

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
STATE: Wisconsin

MORE LIBERAL METHODS OF TREATING INCOME  
UNDER SECTION 1902(r)(2) OF THE ACT

Section 1902(f) State

Non-Section 1902(f) State

The following more liberal ways of treating income apply only to AFDC-related groups:

F. For parents and other caretaker relatives defined in sections 1902(a)(10)(A)(ii)(I) and 1905 (a)(ii) of the Social Security Act:

1. Income Disregard - For parents and other caretaker relatives, an amount equal to the difference between 200% FPL (as revised annually in the Federal Register) and the AFDC standard (see Supplement 1 to Attachment 2.6-A page 1 for the family size involved. This replaces the following AFDC disregards: \$30 plus 1/3, \$30 earned income disregard, \$175/\$200 dependent care expense deduction, and \$90 work-related expense deduction.

G. For pregnant women and infants under age 1 defined in Section 1902(a)(10)(A)(ii)(IX) of the Social Security Act:

1. Income Disregard - For the group of pregnant women and infants covered under Section 1902(a)(10)(A)(ii)(IX) and 1902(l)(1)(A) and (B) of the Social Security Act, disregard income in the amount of the difference between 300% and 185% of the Federal Poverty Level for the family size involved, as revised annually in the Federal Register. This replaces the following AFDC disregards: \$30 plus 1/3, \$30 earned income disregard, \$175/\$200 dependent care expense deduction, and \$90 work-related expense deduction.

The methodologies described in paragraphs H, I, J and L apply to persons described under 1902(a)(10)(A)(i)(III), (IV), (VI) and (VII) and to 1902(a)(10)(A)(ii)(I). The disregards do not apply to any groups that are specifically excluded under 1903(f) of the Social Security Act.

H. Depreciation is deducted from self-employment income.

I. The earnings of any individual under age 18 are not counted towards the determination of eligibility.

J. The needs of group members receiving Supplemental Security Income benefits will be included in determining the group size. None of their income will be counted toward a determination of the group's eligibility.

K. For optional targeted low income children defined at section 1902(a)(10)(A)(ii)(XIV) of the Social Security Act, use the income methodology specified in the currently approved SCHIP title XXI State plan for Medicaid expansion children.

L. Income from the following sources is disregarded: Charitable contributions, General Assistance payments from a local government agency, interest and dividends.

**Section 3.1-C.**

**ALTERNATIVE BENEFITS  
STATE PLAN AMENDMENT  
BENCHMARK BENEFIT PACKAGE  
BENCHMARK EQUIVALENT BENEFIT PACKAGE**

1937(a),  
1937(b)

The State elects to provide alternative benefits under Section 1937 of the Social Security Act.

**A. Populations**

The State will provide the benefit package to the following populations:

- a.  Required Populations who are full benefit eligible individuals in a category established on or before February 8, 2006, will be required to enroll in an alternative benefit package to obtain medical assistance except if within a statutory category of individuals exempted from such a requirement.

List the population(s) subject to mandatory alternative coverage:

Pregnant women and infants in this group with incomes between 200 and 300% of the official Federal income poverty line [1902(a)(10)(A)(ii)(IX)].

Newborns who are deemed eligible under 1902(e)(4) and were born to women with family incomes of 200 to 300% of the Federal income poverty line, whose eligibility was determined under 1902(a)(10)(A)(ii) or 1902(a)(10)(C).

- b.  Opt-In Populations who will be offered opt-in alternative coverage and who will be informed of the available benefit options prior to having the option to voluntarily enroll in an alternative benefit package.

List the populations/individuals who will be offered opt-in alternative coverage:

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For the opt-in populations/individuals, describe the manner in which the State will inform each individual that such enrollment is voluntary, that such individual may opt out of such alternative benefit package at any time and regain immediate eligibility for the regular Medicaid program under the State plan.

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2. Premiums

No premiums may be imposed for individuals with family income above 100 percent but below 150 percent of the FPL.

**B. For groups of individuals with family income above 150 percent of the FPL:**

1. Cost sharing amounts

- a.  No cost sharing is imposed.
- b.  Cost sharing is imposed under section 1916A of the Act as follows [specify amounts by groups and services (see below)]:

Group of Individuals	Item/Service	Type of Charge			*Method of Determining Family Income (including monthly or quarterly period)
		Deductible	Co-insurance	Co-payment	
Standard Plan  Infants, with incomes above 150 up to 200% of the official Federal income poverty line. [1902(a)(10)(A)(ii)(IX)]	Refer to Attachments 4.18-A & 4.18-C	None	None	Refer to Attachments 4.18-A & 4.18-C	
Benchmark Plan Newborns who are deemed eligible under 1902(e)(4) and were born to women with family incomes of 200 to 300% of the Federal income poverty line, whose eligibility was determined under 1902(a)(10)(A)(ii) or 1902(a)(10)(C).  Infants with incomes from 200 through 300% FPL of the official Federal income poverty line. [1902(a)(10)(A)(ii)(IX)]	Refer to Attachment 4.18-F, Pages 8 - 10	Refer to Attachment 4.18-F, Pages 8 - 10	None	Refer to Attachment 4.18-F, Pages 8 - 10	

\*Describe the methodology used to determine family income if it differs from your methodology for determining eligibility.

Attach a copy of the schedule of the cost sharing amounts for specific items and the various eligibility groups.

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d. Enforcement

Applies only to groups with incomes above 200% FPL, listed in Benchmark Plan:

1.  Providers are permitted to require, as a condition for the provision of care, items, or services, the payment of any cost sharing.
2.  (If above box selected) Providers permitted to reduce or waive cost sharing on a case-by-case basis.
3. State payments to providers must be reduced by the amount of the beneficiary cost sharing obligations, regardless of whether the provider successfully collects the cost sharing.
4. States have the ability to increase total State plan rates to providers to maintain the same level of State payments when cost sharing is introduced.

2. Premiums

- a.  No premiums are imposed.
- b.  Premiums are imposed under section 1916A of the Act as follows (specify the premium amount by group and income level.

Group of Individuals	Premium	*Method for Determining Family Income (including monthly or quarterly period)
Infants with incomes from 200 - 300% FPL 1902(a)(10)(A)(ii)(IX)	200 up to 230% FPL - \$10 Above 230 up to 240% FPL - \$15 Above 240 up to 250% FPL - \$23 Above 250 up to 260% FPL - \$31 Above 260 up to 270% FPL - \$41 Above 270 up to 280% FPL - \$52 Above 280 up to 290% FPL - \$63 Above 290 up to 300% FPL - \$76 300% FPL - \$90.74	

\*Describe the methodology used to determine family income if it differs from your methodology for determining eligibility.

Attach a schedule of the premium amounts for the various eligibility groups.

b. Limitation:

- The total aggregate amount of premiums and cost sharing imposed for all individuals in the family may not exceed 5 percent of the family income of the family involved, as applied on a monthly or quarterly basis as specified by the State above.

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