



FH  
[REDACTED]

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

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

BCS/150340

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**PRELIMINARY RECITALS**

Pursuant to a petition filed June 28, 2013, under Wis. Stat. § 49.45(5)(a), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on August 06, 2013, at Milwaukee, Wisconsin.

The issue for determination is whether the agency properly terminated the Petitioner's BadgerCare+ benefits.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

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

By: Paul Frederickson  
Milwaukee Enrollment Services  
1220 W Vliet St  
Milwaukee, WI 53205

**ADMINISTRATIVE LAW JUDGE:**

Debra Bursinger  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. In June, 2013, the Petitioner's child turned 19 years of age.

3. On June 5, 2013, the agency issued a Notice of Decision informing the Petitioner that his BC+ benefits would end effective July 1, 2013 because there was no longer a child under age 19 in his home.
4. On June 28, 2013, the Petitioner filed an appeal with the Division of Hearings and Appeals.
5. On July 1, 2013, the Petitioner re-applied for MA benefits. On July 19, 2013, the agency denied the Petitioner's application.
6. On July 18, 2013, the Petitioner applied for disability benefits.

### **DISCUSSION**

BadgerCare Plus is a Wisconsin variant of MA for families with minor children, and pregnant women. Wis. Stat. §49.471; BCP Eligibility Handbook (BCPEH), § 1.1

A person between ages 18 and 65, with no minor children, must be blind or disabled to be eligible for MA. A finding of disability must be in accordance with federal social security/SSI standards. See Wis. Stat. § 49.47(4)(a)4.

In this case, the Petitioner does not dispute that his household no longer includes a minor child. The agency properly terminated the Petitioner's BC+ benefits when the Petitioner's child turned 19 years of age.

The Petitioner testified that he has health problems. As of the time of the hearing, he had applied for disability and been found presumptively disabled. His disability application was pending. The Petitioner was advised that he would receive a determination regarding the disability application and that he would have separate appeal rights for that determination.

### **CONCLUSIONS OF LAW**

The agency properly terminated the Petitioner's BC+ benefits when the Petitioner's child turned 19 years of age.

**THEREFORE, it is** **ORDERED**

That the petition be, and hereby 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 Milwaukee,  
Wisconsin, this 13th day of September, 2013

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\sDebra Bursinger  
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 September 13, 2013.

Milwaukee Enrollment Services  
Division of Health Care Access and Accountability