



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

FOO/166471

PRELIMINARY RECITALS

Pursuant to a petition filed June 05, 2015, under Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to FoodShare benefits (FS), a hearing was held on June 25, 2015, at Milwaukee, Wisconsin.

The issue for determination is

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: Jose Silvestre, Income Maintenance Specialist Advanced
Milwaukee Enrollment Services
1220 W Vliet St, Room 106
Milwaukee, WI 53205

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. On March 16, 2015, the Petitioner submitted an on-line ACCESS application for FoodShare benefits. (Exhibit 14)
3. On March 19, 2015, the agency sent the Petitioner a Notice of Action Needed, directing her to complete her FoodShare interview by April 16, 2015. (Exhibit 18)

4. Petitioner appears to have completed her interview on April 16, 2015. (Exhibit 19 and 29)
5. On April 16, 2015, the agency sent the Petitioner a Notice of Proof Needed, indicating that she needed to provide income verification by April 25, 2015. (Exhibit 19)
6. On April 16, 2015, the Petitioner provided two bi-weekly pay stubs, one dated March 20, 2015, showing gross income of \$133.16, and one dated April 3, 2015, showing gross income of \$266.99. (Exhibit 29)
7. On April 28, 2015, the agency sent the Petitioner a noticed indicating that her application for FoodShare benefits was denied, because she did not provide the requested proof of income. (Exhibit 21)
8. Petitioner filed a request for Fair Hearing that was received on June 5, 2015. (Exhibit 1)
9. The Petitioner reapplied for benefits and on June 24, 2015, the agency sent the Petitioner a notice, advising her that effective July 1, 2015, she would be eligible for FoodShare benefits in the amount of \$16.00 per month. (Exhibit 28)

DISCUSSION

At the hearing, the Petitioner indicated that she was not contesting the \$16.00 allotment determination for July 2015 going forward. However, she disputed the agency's denial of her March 2015 application for benefits.

The agency conceded that it incorrectly denied the Petitioner's application for FoodShare benefits, because she did, in fact, timely produce her income verification. Consequently, Petitioner's FoodShare benefits should be backdated to her March 16, 2015 date of application.

Petitioner should note however, that per *FoodShare Wisconsin Handbook §7.1.1.1*, "An initial FS allotment is pro-rated from the application filing date, unless the pro-rated initial allotment amount is less than \$10. Initial allotments of less than \$10.00 are not issued..." So, if Petitioner's \$16.00 monthly benefit was pro-rated to the March 16, 2015 date of application, the initial benefit would be about \$8.00. Because that is less than \$10, no benefit would be issued for March 2015. Petitioner's benefits should begin April 1, 2015.

CONCLUSIONS OF LAW

The agency did not correctly deny the Petitioner's March 16, 2015 application for FoodShare benefits.

THEREFORE, it is

ORDERED

That within 10 days of this decision, the agency shall issue to the Petitioner, FoodShare benefits in the amount of \$16.00 per month for April 2015, May 2015 and June 2015.

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 6th day of July, 2015.

\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 July 6, 2015.

Milwaukee Enrollment Services
Division of Health Care Access and Accountability