



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

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

FOO/165546

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**PRELIMINARY RECITALS**

Pursuant to a petition filed April 21, 2015, under Wis. Admin. Code § HA 3.03(1), to review a decision by the Sheboygan County Department of Human Services in regard to FoodShare benefits (FS), a hearing was held on May 07, 2015, at Sheboygan, Wisconsin.

The issue for determination is whether Sheboygan County Department of Human Services (the agency) correctly determined the Petitioner’s FoodShare benefits for April 2015 going forward.

NOTE: The record was held open to get verification of Petitioner’s income. The agency submitted the unearned income screen printouts from the CARES database. They have been marked as Exhibit 4 and entered into the record.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

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Respondent:

Department of Health Services  
1 West Wilson Street, Room 651  
Madison, Wisconsin 53703

By: Kris Schmidt, Economic Support Supervisor  
Sheboygan County Department of Human Services  
3620 Wilgus Ave.  
Sheboygan, WI 53081

**ADMINISTRATIVE LAW JUDGE:**

Mayumi M. Ishii  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Sheboygan County.

2. The Petitioner completed a renewal on March 5, 2015. (Testimony of Ms. Schmitz)
3. On March 18, 2015, the agency sent the Petitioner a notice indicating that her benefits would be reduced effective April 1, 2015, from \$74.00 per month to \$16.00 per month. (Exhibit 2)
4. The Petitioner filed a request for fair hearing that was received by the Division of Hearing and Appeals on April 21, 2015. (Exhibit 1)
5. The Petitioner has a household of one person. (Exhibit 3)
6. The Petitioner receives \$871.00 per month in Social Security Disability Income and \$15.27 per month in State SSI benefits, which totals \$886.27. (Testimony of Petitioner; Exhibit 4)
7. The Petitioner pays rent in the amount of \$256.00 per month which includes heat and electricity. Petitioner does not have a separate phone bill. (Exhibit 2; Testimony of Petitioner)
8. Petitioner has no out of pocket medical expenses. (Testimony of Petitioner)

### DISCUSSION

Petitioner filed an appeal to contest the reduction of her FoodShare benefits.

Once a household passes the gross income test the following deductions are applied in determining the FoodShare allotment. (FSH, at § 4.6):

- (1) a standard deduction –

Effective October 1, 2014, this was \$155.00 for an assistance group of 1-3 people, 7 CFR § 273.9(d)(1)

- (2) an earned income deduction - which equals 20% of the household's total earned income, 7 CFR § 273.9(d)(2);

Petitioner does not have any earned income, so this would not apply to her.

- (3) certain medical expenses – for medical expenses exceeding \$35 in a month for an elderly or disabled person, 7 CFR § 273.9(d)(3);

Petitioner did not report any out of pocket medical expenses.

- (4) dependent care deduction for child care expenses, 7 CFR § 273.9(d)(4); and

Petitioner did not report any child care expenses.

- (5) shelter and utility expenses deduction the deduction is equal to the excess expense above 50% of net income remaining after other deductions. 7 CFR § 273.9(d)(5).

There is a cap on this deduction of \$490 per month, unless the recipient is elderly, blind or disabled, meaning a food unit member age 60 or older or a person who receives disability or blindness benefits from any of these programs: SSA, MA, SSI or SSI related MA, Railroad Retirement Board (RRB ). FSH, §3.8.1.1.

FSH, §§ 4.6.7.1 and 8.1.3.

Previously, Federal Regulations allowed households who received at least \$1.00 in energy assistance to receive an income deduction for the Heating Standard Utility Allowance (HSUA). (Ops Memo 14-16) In 2009, the State of Wisconsin issued an annual energy assistance payment of \$1.00 to FoodShare households who did not already receive energy assistance. (Id.) This allowed all households to receive an income deduction for the HSUA, which is currently, \$446. (Id.)

The 2014 Farm Bill changed the Federal Regulations to require households to receive greater than \$20 in energy assistance, in order to receive the \$446 HSUA. (Ops Memo 14-16) Consequently, Effective April 1, 2014, the State of Wisconsin stopped providing the \$1.00 energy assistance to households who were not receiving energy assistance. (Id.) Consequently, many of those households, like the Petitioner's, lost the HSUA deduction because they did not have any actual utility expenses.

Applying the applicable deductions to Petitioner's income we have the following net income calculation for April 1, 2015 going forward:

Gross Income	\$886.27	Rent	\$256.00
No Earned Income Deduction		HSUA	+\$ zero
Standard Deduction	-\$155.00	50% Net income	-\$365.64
No Medical Expenses exceeding \$35			
No Dependent Care Expenses		Excess Shelter Expense	\$ zero
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Net Income	\$731.27		
Excess Shelter Expense	- Zero		
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Net Income	\$731.27		

Individuals, in a household of one, with a net income of \$731.27 qualified for a FoodShare allotment of \$16.00 per month. FSH §8.1.2

**CONCLUSIONS OF LAW**

The agency correctly determined the Petitioner's FoodShare benefits for April 2015 going forward.

**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 15th day of May, 2015

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\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 May 15, 2015.

Sheboygan County Department of Human Services  
Division of Health Care Access and Accountability