



FH
[REDACTED]

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

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MQB/154139

PRELIMINARY RECITALS

Pursuant to a petition filed December 12, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Waupaca County Department of Social Services in regard to Medical Assistance, a hearing was held on January 27, 2014, at Waupaca, Wisconsin.

The issue for determination is whether the Department erred in its determination that petitioner is not eligible for Medicare premium assistance.

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, Room 651
Madison, Wisconsin 53703

By: Carmen Snell

Waupaca County Department of Social Services
811 Harding Street
Waupaca, WI 54981-2087

ADMINISTRATIVE LAW JUDGE:

John P. Tedesco
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Waupaca County.
2. Income for the unit is \$742 monthly from employment, her husband's annuity income of \$171.61, and his SSDI of \$1507.
3. The couple has no mortgage or rent expense.

4. The agency sought additional verification documents from petitioner by the issuance of notices sent on 10/25/13, 11/20/13, and 11/26/13.
5. Petitioner filed a request for hearing on December 16, 2013.
6. On 12/23/2013 the Department issued a notice to petitioner informing her that she was not eligible for SLMB due to income over the program limit.

Qualified Medicare Beneficiary (QMB), SLMB, and SLMB Plus are programs which provide assistance with Medicare Part B premiums for persons whose incomes are over the regular Medical Assistance limits. All three programs pay the entire Part B premium. See the MA Handbook, Appendix 32.1.1 for a full description of the programs.

The programs have progressively higher income limits. The QMB income limit for two people is \$1,292.50. Handbook, App. 39.5. The SLMB limit is \$1,551. Handbook, App. 32.3 and 39.5. A person qualifies for SLMB Plus if income is below \$1,744.88. Handbook, App. 32.4 and 39.5. Because SLMB Plus eligibility is not automated, eligibility must be determined manually by the county worker. Handbook, App. 32.4.2, referencing "Process Help 61.6."

The county budgeted \$2,472.27 as petitioner's monthly income. With a standard \$20 deduction and the earned income deduction, that meant that income was \$2,075.31, which is still more than 300 dollars above even the SLMB Plus limit.

CONCLUSIONS OF LAW

The petitioner's income is above the eligibility limits for premium assistance.

THEREFORE, it is

ORDERED

That the matter 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, Room 651, 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 29th day of January, 2014

\sJohn P. Tedesco
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 January 29, 2014.

Waupaca County Department of Social Services
Division of Health Care Access and Accountability