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State/Territory Name: Wisconsin

State Plan Amendment (SPA) #: WI-24-0011

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DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, MD 21244-1850



Children and Adults Health Programs Group

August 1, 2024

William Hanna
Medicaid Director
Wisconsin Department of Health Services
1 West Wilson Street, Room 350
PO Box 309 Madison,
WI 52701-0309

Dear Director William Hanna:

Your title XXI Children's Health Insurance Program (CHIP) State Plan Amendment (SPA) number WI-24-0011, submitted on June 28, 2024, has been approved. This SPA has an effective date of January 1, 2024.

Through this SPA, Wisconsin amends its previously approved CS15 SPA to account for reasonably predictable increases and decreases in income for individuals with income that is likely to fluctuate. The methodology used to account for and verify reasonably predictable changes in income is identical to the methodology used in the state's Medicaid program, as approved under Medicaid SPA WI-24-0007 on June 12, 2024. A copy of the approved CS15 state plan page is attached and should be incorporated into the state's approved CHIP state plan. This page supersedes the previous CS15 that was approved on August 12, 2014.

Your Project Officer is Chanelle Parkar. Chanelle is available to answer your questions concerning this amendment and other CHIP-related matters. Her contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
7500 Security Boulevard, Mail Stop: S2-01-16
Baltimore, MD 21244-1850
Telephone: (667) 290-9798
E-mail: chanelle.parkar@cms.hhs.gov

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If you have additional questions, please contact Meg Barry, Director, Division of State Coverage Programs, at (410) 786-1536. We look forward to continuing to work with you and your staff.

Sincerely,
/Signed by Sarah deLone/

Sarah deLone
Director



CHIP Eligibility

State Name:

OMB Control Number: 09381148

Transmittal Number: WI - 24 - 0011

Separate Child Health Insurance Program MAGI-Based Income Methodologies

CS15

2102(b)(1)(B)(v) of the SSA and 42 CFR 457.315

The CHIP Agency will apply Modified Adjusted Gross Income methodologies for all separate CHIP covered groups, as described below, and consistent with 42 CFR 457.315 and 435.603(b) through (i).

In the case of determining ongoing eligibility for enrollees determined eligible for CHIP on or before December 31, 2013, MAGI-based income methodologies will not be applied until March 31, 2014 or the next regularly-scheduled renewal of eligibility, whichever is later.

If the state covers pregnant women, in determining family size for the eligibility determination of a pregnant woman, she is counted as herself plus each of the children she is expected to deliver.

In determining family size for the eligibility determination of the other individuals in a household that includes a pregnant woman:

The pregnant woman is counted just as herself.

The pregnant woman is counted just as herself, plus one.

The pregnant woman is counted as herself, plus the number of children she is expected to deliver.

Financial eligibility is determined consistent with the following provisions:

When determining eligibility for new applicants, financial eligibility is based on current monthly income and family size.

When determining eligibility for current beneficiaries, financial eligibility is based on:

Current monthly household income and family size.

Projected annual household income for the remaining months of the current calendar year and family size.

In determining current monthly or projected annual household income, the state will use reasonable methods to:

Include a prorated portion of the reasonably predictable increase in future income and/or family size.

Account for a reasonably predictable decrease in future income and/or family size.

Except as provided at 42 CFR 457.315 and 435.603(d)(2) through (d)(4), household income is the sum of the MAGI-based income of every individual included in the individual's household.

Household income includes actually available cash support, exceeding nominal amounts, provided by the person claiming an individual described at §435.603(f)(2)(i) as a tax dependent.

The CHIP Agency certifies that it has submitted and received approval for the conversion for all separate CHIP covered group income standards to MAGI-equivalent standards.

An attachment is submitted.



CHIP Eligibility

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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