



STATE OF WISCONSIN  
Division of Hearings and Appeals

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

MQB/164058

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**PRELIMINARY RECITALS**

Pursuant to a petition filed February 17, 2015, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on March 12, 2015, at Milwaukee, Wisconsin.

The issue for determination is whether the agency correctly discontinued the petitioner's Medicare Premium Assistance (SLMB) effective March 1, 2015 because she is enrolled in the Community Waivers Program.

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: Belinda Bridges

Milwaukee Enrollment Services  
1220 W Vliet St, Room 106  
Milwaukee, WI 53205

**ADMINISTRATIVE LAW JUDGE:**

Corinne Balter

Division of Hearings and Appeals

**FINDINGS OF FACT**

1. The petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. The petitioner's monthly income from social security retirement increased effective February 2015 from \$1,177 to \$1,207.

3. On February 6, 2015 the agency re-determined the petitioner's SLMB eligibility. The agency determined that the petitioner was no longer eligible for SLMB because her income was over the program limit.
4. The petitioner is not eligible for SLMB + because although she is income eligible, she is enrolled in the community waivers program, and thus ineligible for this program.
5. On February 9, 2015 the agency sent the petitioner notice that effective March 1, 2015 they would be terminating her SLMB coverage.
6. On February 19, 2015 the Division of Hearings and Appeals received the petitioner's request for fair hearing.

### **DISCUSSION**

Medicare is the health insurance program administered by the federal Centers for Medicare & Medicaid Services (CMS) for people over 65 and for certain younger disabled people. Medicare is divided into two types of health coverage. Hospitalization Insurance ( Part A ) pays hospital bills and certain skilled nursing facility expenses. Medical Insurance ( Part B ) pays doctors' bills and certain other charges.

Medicare charges premiums for its insurance. Wisconsin MA pays some or all Medicare premiums for the persons participating in the programs described below:

1. Qualified Medicare Beneficiary ( QMB ).
2. Specified Low-Income Medicare Beneficiary ( SLMB ).
3. Specified Low-Income Medicare Beneficiary Plus ( SLMB+ ), also known as Qualifying Individuals – 1 ( QI-1 ).
4. Qualified Disabled and Working Individuals ( QDWI ).

*MA Eligibility Handbook (MEH)*, 32.1.1 (viewable online at [www.emhandbooks.wi.gov/meh-ebd/](http://www.emhandbooks.wi.gov/meh-ebd/)). See also, Wis. Stat. §49.468.

The income limit is set below 100% of the federal poverty level for QMB, 100% to 119% for SLMB, 120% to 134% for SLMB+, and up to 200% for QDWI. *MEH*, 32.2.3 & 39.5. Every person qualifies for a \$20 standard deduction from his or her monthly income when determining the person's eligibility for these programs. *MEH*, 32.2. A person who is eligible and certified for QMB will have his/her Medicare Part A and B premiums paid by the Wisconsin Medical Assistance program. A SLMB or SLMB+ recipient will have only his Medicare Part B premiums paid by Wisconsin MA. A QDWI recipient will have only his/her Medicare Part A premiums paid by the state MA program. The income limit for a household of one person is currently \$972.50 for QMB, \$1,167 for SLMB, \$1,312.88 for SLMB+, and \$1945 for QDWI.

In addition to the financial requirements for these programs, a person must also meet all of the non-financial eligibility requirements. One of the non-financial requirements for SLMB + is that the person is ineligible for Medical Assistance (MA). MA includes the Community Waivers program. *MEH*, 32.4.1. This is not a requirement for QMB or SLMB. See *MEH*, 32.3.1., 32.2.1.

In this case the petitioner received an increase in the amount of social security retirement income. The petitioner was previously receiving \$1,177 per month in social security retirement income. This amount increased to \$1,207. When the petitioner received \$1,177 per month in social security income, she was

eligible for SLMB coverage. The income limit for that program is \$1,167, however, \$20 is disregarded or subtracted from a person's gross income. Thus, the petitioner's income for program eligibility was \$1,177 - \$20, which is \$1,155. This amount is under the program limit for a household of one. For SLMB it does not matter whether or not a person is enrolled in community waivers.

When the petitioner's income increased to \$1,207, her income was over the SLMB program limit. If one were to just look at the petitioner's income, she would be eligible for SLMB +. However, the petitioner is enrolled in the community waivers program. An additional requirement for the SLMB + is that a person not be enrolled in community waivers. Thus, although the petitioner is income eligible for this program, she is not eligible because she is enrolled in the community waivers program.

I note that I misinformed the petitioner at the hearing that for all these programs she was not eligible because she was enrolled in community waivers. Being enrolled in community waivers only excludes her from SLMB +, however, she is also ineligible for QMB and SLMB due to her income.

The petitioner's argument was essentially that this is unfair and that she does not have enough money to cover her monthly expenses. As stated at the hearing, the petitioner may want to contact her community waivers case worker to determine whether she is eligible for a reduced cost share amount due to this increase in premiums.

### CONCLUSIONS OF LAW

The agency correctly determined that the petitioner was no longer eligible for SLMB effective March 1, 2015.

**THEREFORE, it is**

**ORDERED**

That the petition is dismissed.

### **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 Milwaukee,  
Wisconsin, this 27th day of March, 2015

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\sCorinne Balter  
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 March 27, 2015.

Milwaukee Enrollment Services  
Division of Health Care Access and Accountability