



FH  
[REDACTED]

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

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

BCC/155733

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**PRELIMINARY RECITALS**

Pursuant to a petition filed February 24, 2014, under Wis. Stat. § 49.45(5)(a), to review a decision by the Wood County Human Services - WI Rapids in regard to Medical Assistance, a hearing was held on March 19, 2014, at Medford, Wisconsin.

The issue for determination is whether the county agency correctly determined that the petitioner is ineligible for medical assistance because she failed to sign her renewal application.

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: Beulah Garcia

Wood County Human Services - WI Rapids  
320 West Grand Avenue  
PO Box 8095  
Wisconsin Rapids, WI 54495-8095

**ADMINISTRATIVE LAW JUDGE:**

Michael D. O'Brien  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Taylor County.
2. The county agency notified the petitioner on January 16, 2014, that she needed to submit a signed application by January 27, 2014.

3. On January 16, 2014, the county agency sent the petitioner a summary of the information she gave it.
4. The county agency notified the petitioner on January 17, 2014, that it was ending her BadgerCare Plus Core Plan benefits on February 1, 2014, because she had not completed her renewal.
5. The petitioner signed her application over the telephone.

### DISCUSSION

The BadgerCare Plus Core Plan expanded medical assistance to allow adults without dependent children who would not otherwise qualify for the program to receive benefits. Wis. Stat. § 49.45(23); *BadgerCare Plus Eligibility Handbook*, § 43.2. Each year, those seeking benefits must renew their application and pay a \$60 fee. *BadgerCare Plus Eligibility Handbook*, § 43.4.1. Those who fail to complete all renewal requirements within 12 months of when they previously became eligible are terminated from the program. They can reenroll if they meet all of the program's renewal requirements by the later of last day of the 13th month after most recently being found eligible or 10 days after the agency requests verification or payment of the \$60 fee. *BadgerCare Plus Eligibility Handbook*, § 43.9.

The county agency contends that the petitioner failed to complete her renewal application because she did not sign it, which is required by Wis. Admin. Code, § DHS 102.01(7). The petitioner contends that she signed the application over the telephone. The case notes and the testimony of the agency's representative at the hearing indicate that this is a valid means of signing a renewal application. However, the agency representative points out that nothing in the notes indicates that the petitioner actually did this.

I find no authority in either the administrative code or the *Medicaid Eligibility Handbook* that allows signing an application over the telephone. Section 102.01(7) merely states that the application must be "signed." The *Medicaid Eligibility Handbook*, § 2.6.3., states: "When a request for assistance is made by phone, the filing date is not set until a signed application and/or registration form is received by the agency." Still, if the agency is telling people who rely upon their advice that they may sign over the telephone, I am not going to deny the request on that basis. In this matter, the only person testifying who had first-hand knowledge of what happened was the petitioner. She was credible, so I accept her statement that she signed her application. Therefore, her application cannot be denied on that ground. Because the agency has given no other reason for denying the application, I will order it to reinstate her into the program.

I note that even if I did not accept the petitioner's testimony, there is insufficient evidence that she did not sign her application on time. The agency included three notices among its exhibits. A January 16, 2014, notice gave the petitioner until January 27, 2014, to complete her application, a second notice sent on that date told her what documentation it had received, and a third notice sent the next day told her that her BadgerCare Plus Core Plan benefits were ending on February 1, 2014, because she had not completed her renewal. There is no proof that she was told before January 16, 2014, that she had to submit anything to the agency. Moreover, the only notice submitted indicating when she had to turn in her information indicated that it was not due until February 27, 2014.

### CONCLUSIONS OF LAW

The petitioner submitted a valid signature on her BadgerCare Plus Core Plan renewal application.

**THEREFORE, it is**

**ORDERED**

That this matter is remanded to the county agency with instructions that within 10 days of the date of this decision it reinstate her into the program retroactive to February 1, 2014.

## REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or 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 filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,  
Wisconsin, this 9th day of April, 2014

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\sMichael D. O'Brien  
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 April 9, 2014.

Wood County Human Services - WI Rapids  
Division of Health Care Access and Accountability