



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[Redacted case name]

DECISION

FOO/169479

PRELIMINARY RECITALS

Pursuant to a petition filed October 16, 2015, under Wis. Admin. Code § HA 3.03(1), to review a decision by the La Crosse County Department of Human Services in regard to FoodShare benefits (FS), a hearing was held on November 10, 2015, at Sparta, Wisconsin.

The issue for determination is whether the agency erred in terminating FS for October 2015 when petitioner failed to provide proof that she was not receiving income for that month.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[Redacted petitioner name]

Respondent:

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

By: [Redacted]
La Crosse County Department of Human Services
300 N. 4th Street
PO Box 4002
La Crosse, WI 54601

ADMINISTRATIVE LAW JUDGE:

John P. Tedesco
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES # [Redacted]) is a resident of Monroe County.
2. Petitioner was a case head of a FS group of one.

3. On 9/10/15 the petitioner contacted the agency to inform the agency that she was on unpaid medical leave.
4. On 9/11/15, the agency sent a Notice of Proof Needed to petitioner requiring that she submit pay stubs from the past 30 days or an employer verification form (“EVF”) which was provided in blank form. Petitioner was given until September 21, 2015 to submit the pay stubs or the EVF.
5. The EVF was finally received at the agency on 10/12/15.
6. The agency reinstated FS effective 11/1/15. Notice was sent to petitioner informing of her reinstatement on 10/19/15.
7. Petitioner appealed the termination of FS.

DISCUSSION

The issue for this case is whether the petitioner failed to verify information requested by the county agency under FS rules and policy. When dealing with the issue of the provision of information by a FS household, there is a clearly delineated process and a case may not be denied or discontinued unless those procedures are followed. That process is to specify in writing, what information is needed, and that the client has no less than a specific period of time in which to provide it. For FS, the specific requirements may be found at *FoodShare Wisconsin Handbook*, §1.2.1, which states in the parts relevant here, as follows:

1.2.1.2 Request for Verification

Requests for verification **MUST** be made in writing. Verbal requests are not acceptable and will not stand up in a fair hearing. Workers are required to give the customer notice regarding required verification, when it is due to the agency, and the consequences of not verifying timely.

Do not deny the *FS* group for failure to provide the required verification until the:

1. 11th day after requesting the verification, or
2. 31st day of the application or review processing period, whichever is later.

1.2.1.3 Responsibility for Verification

The applicant has primary responsibility for providing required verification and for resolving any discrepancies or questionable information. The local agency must assist the applicant in obtaining this verification providing the applicant has not refused to cooperate with the application process.

Here, the Department was justified in questioning income. She claimed a zero income and this could have been established several ways. The agency, as administrators of public benefit programs funded by taxpayers, was right to seek to establish that the benefits were properly allotted. Petitioner elected to have her doctor send a letter indicating that she was not able to work. But, this was not a statement reflecting income as required by the agency and it was certainly not one of the examples cited by the agency as to what would be a responsive submission.

CONCLUSIONS OF LAW

The Department did not err in terminating petitioner’s FS effective 10/1/15 based on her failure to provide verification.

THEREFORE, it is

ORDERED

That this appeal 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 Madison,
Wisconsin, this 1st day of December, 2015

\sJohn P. Tedesco
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 December 1, 2015.

La Crosse County Department of Human Services
Division of Health Care Access and Accountability