



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION

BCS/166623

PRELIMINARY RECITALS

Pursuant to a petition filed June 15, 2015, under Wis. Stat. § 49.45(5)(a), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on July 02, 2015, at Milwaukee, Wisconsin.

The issue for determination is whether Milwaukee Enrollment Services (the agency) correctly ended BadgerCare+ benefits for the Petitioner and her husband, effective June 1, 2015.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

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

By: Simone Johnson, 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 April 30, 2015, the Petitioner completed a renewal for healthcare benefits. (Exhibit 4, pg.8)
3. The Petitioner provided two paystubs to verify her income, on dated April 13, 2015, with gross income of \$680.00 and one dated April 29, 2015, with gross income of \$640.00. The paystubs

- showed no pre-tax deductions other than Federal withholding. Petitioner's total monthly income worked out to be: \$680.00 + \$640.00 = \$1320.00. (Exhibit 4, pgs. 15 and 16)
4. Petitioner's husband receives \$1181.90 per month in Social Security Disability Income. \$104.90 is withheld for Medicare Part B premiums. (Exhibit 5)
 5. On May 1, 2015, the agency sent the Petitioner a notice indicating that effective June 1, 2015, the Petitioner and her husband were not enrolled in the BadgerCare+ program, because their household income was over the program limit. However, their two children were enrolled without a premium. (Exhibit 7)
 6. The Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on June 15, 2015. (Exhibit 1)

DISCUSSION

BadgerCare Plus (BC+) is a state/federal program that provides health coverage for Wisconsin families. *BadgerCare + Eligibility Handbook (BEH) §1.1.1.*

Effective April 1, 2014, an adult must have household income must below 100% the Federal Poverty Level, in order to be eligible for the BadgerCare+ health plan.

All taxable income must be counted. *BEH §16.1.3* There are certain income deductions that are allowed under *BEH §16.3.2 and §16.3.3*, but Medicare Part B premiums are not listed among those deductions. As such, no deduction from income is allowed for the Medicare Part B premium.

It is the agency's contention that Petitioner's household income exceeds 100% of the Federal Poverty Level and as such, she is not eligible for benefits.

100% of FPL for an assistance group size of one is \$972.50. *BEH §50.1.*

100% FPL for a household of four people is \$2020.83 per month. Petitioner's household income, as reported by Petitioner on April 30, 2015, works out to be:

\$1320.00 monthly earned income
+\$1181.90 Social Security Income
<hr style="width: 25%; margin-left: auto; margin-right: 0;"/>
\$2501.90 Total Monthly Income

Petitioner's monthly income of \$2501.90 was \$481.07 over the 100% FPL income limit of \$2020.83. As such, the agency correctly ended the BadgerCare+ benefits for the adults in the Petitioner's household.

Petitioner argued that the agency should have budgeted her income as \$1250 per month, because she is supposed to work 125 hours per month at \$10.00 per hour.

Petitioner works as her husband's personal care worker through a home healthcare agency. The Petitioner's husband is only allowed to receive 125 hours per month (62.50 hours per pay period) of personal care services.

Petitioner should note, that even if her earned income was calculated at \$1250 per month (125 hours x \$10.00 per hour), she still would have been over the income limit:

\$1250 monthly earned income
+ \$1181.90 Social Security Income

\$ 2431.90 Total Monthly Income

\$2431.90 is \$411.07 over the 100% FPL income limit of \$2020.83.

The Petitioner testified that in March and April 2015, she worked more hours than she should have, working 68 hours in one pay period and 64 hours in another (See Exhibit 4, pgs. 15 and 16). According to the Petitioner, because she worked too many hours in March and April, she had to reduce the hours she worked in May 2015 going forward. The Petitioner presented a paycheck dated June 12, 2015, showing gross income of \$475.00. (Exhibit 2)

However, even if we count her monthly earned income, based on that check, the Petitioner is still over the income limit:

\$475 per pay period x 2 paychecks per month = \$950 monthly earned income

\$950 earned income
 +\$1181.90 Social Security Income

\$ 2131.90 Total Monthly Income

\$2131.90 is \$111.07 over the 100% FPL income limit of \$2020.83.

CONCLUSIONS OF LAW

The agency correctly ended the BadgerCare+ benefits for the adults in Petitioner's household, effective June 1, 2015.

THEREFORE, it is **ORDERED**

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

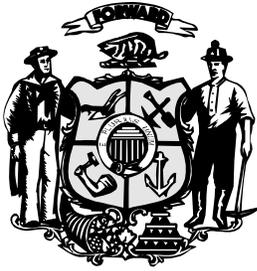
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of

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 21st day of July, 2015.

\sMayumi M. Ishii
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

Brian Hayes, Administrator
Suite 201
5005 University Avenue
Madison, WI 53705-5400

Telephone: (608) 266-3096
FAX: (608) 264-9885
email: DHAmail@wisconsin.gov
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on July 21, 2015.

Milwaukee Enrollment Services
Division of Health Care Access and Accountability