



FH  
[REDACTED]

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

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In the Matter of

[REDACTED]

DECISION

CWA/146966

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**PRELIMINARY RECITALS**

Pursuant to a petition filed January 23, 2013, under Wis. Admin. Code § HA 3.03, to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a telephonic hearing was held on March 19, 2013, at Milwaukee, Wisconsin.

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: Desiree Pollard-Badji, Income Maintenance senior worker  
Milwaukee Enrollment Services  
1220 W Vliet St  
Milwaukee, WI 53205

**ADMINISTRATIVE LAW JUDGE:**

Gary M. Wolkstein  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. The petitioner has been enrolled in the IRIS Community Waivers program since June, 2012.
3. The petitioner's Social Security Disability Income (SSDI) increased from \$1,512 to \$1,535 as of January 1, 2013.

4. The petitioner was not informed to submit her medical remedial expenses (MRE) to the county agency as deductions to income in the calculation of her IRIS Community Waivers cost share amount.
5. The petitioner asserted that her utility bills (gas and electric including monthly arrearage) are higher than the utility amount used by the Department in calculating petitioner's cost share.
6. Milwaukee Enrollment Services (MES) sent a December 3, 2012 Notice of Decision to the petitioner stating that her Community Waivers cost share increased from \$101 to \$112 as of January 1, 2013, due to a cost of living (COLA) increase in her SSDI.
7. During the March 19, 2013 hearing, the petitioner and MES stipulated to the following: a) **By March 26, 2013**, petitioner will submit verification to Ms. Pollard-Badji of her medical remedial expenses and her utility bills; b) MES will review and re- calculate the petitioner's cost share retroactive to January 1, 2013 based upon the new evidence submitted by petitioner; and c) **By April 8, 2013**, MES will send a new, updated notice of decision to the petitioner explaining in detail the calculation of her cost share retroactive to January 1, 2013.

**THEREFORE, it is**

**ORDERED**

The matter is remanded to the petitioner (██████████) and MES (**Attention: Desiree Pollard-Badji**) with the following instructions: a) **By March 26, 2013**, petitioner will submit verification to Ms. Pollard-Badji of her medical remedial expenses and her utility bills; b) MES will review and re- calculate the petitioner's cost share retroactive to January 1, 2013 based upon the new evidence submitted by petitioner; and c) **By April 8, 2013**, MES will send a new, updated notice of decision to the petitioner explaining in detail the calculation of her cost share retroactive to January 1, 2013.

**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).

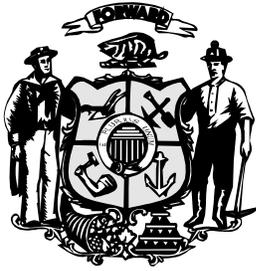
For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson 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 20th day of March, 2013

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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 March 20, 2013.

Milwaukee Enrollment Services  
Bureau of Long-Term Support