



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]

DECISION

MGE/145373

PRELIMINARY RECITALS

Pursuant to a petition filed November 19, 2012, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on December 20, 2012, at Milwaukee, Wisconsin.

The issue for determination is whether medical bills submitted by Petitioner may still be processed for purposes of determining whether or not he met his Medicaid deductible.

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: Belinda Bridges

Milwaukee Enrollment Services
1220 W Vliet St
Milwaukee, WI 53205

ADMINISTRATIVE LAW JUDGE:

David D. Fleming
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. Petitioner is disabled and was a recipient of SSI through January 31, 2012. As of February 2012 Petitioner became eligible for SSDI a benefit of \$1020.00 per month.
3. Petitioner was Medicaid eligible when receiving SSI but with the onset of SSDI eligibility that automatic Medicaid eligibility ended and, instead, Petitioner's Medicaid eligibility became subject to be a deductible.

4. Petitioner's deductible was \$2449.98 for the period from February 1, 2012 to July 31, 2012. He did not meet a deductible. That deductible was re-established for Petitioner for the period beginning August 1, 2012 through January 31, 2013.
5. In November 2012 Petitioner received a bill from the Visiting Nurse Association (VNA) for year 2012 in the amount of \$3298.30. He also paid \$1163.52 in 2012 in out-of-pocket expenses for medical care.
6. Petitioner filed this hearing request seeking to have the VNA bill and his out-of-pocket expenses processed to see if he met the deductible.

DISCUSSION

When a person receives SSI they are typically eligible for Medicaid (MA). That is not true for recipients of Social Security Disability Income or retirement income; while the elderly and disabled are typically nonfinancially eligible for MA those individuals must still meet financial requirements. *See generally §49.47, Wis. Stats.*

When a person's income is over the Medicaid income limit a Medicaid deductible, also known as a spenddown, must be met before eligibility begins, See *Wis. Stats. § 49.47(4)(c) 2; Wis. Admin. Code, § DHS 103.08(2)(a) and Medicaid Eligibility Handbook (MEH), §§24.1. & 24.2.* The MA income limit for a one or two person household is \$591.67. See *MEH, §39.4.1.* MA deductibles are calculated for six-month periods. See *Wis. Admin. Code, § DHS 103.08(2)(c) and MEH, § 20.2.0.* The deductible is met by incurring medical expenses that equal the dollar amount of the deductible. *MEH, §24.2.*

Here Petitioner submitted his 2012 medical bills as soon as he became aware of them.

Even medical bills submitted late are to be processed for the purpose of determining whether a Medicaid deductible is met:

24.10 Late Reporting of Deductible Information

If the client turns in late reports on income changes or medical costs, recalculate the deductible as of the date the change took place or the medical cost was incurred. See what would have been the deductible had s/he reported the changes and the medical costs as they occurred. If the medical bills would have met the deductible for any past date, begin Medicaid certification on that date.

Medicaid Eligibility Handbook, §24.10.

CONCLUSIONS OF LAW

The agency is required to process Petitioner's medical bills to determine whether Petitioner met his deductible during the past deductible period(s).

THEREFORE, it is

ORDERED

This matter is remanded to the agency with instructions to take the steps necessary to determine whether or not the bills submitted by Petitioner at the hearing are sufficient to have met the deductible. This must be done within 10 days of the date of this decision and the agency is to issue a notice of decision to Petitioner informing him of the agency's determination.

Petitioner should note that if the deductible was met and he has bills that he has paid for that are to be covered by Medicaid, he needs to work with his provider(s) so that they submit their invoices to the Medicaid program in a timely manner so that the provider(s) may be reimbursed by Medicaid so that Petitioner may be reimbursed by the provider(s).

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 Milwaukee,
Wisconsin, this 6th day of February, 2013

\sDavid D. Fleming
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 February 6, 2013.

Milwaukee Enrollment Services
Division of Health Care Access and Accountability