



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION

BCS/152274

PRELIMINARY RECITALS

Pursuant to a petition filed September 20, 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 November 14, 2013, at Milwaukee, Wisconsin.

The issue for determination is whether Milwaukee Enrollment Services (the agency) correctly terminated Petitioner's BadgerCare+ benefits.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

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

By: Katherine May, HSPC Sr.
Milwaukee Enrollment Services
1220 W Vliet St
Milwaukee, WI 53205

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # ) is a resident of Milwaukee County.
2. On September 11, 2013, the agency sent Petitioner a notice indicating that as of October 1, 2013, the father of her child and she would not be enrolled in BadgerCare+ because they are over the program limit. (Exhibit 7)
3. Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on September 20, 2013. (Exhibit 1)

4. Petitioner's household consists of three people, herself, her child (born July 2013) and the father of her child. (Testimony of Petitioner)
5. The father of Petitioner's child earns \$3,354.17 per month. (Exhibit 8; Testimony of Petitioner)

DISCUSSION

BadgerCare Plus (BC+) is a state/federal program that provides health coverage for Wisconsin families. *BadgerCare + Eligibility Handbook (BEH) §1.1.1*. In order for adult caretakers to be financially eligible for BadgerCare+ benefits, the household income must be below 200% the Federal Poverty Level and all available gross income must be counted. *BEH §16.1.1*

It is undisputed that Petitioner's monthly household income is \$3,354.17. 200% of FPL for a household of 3 is \$3255. See *BEH §50.01* Petitioner's income of \$3,354.17 exceeds the \$3255/200% FPL income limit. Consequently, Petitioner and the father of her child are not eligible for BadgerCare+ benefits.

Petitioner asserts that her family's monthly expenses limit her available income, because they are paying a mortgage, medical bills related to the birth of their child, in addition to ordinary living expenses, such as rent, insurance payments etc. Regrettably, no deductions are allowed for those expenses.

OTHER MATTERS

Wisconsin Medicaid law will change significantly, effective January 1, 2013. On that date, a person is eligible for Wisconsin Medicaid if his/her income is at or below 100% of the federal poverty level; it will no longer be necessary that a recipient be under 19, elderly, blind, disabled, or a caretaker relative. The January 2014 version of Medicaid may be applied for online from November 18, 2013 onward at Wisconsin's website, <https://access.wisconsin.gov>.

A person may apply for subsidized private health insurance with coverage beginning effective January 1, 2014 (if you enroll by December 15, 2013). Late enrollments will be allowed until March 31, 2014, but will not be retroactive. Enrollment can be accomplished via the federal website, <https://www.healthcare.gov> or through the federal call center at 1-██████████ *Petitioner should expect delays due to technical problems with the website.*

When applying, the program will want to know the petitioner's tax household's adjusted gross income for the last tax filing year. *Given that Petitioner is not married to the father of her child, they may or may not be included in the same tax household.* If things are working properly, the program should be able to see the household's adjusted gross income for the prior year via a federal "data hub." That income information will be used to assign a percentage of poverty level to the household, which in turn is used to calculate the amount of the premium subsidy that will be provided. A household at 101% of the federal poverty level (FPL), and which picks a "silver" insurance plan, will pay no more than 2% of gross income for its premium, as the rest will be covered by the subsidy. The subsidy percentage tapers off as income rises. A household at 399% FPL, which picks a "silver" plan, will pay no more than 9.5% of its income for its premium.

When shopping for insurance via phone or website, the buyer will have a choice of plans labeled with various "medal" colors. Each color represents a different level of shared responsibility between the insurer and the insured for medical bills incurred. The breakdown is: Platinum-90% insurer/10% patient, Gold-80% insurer/20% patient, Silver-70/30, and Bronze-60/40. The idea behind this stratification is to allow the consumer to see "apples-to-apples" insurance comparisons. The patient's premium cost for a Platinum or Gold plan will be more than the percentages stated in the prior paragraph for a Silver plan.

The various insurance plans may also have varying co-payments and deductibles. If a household's income is below 250% FPL (\$4068.75 per month/ \$48,825 annually for a family of three), there will also be a subsidy to help pay co-payments and deductibles. This subsidy is called a "cost sharing reduction" or CSR.

CONCLUSIONS OF LAW

The agency correctly terminated Petitioner's BadgerCare+ benefits effective October 1, 2013.

THEREFORE, it is ORDERED

That the petition 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 21st day of November, 2013.

\sMayumi M. Ishii
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 November 21, 2013.

Milwaukee Enrollment Services
Division of Health Care Access and Accountability