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State/Territory Name: Wisconsin

State Plan Amendment (SPA) #: 25-0005

This file contains the following documents in the order listed:

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- 2) CMS Form 179
- 3) Approved SPA Pages

Summary

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News

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Medicaid and CHIP Operations Group 601 E. 12th St., Room 355 Kansas City, MO 64106



Center for Medicaid & CHIP Services

June 09, 2025

William Hanna Medicaid Director Wisconsin Department of Health Services 1 West Wilson Street Madison, WI 53701

Re: Approval of State Plan Amendment WI-25-0005

Dear Director Hanna,

On March 31, 2025, the Centers for Medicare & Medicaid Services (CMS) received Wisconsin State Plan Amendment (SPA) WI-25-0005, in which the state proposed a resource disregard of cash received in conjunction with governmental or nongovernmental medical or social services programs.

We approve Wisconsin State Plan Amendment (SPA) WI-25-0005 with an effective date(s) of January 01, 2025.

If you have any questions regarding this amendment, please contact Mai Le-Yuen at mai.le-yuen@cms.hhs.gov.

Sincerely,

Shantrina Roberts

Acting Director, Division of Program Operations

Center for Medicaid & CHIP Services

Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

News Related Actions

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

Submission Type Official Approval Date 06/09/2025

Superseded SPA ID N/A

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date N/A

State Information

State/Territory Name: Wisconsin

Medicaid Agency Name: Department of Health Services

Submission Component

State Plan Amendment

Medicaid

CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID N/A

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date N/A

SPA ID and Effective Date

SPA ID WI-25-0005

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Mandatory Eligibility Groups	1/1/2025	WI-24-0010
Qualified Medicare Beneficiaries	1/1/2025	WI-24-0010
Specified Low Income Medicare Beneficiaries	1/1/2025	WI-24-0010
Qualifying Individuals	1/1/2025	WI-24-0010
Optional Eligibility Groups	1/1/2025	WI-25-0006A
Individuals Eligible for but Not Receiving Cash Assistance	1/1/2025	WI-24-0010
Individuals Eligible for Cash Except for Institutionalization	1/1/2025	WI-24-0010
Individuals in Institutions Eligible under a Special Income Level	1/1/2025	WI-24-0010
Work Incentives	1/1/2025	WI-24-0010
Medically Needy Populations Based on Age, Blindness or Disability	1/1/2025	WI-24-0010

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID N/A

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date N/A

Executive Summary

Summary Description Including The simplify administration, Wisconsin is seeking to disregard cash received in conjunction with governmental or nongovernmental medical or social services programs as an asset.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2025	\$0
Second	2026	\$0

Federal Statute / Regulation Citation

1902(r)(2)

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
No ite	ms available	

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID N/A

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date N/A

Governor's Office Review

No comment

Comments received

No response within 45 days

Other

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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Summary

Reviewable Units Versions Correspondence Log Analyst Notes

Approval Letter Transaction Logs

Related Actions

Medicaid State Plan Eligibility

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

Mandatory Coverage

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Infants and Children under Age 19	9	~		0	CONVERTED
Parents and Other Caretaker Relatives	9	~		\circ	CONVERTED
Pregnant Women	P	~		0	CONVERTED
Deemed Newborns	ø	✓		0	APPROVED
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care	9	✓		0	NEW
Former Foster Care Children	P	~		0	APPROVED
Transitional Medical Assistance	9	~		0	NEW
Extended Medicaid due to Spousal Support Collections	9	~		0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕢
SSI Beneficiaries	9	✓		0	NEW
Closed Eligibility Groups	9	✓		0	NEW
Individuals Deemed To Be Receiving SSI	P	~		0	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Working Individuals under 1619(b)	P	~		0	NEW
Qualified Medicare Beneficiaries	P	~	~	0	APPROVED
Qualified Disabled and Working Individuals	P	~		0	NEW
Specified Low Income Medicare Beneficiaries	P	~	~	0	APPROVED
Qualifying Individuals	ø	~	~	0	APPROVED

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

B. The state elects the Adult Group, described at 42 CFR 435.119.

Yes No

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

N/A

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

SPA ID WI-25-0005

Submission Type Official

Initial Submission Date 3/31/2025

Approval Date 06/09/2025

Effective Date 1/1/2025

Superseded SPA ID WI-24-0010

System-Derived

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
- 2. Have income and resources at or below the standard for this group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

✓ A specified type of income is disregarded:

Effective Date 1/1/2025

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Description of disregard: All wages paid by the Census Bureau for temporary employment related to the

decennial Census are excluded.

Name of income type:	Description:
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
Amounts Deemed to Children	Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible. Deemed parental income is equally split among siblings and no further computations are done.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise

Name of income type:	Description:
	excluded under federal law (e.g., P.L. 98-64).
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.

3. Less restrictive	e methodologies	are used in	calculating cou	ntable resources.
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Yes

O No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are disregarded as a resource.

Name of disregard:	Description:
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded as an asset for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

C. Income Standard Used

The amount of the income standard for this group is 100% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and B

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

F. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

SPA ID WI-25-0005

Submission Type Official

Initial Submission Date 3/31/2025

Approval Date 06/09/2025

Effective Date 1/1/2025

Superseded SPA ID WI-24-0010

System-Derived

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Have income below the income standard and resources at or below the resource standard for this group.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

Initial Submission Date 3/31/2025 Effective Date 1/1/2025

SPA ID WI-25-0005

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

Ye:

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

✓ A specified type of income is disregarded:

Description of disregard: All wages paid by the Census Bureau for temporary employment related to the

decennial Census are excluded.

Name of income type:	Description:
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
Amounts Deemed to Children	Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible. Deemed parental income is equally split among siblings and no further computations are done.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise

Name of income type:	Description:
	excluded under federal law (e.g., P.L. 98-64).
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.

3. Less restrictive	e methodologies	are used in	calculating cou	ntable resources.
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Yes

O No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are disregarded as a resource.

Name of disregard:	Description:
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded as an asset for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

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F. Additional Information (optional)

SPA ID WI-25-0005

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Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

SPA ID WI-25-0005

Submission Type Official

Initial Submission Date 3/31/2025

Approval Date 06/09/2025

Effective Date 1/1/2025

Superseded SPA ID WI-24-0010

System-Derived

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet all of the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Are not otherwise eligible for Medicaid under the state plan.
- 3. Have income below the income standard and resources at or below the resource standard for this group.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

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Superseded SPA ID WI-24-0010

System-Derived

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

✓ A specified type of income is disregarded:

Description of disregard: All wages paid by the Census Bureau for

temporary employment related to the decennial Census are excluded.

Name of income type:	Description:
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
Amounts Deemed to Children	Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible. Deemed parental income is equally split among siblings and no further computations are done.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not

Name of income type:	Description:
	received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).

3.	Less restrictive	e methodologies	are used in	calculating	countable	resources

Yes

O No

The less restrictive resource methodologies are:

✓ General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are disregarded as a resource.

Name of disregard:	Description:
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded as an asset for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

C. Income Standard Used

Family income must be at or above 120% FPL and below 135% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

Submission Type Official

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Superseded SPA ID WI-24-0010

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F. Additional Information (optional)

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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Summary

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Medicaid State Plan Eligibility

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

CMS-10434 OMB 0938-1188

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Package ID WI2025MS0001O

SPA ID WI-25-0005

Submission Type Official

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

Approval Date 06/09/2025 Superseded SPA ID WI-25-0006A

User-Entered

A. Options for Coverage

The state provides Medicaid to specified optional groups of individuals.

Yes No

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paperbased state plan to MACPro):

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕡
Optional Coverage of Parents and Other Caretaker Relatives	Ø			0	NEW
Reasonable Classifications of Individuals under Age 21	P	₩.		0	CONVERTED
Children with Non-IV-E Adoption Assistance	P	✓		0	CONVERTED
Independent Foster Care Adolescents	P	~		0	CONVERTED
Optional Targeted Low Income Children	P	✓		0	CONVERTED
Individuals above 133% FPL under Age 65	P			0	NEW
Individuals Needing Treatment for Breast or Cervical Cancer	P	<u>✓</u>		0	NEW
Individuals Eligible for Family Planning Services	P	✓		0	CONVERTED
Individuals with Tuberculosis	P	✓		0	CONVERTED
Individuals Electing COBRA Continuation Coverage	P			0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Individuals Eligible for but Not Receiving Cash Assistance	9	<u>~</u>	✓	0	APPROVED
Individuals Eligible for Cash Except for Institutionalization	9	▽	✓	0	APPROVED
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules	ø	☑		0	APPROVED
Optional State Supplement Beneficiaries	Ø	☑		0	APPROVED
Individuals in Institutions Eligible under a Special Income Level	P	✓	✓	0	APPROVED
PACE Participants	P	✓		0	NEW
Individuals Receiving Hospice	P	✓		0	NEW
Children under Age 19 with a Disability	9	✓		0	APPROVED
Age and Disability- Related Poverty Level	9			0	NEW
Work Incentives	9	✓	✓	0	APPROVED
Ticket to Work Basic	9			0	NEW
Ticket to Work Medical Improvements	ø			0	NEW
Family Opportunity Act Children with a Disability	9			0	NEW
Individuals Receiving State Plan Home and Community-Based Services	ø			0	NEW
ndividuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers	9			0	NEW

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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Package ID WI2025MS0001O

Submission Type Official

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Superseded SPA ID WI-25-0006A

User-Entered

B. Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medically needy.

Yes No

The medically needy eligibility groups covered in the state plan are:

1. Mandatory Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Medically Needy Pregnant Women	P	~		0	APPROVED
Medically Needy Children under Age 18	P	~		0	APPROVED

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Initial Submission Date 3/31/2025

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Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕢
Protected Medically Needy Individuals Who Were Eligible in 1973	Ø	✓		0	NEW

2. Optional Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Medically Needy Reasonable Classifications of Individuals under Age 21	P	✓		0	NEW
Medically Needy Parents and Other Caretaker Relatives	P			0	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
Medically Needy Populations Based on Age, Blindness or Disability	P	✓	✓	0	APPROVED

Optional Eligibility Groups

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User-Entered

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

N/A

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals who are eligible for but not receiving federal cash assistance or an optional state supplement.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS00010

SPAID WI-25-0005 3/31/2025 1/1/2025

Initial Submission Date

Effective Date

Submission Type

06/09/2025 Approval Date

Superseded SPA ID

System-Derived

WI-24-0010

The state covers the optional Individuals Eligible for but Not Receiving Cash Assistance eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet the eligibility requirements of at least one of the following cash assistance programs:

b. Optional State Supplement

C. AFDC

2. Do not receive cash assistance under these programs.

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

B. Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

O No

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

C. Financial Methodologies

1. In calculating household income and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability, SSI methodologies are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

3. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

✓ A specified type of income is disregarded:

Description of disregard: All wages paid by the Census Bureau for temporary employment related to the decennial Census are excluded.

Name of income type:	Description:
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
Amounts Deemed to Children	Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible. Deemed parental income is equally split among siblings and no further computations are done.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These

Name of income type:	Description:
	payments are not otherwise excluded under federal law (e.g., P.L. 98-64).
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.

4. Less restrictive methodologies are used in calculating countable resource
--

Yes

O No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately

Name of disregard:	Description:
	funded, non-profit organizations are disregarded as a resource.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded as an asset for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

☑ The state uses a less restrictive methodology with respect to resources set aside for burial.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

✓ A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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D. Income Standard Used

The income standard used is the standard of the most closely related cash assistance program.

E. Resource Standard Used

The resource standard used is the standard of the most closely related cash assistance program.

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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F. Additional Information (optional)

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PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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WI - Submission Package - WI2025MS0001O - (WI-25-0005) - Eligibility

Summary

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Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals who would be eligible for federal cash assistance or an optional state supplement, except for institutionalization.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

SPA ID WI-25-0005

Submission Type Official

Initial Submission Date 3/31/2025

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Superseded SPA ID WI-24-0010

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The state covers the optional Individuals Eligible for Cash Except for Institutionalization eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are in a medical institution.

2. Would meet the eligibility requirements for at least one of the following cash assistance programs, but for the lower income standards used to determine eligibility for institutionalized individuals:

▼ b. Optional State Supplement

c. AFDC

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

B. Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

O No

Individuals Eligible for Cash Except for Institutionalization

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SPA ID WI-25-0005

Initial Submission Date 3/31/2025

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C. Financial Methodologies

1. In calculating household income and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability, SSI methodologies are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

3. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

✓ A specified type of income is disregarded:

Description of disregard: All wages paid by the Census Bureau for temporary employment related to the decennial Census are excluded.

Name of income type:	Description:
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.

ologies are:		
	Name of disregard:	Description:
	Irrevocable burial trust interest.	Interest from irrevocable buria trusts is counted as an asset u it has been specifically declare irrevocable in writing.
	Availability of assets.	Assets are not considered avail unless they will be available in within 30 days (e.g., cash value life insurance); value is suspen until asset becomes available.
	Exclusion of real property	Nonexempt real property is considered unavailable when t property owner lists it for sale a realtor at its fair market valu a joint owner who is outside the fiscal test group refuses to sell property.
	Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eli if their resources are at or belo the resource standard at any ti in the month.
	Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share thome and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
	Independence Accounts	Accounts meeting the criteria described in the reviewable u the Work Incentives eligibility group.
	Medicare Advantage Special	Medicare Advantage Special

☑ The state uses a less restrictive methodology with respect to resources set aside for burial.

4. Less restrictive methodologies are used in calculating countable resources.

Yes

✓ Specified methodology for the treatment of resources set aside for burial:

Supplemental Benefits

services

Disregard assistance received in

conjunction with medical or social

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable,

Supplemental Benefits are

disregarded as a resource.

with governmental or

resource.

Assistance received in conjunction

nongovernmental medical or social

services that is not counted as

income under 20 CFR 416.1103(a) and (b) is also not counted as a

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

Individuals Eligible for Cash Except for Institutionalization

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D. Income Standard Used

The income standard used is the standard of the most closely related cash assistance program.

E. Resource Standard Used

The resource standard used is the standard of the most closely related cash assistance program.

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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F. Additional Information (optional)

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Initial Submission Date 3/31/2025

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PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. 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 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), 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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WI - Submission Package - WI2025MS0001O - (WI-25-0005) - Eligibility

Summary

Reviewable Units Versions Correspondence Log Analyst Notes

Approval Letter Transaction Logs

Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals who are in medical institutions for at least 30 consecutive days who are eligible under a special income level.

CMS-10434 OMB 0938-1188

Package Header

Package ID WI2025MS0001O

SPA ID WI-25-0005

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Approval Date 06/09/2025

Superseded SPA ID WI-24-0010

System-Derived

The state covers Individuals in Institutions Eligible under a Special Income Level in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Have been in a medical institution for at least 30 consecutive days.
- 2. Have income at or below a standard described in section D.

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MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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Superseded SPA ID WI-24-0010

System-Derived

B.Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

O No

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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Package ID WI2025MS0001O

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SPA ID WI-25-0005

Initial Submission Date 3/31/2025

Effective Date 1/1/2025

C. Financial Methodologies

- 1. In calculating household income, the methodologies of the most closely related cash assistance program are used, except that disregards are not applied.
- 2. In calculating household resources, the methodologies of the most closely related cash assistance program are used Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 3. Less restrictive methodologies are used in calculating countable resources.

Yes

O No

The less restrictive resource methodologies are:

✓ General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Medicare Advantage Special Supplemental Benefits	Medicare Advantage Special Supplemental Benefits are disregarded as a resource.

Name of disregard:	Description:
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

 $\ensuremath{\underline{\vee}}$ The state uses a less restrictive methodology with respect to resources set aside for burial.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

SPA ID WI-25-0005

Initial Submission Date 3/31/2025

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MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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Superseded SPA ID WI-24-0010

System-Derived

D. Income Standard Used

The income standard for this group is:

- $lue{}$ 1. 300% of the SSI Federal Benefit Rate (FBR) for an individual
- 2. Other lower income level

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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System-Derived

E.Resource Standard Used

The resource standard for this group is the one used for the most closely-related cash assistance program.

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F.Additional Information (optional)

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WI - Submission Package - WI2025MS0001O - (WI-25-0005) - Eligibility

Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

News

Related Actions

Eligibility Groups - Options for Coverage

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals with a disability with income below 250% of the FPL, who would qualify for SSI except for earned income.

CMS-10434 OMB 0938-1188

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System-Derived

The state covers the optional Work Incentives eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Have earned income.
- 2. Meet the SSI definition of disability, but for earned income.
- 3. Meet income and resource standards following a two-step process, which includes:
 - a. Step One A comparison of family net income to 250% FPL; and
 - b. Step Two A comparison of individual net income and resources to the SSI standards, excluding earned income.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

Package ID WI2025MS0001O

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Effective Date 1/1/2025

B. Step One Financial Methodologies and Income Test

1. Financial methodologies

a. SSI methodologies are used in calculating family income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ Census Bureau wages are disregarded.

Description of disregard: All wages paid by the Census Bureau for temporary employment related to the decennial Census are excluded.

✓ A specified type of income is disregarded:

Name of income type:	Description:
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from

Name of income type:	Description:
	tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).
Excessive Medical and Remedial Expenses	Monthly out-of-pocket medical and remedial expenses incurred by a work incentives applicant or member (or his or her spouse, if living together), if greater than \$500, are completely disregarded.

✓ Specific income changes are disregarded between redeterminations.

✓ Income increases due to the cost of living adjustment received from Social Security are disregarded.

Description: The annual COLA is disregarded until the month following the month in which the new federal poverty levels are published.

2. Income Test

Family net income must be less than 250% FPL. Please refer as necessary to Non-MAGI Methodologies for the definition of family size.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS0001O | WI-25-0005

Superseded SPA ID WI-24-0010

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System-Derived

C. Step Two Financial Methodologies and Income/Resource Test

1. Financial methodologies

a. SSI methodologies are used in calculating income and resources, except that earned income is not counted. Please refer

as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

s9Y 💿

oN 🔘

The less restrictive income methodologies are:

✓ Income from household members is disregarded.

when determining whether or not the Description: All income of the spouse is disregarded ✓ Income of the spouse is disregarded.

requirements for the SSI program. individual meets the financial eligibility

requirements for the SSI program.

whether or not the individual meets the

shall be disregarded when determining Description of disregard: All of an individual's unearned income

financial eligibility

The total amount of unearned income is disregarded.

c. Less restrictive methodologies are used in calculating countable resources.

oN 🔘 S9Y 💿

A dollar amount of resources in excess of the resource standard is disregarded.

are disregarded. Description: All resources of the individual's spouse

The disregard equals: \$13000.00

Resources from household members are disregarded.

The less restrictive resource methodologies are:

disregarded. Resources of the spouse are ✓ General resource disregard:

Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.	Exclusion of real property
Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.	Availability of assets.
Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.	Irrevocable burial trust interest.
Descubtion:	Name of disregard:

Name of disregard:	Description:
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	A resource disregard shall be given to a working disabled individual eligible for the Work Incentives group, who holds monies in an Independence Account. To be eligible for this resource disregard, the Independence Account is subject to the following provisions: 1. Deposits made to an approved Independence Account only while an individual is eligible for Medicaid under the Work Incentives group will be disregarded as a resource. 2. Deposits into the account must not exceed 50% of gross earned income earned by the individual during the 12-month certification period under the Work Incentives group (with deposits exceeding this threshold being disregarded as resources but included in the formula for calculating premiums). 3. These accounts will be held separate from non-exempt resources, in an account for which prior approval has been obtained from the Department, and for which the owner authorizes regular monitoring and/or reporting including deposits, withdrawals, and other information deemed necessary by the Department for the proper administration of this provision. 4. The separateness requirement may be waived in the case of an employer's pension and/or a retirement account. 5. All gains, dividends or interest accruing to: a. An Independence Account, b. An employer's retirement fund, or c. An individual's IRA account that has been registered and approved as an Independence Account, which occur after that person's first enrollment in Medicaid under the Work Incentives group, will also be disregarded resources. Funds described above in a qualified Independence Account are disregarded as a resource for applicants or recipients of this Medicaid eligibility category, or their spouses.

Name of disregard:	Description:
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are disregarded as a resource.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded as a resource for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

✓ The state uses a less restrictive methodology with respect to resources set aside for burial.

✓ Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

✓ A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

2. Income Test

For individuals who pass Step One, in Step Two, the individual's unearned income (plus deemed income, if appropriate) must be less than one of the following income standards:

- $lue{}$ a. The SSI income standard.
- b. The income standard of the state supplement program.

3. Resource Test

The individual's resources must be less than the SSI resource standard.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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Package ID WI2025MS0001O

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D. Premiums and Cost Sharing

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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E. Additional Information (optional)

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WI - Submission Package - WI2025MS0001O - (WI-25-0005) - Eligibility

Summary

Reviewable Units Versions Correspondence Log Analyst Notes Approval Letter Transaction Logs

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Related Actions

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Individuals who are age 65 or older or who have blindness or a disability who do not qualify as categorically needy.

CMS-10434 OMB 0938-1188

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The state covers the optional Medically Needy Populations Based on Age, Blindness or Disability eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet at least one of the following:

a. Are age 65 or older;

b. Have blindness: or

c. Have a disability.

- 2. Are not otherwise eligible for categorically needy coverage under the state plan.
- 3. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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B. Individuals Covered

The state covers the following populations:

- ✓ 1. Individuals age 65 or older
- 2. Individuals with blindness
- ✓ 3. Individuals who have a disability

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Superseded SPA ID WI-24-0010 System-Derived

C. Financial Methodologies

1. The state uses the same financial methodology for all	individuals covered.
--	----------------------

Yes

O No

2. The financial methodology used is:

a. SSI methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes No

The less restrictive income methodologies are:

▼ The difference between one income standard and another is disregarded.

Betwee n the followin g percent ages of

FPL 100.00%

the FPL:

Betwee n the medicall y needy income limit and a percent age of the FPL:

Betwee n the SSI Federal Benefit Rate and:

Betwee n other income standar ds:

Census Bureau wages are disregarded.

Description of disregard: All wages

paid by the Census Bureau for temporary employme nt related to the decennial Census are excluded.

A specified type of income is disregarded:

Name of income type:	Description:
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are excluded.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as income.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the Internal Revenue Code is disregarded.
Court-ordered Support and Payments	Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.
Amounts Deemed to Children	Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible. Deemed parental income is equally split among siblings and no further computations are done.
In-kind support and maintenance	In-kind support and maintenance is totally exempt unless regular, predictable and received in return for a service or product delivered.
Combat Zone Additional Pay	Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to

Name of income type:	Description:
	serving in the combat zone.
Tribal Gaming Per Capita Payments	The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).

All income increases are disregarded between redeterminations. **Description:** Income

Income increases which occur after a spenddow n amount is initially certified are disregarde d for the remainder of the spenddow n budget period.

✓ Specific income changes are disregarded between redeterminations.

1	Income
	increase
	s due to
	the cost
	of living
	adjustm
	ent
	receive
	d from
	Social
	Security
	are
	disregar
	ded.

Description: The annual

: The annual COLA is disregarde d until the month following the month in which the new federal poverty levels are published.

c. Less restrictive methodologies are used in calculating countable resources.

• Yes • No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
Irrevocable burial trust interest.	Interest from irrevocable burial trusts is counted as

Name of disregard:	Description:
	an asset unless it has been specifically declared irrevocable in writing.
Availability of assets.	Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.
Exclusion of real property	Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.
Disregard of the "first moment of the month" rule for counting of resources.	The state considers persons eligible if their resources are at or below the resource standard at any time in the month.
Reimbursement of incorrectly collected cost shares or personal liability amounts.	Reimbursement of cost share for home and community based waivers or personal liability amounts for institutional care incorrectly collected from a member are disregarded as a resource for nine (9) months beginning the month after the month in which the amount is reimbursed.
Independence Accounts	Accounts meeting the criteria described in the reviewable unit for the Work Incentives eligibility group.
Guaranteed Income Programs	Means-tested, "guaranteed income" payments from privately funded, non-profit organizations are disregarded as a resource.
Tribal General Welfare Assistance	Tribal General Welfare Assistance (GWA) that is exempt from taxation under Section 139E of the

Name of disregard:	Description:
	Internal Revenue Code is disregarded as an asset for 12 months following the month of receipt.
Medicare Advantage Supplemental Benefits	Medicare Advantage Supplemental Benefits are disregarded as a resource.
Disregard assistance received in conjunction with medical or social services	Assistance received in conjunction with governmental or nongovernmental medical or social services that is not counted as income under 20 CFR 416.1103(a) and (b) is also not counted as a resource.

✓ The state uses a less restrictive methodology with respect to resources set aside for burial.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Exemption of Certain Burial Trusts	For burial agreements funded by trusts, which Wisconsin state law permits only \$3,000 of the funds within which to be irrevocable, \$1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

✓ A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

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D. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

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E. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

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Effective Date 1/1/2025

SPA ID WI-25-0005

System-Derived

F. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

MEDICAID | Medicaid State Plan | Eligibility | WI2025MS00010 | WI-25-0005

Package Header

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G. Additional Information (optional)

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Initial Submission Date 3/31/2025

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