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State/Territory: Wisconsin

State Plan Amendment (SPA)#: 20-0013

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WI - Submission Package - WI2020MS0004O - (WI-20-0013) - Eligibility

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CMS-10434 OMB 0938-1188

Package Information

Package ID	WI2020MS0004O	Submission Type	Official
Program Name	N/A	State	WI
SPA ID	WI-20-0013	Region	Chicago, IL
Version Number	5	Package Status	Approved
Submitted By	Laura Brauer	Submission Date	6/30/2020
Package Disposition		Approval Date	11/6/2020 6:25 PM EST
Priority Code	P2		

TN# 20-0013
 Supercedes
 TN# 91-0030, 10-004, 15-004,
 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

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

November 06, 2020

Jim Jones
Medicaid Director
Wisconsin Department of Health Services
1 West Wilson Street
Madison, WI 53701

Re: Approval of State Plan Amendment WI-20-0013

Dear Jim Jones:

On June 30, 2020, the Centers for Medicare and Medicaid Services (CMS) received Wisconsin State Plan Amendment (SPA) WI-20-0013 to update the income disregard for several eligibility groups in the state plan.

We approve Wisconsin State Plan Amendment (SPA) WI-20-0013 on November 06, 2020 with an effective date(s) of July 01, 2020.

Name	Date Created
No items available	

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

Sincerely,
James G. Scott
Director
Center for Medicaid & CHIP Services

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name: Wisconsin

Medicaid Agency Name: Department of Health Services

Submission Component

- State Plan Amendment
 Medicaid
 CHIP

TN# 20-0013
Supercedes
TN# 91-0030, 10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID WI2020MS00040	SPA ID WI-20-0013
Submission Type Official	Initial Submission Date 6/30/2020
Approval Date 11/6/2020	Effective Date N/A
Superseded SPA ID N/A	

SPA ID and Effective Date

SPA ID WI-20-0013

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Mandatory Eligibility Groups	7/1/2020	WI-18-0005
Qualified Medicare Beneficiaries	7/1/2020	WI-10-004; Att 2.2-A A.25
Specified Low Income Medicare Beneficiaries	7/1/2020	WI-10-004; Att 2.2-A A.27
Qualifying Individuals	7/1/2020	WI-10-004; Att2.2-A A.27a
Optional Eligibility Groups	7/1/2020	WI-20-0003
Individuals Eligible for but Not Receiving Cash Assistance	7/1/2020	WI-91-0030; Att 2.2-A B.1
Individuals Eligible for Cash Except for Institutionalization	7/1/2020	WI-91-0030; Att 2.2-A B.2
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules	7/1/2020	WI-15-004; Att 2.2-A B.4
Individuals in Institutions Eligible under a Special Income Level	7/1/2020	WI-91-0030;Att 2.2-A B.12
Medically Needy Populations Based on Age, Blindness or Disability	7/1/2020	WI-19-0011

Page Number of the Superseded Plan Section or Attachment (If Applicable):

WI-13-017 Supp. 8b to Att. 2.6-A p.3; WI-13-017 Supp. 8b to Att. 2.6-A p.3; WI-13-017 Supp. 8b to Att. 2.6-A p.3; WI-13-017 Supp. 8b to Att. 2.6-A p.3; WI-13-017 Supp. 8b to Att. 2.6-A p.3

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives Resource disregard for reimbursement of incorrectly collected cost shares for a period of 9 months

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2020	\$0
Second	2021	\$0

Federal Statute / Regulation Citation

1902(r) of the Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created
No items available	

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	N/A
Superseded SPA ID	N/A		

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Submission - Public Comment

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
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Superseded SPA ID	N/A		

Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- Public notice was not federally required, but comment was solicited
- Public notice was federally required and comment was solicited

Submission - Tribal Input

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	N/A		

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this state

- Yes
- No

This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.

- Yes
- No

The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA.

Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission:

Solicitation of advice and/or Tribal consultation was conducted in the following manner:

All Indian Health Programs

Date of solicitation/consultation:	Method of solicitation/consultation:
5/13/2020	Attendance and consultation at bi-monthly Wisconsin Tribal Health Director meeting.

All Urban Indian Organizations


Date of solicitation/consultation:	Method of solicitation/consultation:
5/13/2020	Attendance and consultation at bi-monthly Wisconsin Tribal Health Director meeting.

States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:

All Indian Tribes

Date of consultation:	Method of consultation:
5/13/2020	Attendance and consultation at bi-monthly Wisconsin Tribal Health Director meeting.

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Name	Date Created	
WI-20-0013 Tribal Consultation	6/5/2020 10:28 AM EDT	

Indicate the key issues raised (optional)

- Access
- Quality
- Cost

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

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- Payment methodology
- Eligibility
- Benefits
- Service delivery
- Other issue

Medicaid State Plan Eligibility

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-18-0005		
	User-Entered		

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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Pregnant Women		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Deemed Newborns		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Former Foster Care Children		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Transitional Medical Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Extended Medicaid due to Spousal Support Collections		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Closed Eligibility Groups		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Deemed To Be Receiving SSI		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Working Individuals under 1619(b)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualified Medicare Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
Qualified Disabled and Working Individuals		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Specified Low Income Medicare Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED

TN# 20-0013
Supercodes

Approval Date: 11/6/2020

Effective Date: 7/1/2020

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Qualifying Individuals		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	APPROVED

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-18-0005		
	User-Entered		

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:

- N/A

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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.

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att 2.2-A A.25		
	User-Entered		

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 | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att 2.2-A A.25 User-Entered		

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
- 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 excluded under federal law (e.g., P.L. 98-64).

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

3. 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 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.

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.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att 2.2-A A.25		
	User-Entered		

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.

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 | WI2020MS00040 | WI-20-0013

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Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att 2.2-A A.25		
	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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.

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-10-004; Att 2.2-A A.27 User-Entered		

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 | WI2020MS0004O | WI-20-0013

Package Header

Package ID WI2020MS0004O
Submission Type Official
Approval Date 11/6/2020
Superseded SPA ID WI-10-004; Att 2.2-A A.27
 User-Entered

SPA ID WI-20-0013
Initial Submission Date 6/30/2020
Effective Date 7/1/2020

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
- 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.
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).
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.

3. 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 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.

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.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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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.

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 | WI2020MS00040 | WI-20-0013

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	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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.

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att2.2-A A.27a User-Entered		

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 | WI2020MS0004O | WI-20-0013

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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
- 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:
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 excluded under federal law (e.g., P.L. 98-64).

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

3. 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 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.

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.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-10-004; Att2.2-A A.27a		
	User-Entered		

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.

E. Medical Assistance Provided

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

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-10-004; Att2.2-A A.27a		
	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-20-0003		
	System-Derived		

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 paper-based 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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Reasonable Classifications of Individuals under Age 21		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Children with Non-IV-E Adoption Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Independent Foster Care Adolescents		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Optional Targeted Low Income Children		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals above 133% FPL under Age 65		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Needing Treatment for Breast or Cervical Cancer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Eligible for Family Planning Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals with Tuberculosis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals Electing COBRA Continuation Coverage		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	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		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
Individuals Eligible for Cash Except for Institutionalization TN# 20-0013 Supersedes		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED

TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Optional State Supplement Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Individuals in Institutions Eligible under a Special Income Level		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	APPROVED
PACE Participants		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving Hospice		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children under Age 19 with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Age and Disability-Related Poverty Level		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Work Incentives		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	NEW
Ticket to Work Basic		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Ticket to Work Medical Improvements		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Family Opportunity Act Children with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
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Superseded SPA ID	WI-20-0003		
	System-Derived		

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		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NEW
Medically Needy Children under Age 18		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NEW

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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NEW
Medically Needy Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	APPROVED

TN# 20-0013
 Supersedes
 TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-20-0003		
	System-Derived		

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:

- N/A

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.1 User-Entered		

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:
 - a. SSI
 - 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 | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.1		
	User-Entered		

B. Individuals Covered

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

- Yes
- No

Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.1 User-Entered		

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
- 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:
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 excluded under federal law (e.g., P.L. 98-64).

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

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

- Yes
- No

The less restrictive resource methodologies are:

General resource 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.
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.

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 | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.1 User-Entered		

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 | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.1 User-Entered		

F. Additional Information (optional)

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

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Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.2		
	User-Entered		

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:
 - a. SSI
 - b. Optional State Supplement
 - c. AFDC

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.2 User-Entered		

B. Individuals Covered

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

- Yes
- No

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.2 User-Entered		

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
- 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:
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).
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.

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

- Yes
- No

The less restrictive resource methodologies are:

TN# 20-0013
Supersedes

TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

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.

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 Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030; Att 2.2-A B.2 User-Entered		

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 | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Superseded SPA ID	WI-91-0030; Att 2.2-A B.2 User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Individuals who would be eligible for Medicaid if they were in an institution and who receive home and community-based services.

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-15-004; Att 2.2-A B.4 User-Entered		

The state operates the Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules eligibility group in accordance with the following provisions:

A. Characteristics

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

1. Would be eligible for Medicaid if in a medical institution.
2. But for the provision of home and community-based services under a waiver granted under section 1915(c), (d) or (e) of the Act:
 - a. For waivers granted under 1915(c), the individuals would otherwise require the level of care furnished in a hospital, a nursing facility or an intermediate care facility for individuals with intellectual disabilities.
 - b. For waivers granted under 1915(d) or (e), the individuals would otherwise require the level of care furnished in a hospital or nursing facility.
3. Will receive the waived services.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
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Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-15-004; Att 2.2-A B.4 User-Entered		

B. Income and Resource Methodologies

1. The income and resource methodologies used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

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

- Yes
- 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.

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

- Yes
- No

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
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Superseded SPA ID	WI-15-004; Att 2.2-A B.4 User-Entered		

C. Income and Resource Standards

The income and resource standards used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

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Superseded SPA ID	WI-15-004; Att 2.2-A B.4		
	User-Entered		

D. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030;Att 2.2-A B.12 User-Entered		

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.

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

Package Header

Package ID	WI2020MS0004O	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
Approval Date	11/6/2020	Effective Date	7/1/2020
Superseded SPA ID	WI-91-0030;Att 2.2-A B.12		
	User-Entered		

B. Individuals Covered

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

- Yes
- No

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

Package Header

Package ID	WI2020MS00040	SPA ID	WI-20-0013
Submission Type	Official	Initial Submission Date	6/30/2020
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Superseded SPA ID	WI-91-0030;Att 2.2-A B.12		
	User-Entered		

C. Financial Methodologies

- In calculating household income, the methodologies of the most closely related cash assistance program are used, except that disregards are not applied.
- 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.
- 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 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.

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:

TN# 20-0013
Supersedes
TN# 91-0030,10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

Effective Date: 7/1/2020

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 in Institutions Eligible under a Special Income Level

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D. Income Standard Used

The income standard for this group is:

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

Individuals in Institutions Eligible under a Special Income Level

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E.Resource Standard Used

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

Individuals in Institutions Eligible under a Special Income Level

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F.Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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

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Superseded SPA ID	WI-19-0011		
	System-Derived		

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.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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Superseded SPA ID	WI-19-0011		
	System-Derived		

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

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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Superseded SPA ID	WI-19-0011		
	System-Derived		

C. Financial Methodologies

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

- Yes
- 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.

Between the following percent ages of the FPL:

FPL 100.00%

Between the medically needy income limit and a percent age of the FPL:

Between the SSI Federal Benefit Rate and:

Between other income standards:

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:

Name of income type:	Description:
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).
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.
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.

TN# 20-0013
 Supersedes
 TN# 91-0030, 10-004, 15-004, 18-0005, 19-0011, 20-0003

Approval Date: 11/6/2020

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Specific income changes are disregarded between redeterminations.

Specified income changes are disregarded:

Name of disregard:	Description:
Disregard of income increases after spenddown is met	Income increases which occur after a spenddown is met are disregarded for the remainder of the spenddown budget period.

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 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.
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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.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS0004O | WI-20-0013

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D. Income Standard Used

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

Medically Needy Populations Based on Age, Blindness or Disability

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	System-Derived		

E. Resource Standard Used

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

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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	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.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WI2020MS00040 | WI-20-0013

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Superseded SPA ID	WI-19-0011		
	System-Derived		

G. 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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