



FH  
[REDACTED]

**STATE OF WISCONSIN  
Division of Hearings and Appeals**

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In the Matter of

[REDACTED]

DECISION

BCC/144459

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**PRELIMINARY RECITALS**

Pursuant to a petition filed October 09, 2012, under Wis. Stat. § 49.45(5)(a), to review a decision by the Brown County Human Services in regard to Medical Assistance, a telephonic hearing was held on November 20, 2012, at Green Bay, Wisconsin.

The issue for determination is whether there is any remaining issue in dispute regarding whether the county agency correctly calculated the petitioner's BadgerCare (BC) Core plan premium retroactive to November 1, 2012.

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: Chelsey N. Groessl, ESS  
Brown County Human Services  
Economic Support-2nd Floor  
111 N. Jefferson St.  
Green Bay, WI 54301

**ADMINISTRATIVE LAW JUDGE:**

Gary M. Wolkstein  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Brown County.

2. The petitioner receives BadgerCare (BC) Plus Core benefits for herself as a household of one.
3. During September, 2012, petitioner completed her review application for the BC core plan.
4. The county agency sent an October 1, 2012 notice to the petitioner indicating that she will need to begin paying a BC premium of \$92 as of November 1, 2012 due to an increase in her earned income.
5. The petitioner disputed the amount of her earned income and requested that the county agency re-calculate her BC premium based upon her actual paystubs.
6. During the November 20, 2012 hearing, the county representative, ESS Chelsey Groessler, and the petitioner stipulated to the following: a) during the hearing, petitioner provided her paystubs to Ms. Groessler to establish the best evidence of her actual earned income in the past 30 days; b) the county representative agreed to re-calculate the petitioner's BC Core plan premium retroactive to November 1, 2012 based upon her total income (including the submitted paystubs) as a household of one; c) Ms. Groessler sent a November 29, 2012 reconsideration letter with new premium payment screens which accurately established that petitioner owed a BC premium of \$91 (one dollar less than the original \$92) retroactive to November 1, 2012; and d) there is no longer any remaining issue in dispute regarding her BC eligibility or premium because the county agency confirmed her BC premium retroactive to November 1, 2012.

### **CONCLUSIONS OF LAW**

There is no longer any issue in dispute because the county agency correctly re-calculated the petitioner's BadgerCare (BC) Core plan premium to be \$91 retroactive to November 1, 2012.

**THEREFORE, it is**

**ORDERED**

The petition for review herein be and the same is hereby 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 7th day of December, 2012

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\sGary M. Wolkstein  
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 7, 2012.

Brown County Human Services  
Division of Health Care Access and Accountability