



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

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

FOO/170299

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**PRELIMINARY RECITALS**

Pursuant to a petition filed November 24, 2015, under Wis. Admin. Code § HA 3.03(1), to review a decision by the St. Croix County Health & Human Services in regard to FoodShare benefits (FS), a hearing was held on December 17, 2015, at Balsam Lake, Wisconsin.

The issue for determination is whether the county agency correctly determined that the petitioner is entitled to \$16 of FoodShare benefits per month.

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: [REDACTED]  
St. Croix County Health & Human Services  
1752 Dorset Lane  
New Richmond, WI 54017-1063

**ADMINISTRATIVE LAW JUDGE:**

Michael D. O'Brien  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. The petitioner (CARES # [REDACTED]) is a resident of Polk County.
2. The county agency notified the petitioner on November 16, 2015, that his FoodShare allotment would decline from \$199 to \$16 per month.
3. The petitioner lives with his wife.

4. The petitioner is disabled.
5. The petitioner's wife works 32 hours a week and earns \$15.45 per hour. Multiplying her weekly income by 4.3, the average number of weeks in a month, gives her gross monthly income of \$2,125.92. After allowing a \$425.18 deduction for earned income and a \$155 standard deduction, her countable income was \$1,545.74. The petitioner does not have any income.

### DISCUSSION

The size of a FoodShare allotment depends upon household size and net income. Net income is determined after subtracting from gross income those deductions—and only those deductions—found in 7 CFR § 273.9(d). The petitioner lives with his wife. She earns \$2,125.92 per month and he has no income. After allowing a \$425.18 deduction for earned income and a \$155 standard deduction, her countable income was \$1,545.74. The petitioner does not challenge these figures. The FoodShare allotment for a two-person household with this net income is \$16, the same amount allowed any eligible two-person household whose net income exceeds \$1,133. This means that the petitioner's household income would have to fall by over \$400 to be eligible for any additional benefits.

The petitioner contends that the county agency did not give him enough notice before ending his benefits. I will not consider that argument because his benefits were reinstated while the appeal was pending. Moreover, I have no authority to grant retroactive benefits he is was ineligible for.

### CONCLUSIONS OF LAW

The county agency correctly determined the petitioner's FoodShare allotment.

**THEREFORE, it is**

**ORDERED**

The petitioner's 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 22nd day of December, 2015

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\sMichael D. O'Brien  
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](mailto:DHAmail@wisconsin.gov)  
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on December 22, 2015.

St. Croix County Health & Human Services  
Division of Health Care Access and Accountability