



FH
[REDACTED]

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

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MGE/148240

PRELIMINARY RECITALS

Pursuant to a petition filed March 21, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the La Crosse County Department of Human Services in regard to Medical Assistance, a telephone hearing was held on October 9, 2013. This matter was the subject of two Rehearing requests, which were granted on July 12, 2013 and September 23, 2013, respectively.

The issue for determination is whether the respondent correctly denied petitioner's Medicaid application due to assets and income in excess of program limits.

There appeared at that time the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]

Respondent:

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

By: Tom Miller

La Crosse County Department of Human Services
300 N. 4th Street
PO Box 4002
La Crosse, WI 54601

ADMINISTRATIVE LAW JUDGE:

Peter McCombs
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Clark County.
2. On January 28, 2013, petitioner applied for Medicaid benefits.

3. On February 11, 2013, petitioner's application was denied due to income and assets in excess of Medicaid program limits.
4. Petitioner timely filed an appeal of respondent's determination.

DISCUSSION

Medical Assistance (MA) is a state-federal program designed to pay for medical coverage for low income persons. To qualify for MA, a person must be both non-financially and financially eligible. Whether the petitioner was non-financially eligible was not an issue in contention. To be financially eligible, a person must have assets that are under the program's asset limit, and income that is under the appropriate income limit. Wis. Stat., §49.47(4)(b)3g.

Petitioner's application was submitted on January 28, 2013. His application noted assets of \$850 in cash, \$2,276.58 in a checking account and \$48,000 in an Individual Retirement Account (IRA). The respondent argues that based upon the information provided by the petitioner, he exceeded the MA program asset limit of \$2,000. Additionally, petitioner identified income of \$1,452.00 from Social Security (monthly) and \$289 in unemployment benefits (weekly). This results in a total of \$2,845.00 per month, which exceeds the MA income limit of \$591.67.

Petitioner testified confirming the financial information presented by the respondent. However, he noted that none of those numbers are correct today. Notably, the petitioner's application was submitted in January, 2013. The hearing in this matter was not held until October, 2013, due to two separate dismissals and subsequent rehearing requests.

In any event, I am unable to find any error on the part of the respondent in determining the assets or income of the petitioner or in determining that petitioner was not eligible for MA benefits; the petitioner has not established any error by the respondent. If petitioner's income and/or assets have changed in the intervening months, the petitioner is encouraged to apply for benefits anew.

CONCLUSIONS OF LAW

The respondent correctly denied petitioner's Medicaid application due to assets and income in excess of Medicaid program limits.

THEREFORE, it is

ORDERED

That the petition for review 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 30th day of October, 2013

\sPeter McCombs
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 October 31, 2013.

La Crosse County Department of Human Services
Division of Health Care Access and Accountability