Section 301 of the Medicare Catastrophic Coverage Act (MCCA) of 1988 established an eligibility category known as Qualified Medicare Beneficiary (QMB). A Qualified Medicare Beneficiary (QMB) is an individual with income below the poverty level whose Medicare premium benefits and coinsurance and deductibles are paid for by the state Medicaid (MA) program based upon the individual's poverty status (100% of the federal poverty level).

The petitioner concedes that the renewal of her QMB and MA cases was overlooked because she was caring for her ill husband for several months in 2012. Following the closure of her case due to failure to renew, petitioner filed a new application for QMB. The petitioner applied for QMB in on June 29, 2012. The application was approved on July 20, 2012. She is asking for the QMB benefit retroactively to June 1, 2012. However, retroactive certification is not possible for the months preceding the application:

...in the case of medicare cost-sharing with respect to a qualified medicare beneficiary defined in subsection (p)(1)..., benefits are not retroactive.

42 U.S.C. 1396d(a). See also, *Medicaid Eligibility Handbook*, § 32.7.1.1 (“For initial applications, QMB benefits begin on the first of the month after the month in which the individual is determined to be eligible”). Thus, the Department's decision to certify the petitioner for QMB effective August 1, 2012 was correct.

CONCLUSIONS OF LAW

The Department did not err in its denial of backdated eligibility for the QMB program.

THEREFORE, it is

ORDERED

That this appeal is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as

"PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Madison,
Wisconsin, this 12th day of December, 2012

\sJohn P. Tedesco
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on December 12, 2012.

Crawford County Department of Human Services
Division of Health Care Access and Accountability