

GUIDE TO APPLYING FOR WISCONSIN'S HEALTH AND NUTRITION PROGRAMS

This is a guide to applying for BadgerCare Plus and Medicaid, and FoodShare Wisconsin. BadgerCare Plus and Medicaid are two of Wisconsin's free or low-cost health insurance plans. FoodShare Wisconsin provides food dollars so that you can buy nutritious food.

This guide will tell you:

- ⇒ Who can enroll
- ⇒ How to apply
- ⇒ What you need to tell us
- ⇒ What information you will need to prove and how
- ⇒ What benefits and services are available
- ⇒ Your rights and program rules
- ⇒ About Fair Hearings

If you do not find the information you need in this guide, go to dhs.wisconsin.gov/em/customerhelp or call 1-800-362-3002.

To apply or to see what programs you may be able to get, go to access.wi.gov or contact your local county or tribal agency.

WHO CAN ENROLL IN BADGERCARE PLUS

You may be able to enroll in BadgerCare Plus if you are a Wisconsin resident and a:

- Child (birth to age 19)
- Pregnant woman
- Parent or relative who lives with and takes care of a child
- Parent with a child(ren) in foster care
- Young adult who is leaving foster care
- Farmer who is a self-employed parent, and
- Your family income is at or below the monthly program limit. (See table below), and
- You are a United States citizen or legal immigrant*

*If you are not a citizen or a legal immigrant, you may be able to get help through BadgerCare Plus Emergency Services or BadgerCare Plus Prenatal Services. Your immigration status will not be shared with the United States Citizenship or Immigration Services (USCIS) (formerly INS).

BadgerCare Plus Monthly Income Limits*

Family Size	100% of FPL*	150% of FPL*	200% of FPL*	300% of FPL*
1	\$ 866.67	\$1,300.00	\$1,733.33	\$2,600.00
2	\$1,166.67	\$1,750.00	\$2,333.33	\$3,500.00
3	\$1,466.67	\$2,200.00	\$2,933.33	\$4,400.00
4	\$1,766.67	\$2,650.00	\$3,533.33	\$5,300.00
5	\$2,066.67	\$3,100.00	\$4,133.33	\$6,200.00
6	\$2,366.67	\$3,550.00	\$4,733.33	\$7,100.00
7	\$2,666.67	\$4,000.00	\$5,333.33	\$8,000.00
8	\$2,966.67	\$4,450.00	\$5,933.33	\$8,900.00
For each additional person add:				
	\$300.00	\$450.00	\$600.00	\$900.00

*Effective March 1, 2008. These income amounts are based on the 2008 federal guidelines, which increase by a small amount each March. For current guidelines go to dhs.wisconsin.gov/em/customerhelp.

The following describes what plan is available under each BadgerCare Plus income level. Keep in mind, all children and all young adults leaving out-of-home care can be enrolled regardless of his/her income.

100% FPL

- Parents and relatives who care for a child with family income at or below 100% of the FPL may be enrolled in the Standard Plan and will not have a premium.
- Children with family income at or below 100% of the FPL may be enrolled in the Standard Plan and will not have a premium or copayments.
- Pregnant women with family income at or below 100% of the FPL may be enrolled in the Standard Plan and will not have a premium or copayments.

150% FPL

- Children, parents and relatives who care for a child with family income between 100% and 150% of the FPL may be enrolled in the Standard Plan and will not have a premium.
- Pregnant women with family income between 100% and 150% of the FPL may be enrolled in the Standard Plan and will not have a premium or copayment.
- Pregnant women, children, parents and relatives who care for a child with family income at or below 150% of the FPL may be enrolled three months prior to the date of application.
- Children with family income above 150% of the FPL, with access to employer health insurance, may be enrolled for up to six months in the Standard Plan if they meet a spenddown. The amount of the spenddown is the difference between the family income and 150% of the FPL over a six month period. At the point that a family has medical expenses that add up to this spenddown amount, these children will be enrolled and not have a premium.

200% FPL

- Parents and relatives who care for a child with family income between 150% and 200% of the

FPL, without access to employer health insurance, may be enrolled in the Standard Plan and will have a premium.

- Children with family income between 150% and 200% of the FPL, without access to employer health insurance, may be enrolled in the Standard Plan and will not have a premium.
- Pregnant women with family income between 150% and 200% of the FPL may be enrolled in the Standard Plan and will not have a premium or copayments.
- Self employed parents with family income at or below 200% of the FPL, after depreciation expenses are subtracted from their income, may be enrolled in the Benchmark Plan and will have to pay a premium.

300% FPL

- Parents and relatives who care for a child with family income above 300% of the FPL may not be enrolled unless they qualify with self-employment income.
- Children with family income at or above 300% of the FPL, without access to employer health insurance, may be enrolled in the Benchmark Plan and will have to pay a premium.
- Family premiums for parents and children with income at or below 300% of the FPL will not exceed 5% of the family income. Family premiums for those with income above 300% of the FPL may sometimes exceed 5% of the family income.
- Pregnant women with income between 250% and 300% of the FPL may be enrolled in the Benchmark Plan and will not have a premium or copayment. Pregnant women with income above 300% of the FPL will have a spenddown. The amount of the spenddown is the difference between the family income and 300% of the FPL over a six month period. At the point that a family has medical expenses that add up to this spenddown amount, she may be enrolled in the Benchmark Plan and will not have a premium or copayment.

Note: Young adults exiting Foster Care may be enrolled in the Standard Plan at any income level.

WHO CAN ENROLL IN MEDICAID

You may be able to enroll in Medicaid if you are a Wisconsin resident, and:

- 1 Age 65 or older, blind or disabled, and
- 2 Your family income is at or below the monthly program limit (see the following table), and
- 3 You are a United States citizen or legal immigrant.

Medicaid Monthly Income Limits*

Type	Assets	Monthly Net Income Limit
Categorically Needy 1 Person	\$2,000	\$508.45 + actual shelter cost up to \$212.13
Categorically Needy 2 People	\$3,000	\$769.38 + actual shelter cost up to \$318.67
Medically Needy 1 Person	\$2,000	\$591.67
Medically Needy 2 People	\$3,000	\$591.67
Community Waivers Special Income	\$2,000	\$1,911
Institutions Categorically Needy	\$2,000	\$1,911
Qualified Medicare Beneficiary 1 Person	\$4,000	\$866.67
Medicaid Purchase Plan 1 Person	\$15,000	\$2,166.67
Medicaid Purchase Plan 2 People	\$15,000 (Applicant Only)	\$2,916.67

*Effective March 1, 2008. These income amounts are based on the 2008 federal guidelines, which increase by a small amount each March. For current guidelines go to dhs.wisconsin.gov/em/customerhelp.

MEDICARE PURCHASE PLAN (BUY-IN)

Type	Assets	Monthly Net Income Limit
Specified Low - Income Medicare Beneficiary 1 Person	\$4,000	\$866.67 - \$1,039
Specified Low - Income Medicare Beneficiary 2 People	\$6,000	\$1,166.67 - \$1,399
Specified Low - Income Medicare Beneficiary Plus 1 Person	\$4,000	\$1,040 - \$1,169
Specified Low - Income Medicare Beneficiary Plus 2 People	\$6,000	\$1,399 - 1,574
Qualified Disabled and Working Individuals 1 Person	\$4,000	\$1,733.33
Qualified Disabled and Working Individuals 2 People	\$6,000	\$2,333.33

*Effective March 1, 2008. These income amounts are based on the 2008 federal guidelines, which increase by a small amount each March. For currently guidelines go to dhs.wisconsin.gov/em/customerhelp.

Please Note: Not all plans cover the same services. To see if the service you need is covered, call 1-800-362-3002 or ask your health care provider.

COVERED SERVICES FOR SOME HEALTH INSURANCE PLANS INCLUDE:

- ✓ Ambulance (emergency only)
- ✓ Case management services
- ✓ Chiropractic services
- ✓ Dental services
- ✓ Family planning services and supplies
- ✓ Federally Qualified Health Center services
- ✓ HealthCheck Services (see HealthCheck to learn more)

- ✓ Home and community-based services authorized under a waiver
- ✓ Home health services or nursing services if a home health agency is not available
- ✓ Hospice care
- ✓ Inpatient hospital services, other than services in an institution for mental disease
- ✓ Inpatient hospital, skilled nursing facility, and intermediate care facility services for patients in institutions for mental disease who are:
 - ⇒ Under 21 years of age
 - ⇒ Under 22 years of age and receive services immediately before reaching age 21
 - ⇒ 65 years of age or older
- ✓ Intermediate care facility services, other than services at an institution for mental disease
- ✓ Laboratory and X-ray services
- ✓ Legend drugs and over-the-counter drugs listed in Medicaid's Preferred Drug Index
- ✓ Medical supplies and equipment
- ✓ Mental health, medical day treatment and psychosocial rehabilitative services
- ✓ Nursing services, including services performed by a nurse practitioner and nurse midwife
- ✓ Optometric or optical services, including eye glasses
- ✓ Outpatient hospital services
- ✓ Personal care services
- ✓ Physical and occupational therapy
- ✓ Physician services
- ✓ Podiatry services
- ✓ Prenatal care coordination for women with high-risk pregnancies
- ✓ Respiratory care services for ventilator-dependent individuals
- ✓ Rural health clinic services
- ✓ Skilled nursing home services other than in an institution for mental disease
- ✓ Speech, hearing and language disorder services
- ✓ Substance abuse (alcohol and other drug abuse)
- ✓ Transportation to get BadgerCare Plus or Medicaid covered services
- ✓ Tuberculosis services

OTHER HEALTH INSURANCE PLANS

Prenatal Services Plan

Prenatal Services provides pregnancy-related health care for women who can't get BadgerCare Plus because of immigration or citizenship status. If you are enrolled in Prenatal Services, benefits include:

- ✓ Prenatal care
- ✓ Doctor and clinic visits
- ✓ Prescription drugs, including prenatal drugs
- ✓ Labor and delivery

Family Planning Waiver

You may be able to enroll in the Family Planning Waiver program if you are a woman age 15 through 44 and have monthly income under 200% of the FPL (see BadgerCare Plus Monthly Income Limits table).

Through an initial or routine annual family planning related office visit, the following services may be covered:

- ✓ Contraceptive services and supplies (example, birth control services)
- ✓ Natural family planning supplies
- ✓ Family planning prescriptions
- ✓ Pap tests
- ✓ Tests and treatment for certain Sexually Transmitted Diseases (STD) including chlamydia, gonorrhea, herpes and syphilis as well as certain other lab tests
- ✓ Tubal ligation
- ✓ Routine preventive primary services related to family planning

NOTE: Only certain services are covered under the Family Planning Waiver program. For example, mammograms and hysterectomies are not covered. You should tell your health care provider you have this coverage before you get services. Your provider must tell you if a service isn't covered. If a service isn't covered and you still want and get the service, you'll have to pay for it. You may also call 1-800-362-3002 and ask if a service is covered.

Please keep in mind, this is a limited plan and you may be able to enrolled in BadgerCare Plus which is a full benefit plan.

Emergency Services Plan

Emergency Services is short term health insurance for people who have an emergency medical condition and can't get BadgerCare Plus because of their immigration or citizenship status.

Emergency Services will only pay for health care you get for an emergency medical condition. A medical emergency is a medical problem which could put your health at risk if you don't get medical care right away.



HealthCheck is a preventive health check-up program for anyone under the age of 21 who is currently enrolled in BadgerCare Plus.

HealthCheck providers will teach you and your child how to keep from getting sick, and can also find health problems early, before they get worse.

HealthCheck meets the physical exam rules for programs such as Head Start, Child Care or WIC (Women, Infants and Children Supplemental Food Program) and school physicals. Your child(ren) may also be able to get certain services not normally paid for by BadgerCare Plus through a HealthCheck exam.

If you need help getting to your HealthCheck appointments, call your local county or tribal agency.

Call 1-800-722-2295 (toll free) to find your HealthCheck provider. If you are enrolled in a BadgerCare Plus HMO, call your HMO for information on HealthCheck.

HEALTH MAINTENANCE ORGANIZATION

Some people enrolled in Medicaid and most of the people enrolled in BadgerCare Plus will also be enrolled in a Health Maintenance Organization (HMO). You will get all your health care services from providers who are part of your HMO.

You do not have to get family planning services from your HMO. Call 1-800-362-3002 and they can help you find another provider.

WHO CAN APPLY FOR FOODSHARE

Anyone can apply for FoodShare.

You may be able to enroll if:

- ① Your family income is at or below the monthly program limit (see table below), **and**
- ② You are a Wisconsin resident, **and**
- ③ You or members of your family are a United States citizen or a citizen of another country who lives in the United States legally and permanently.

If your family's gross income is under the Gross Monthly Income amount (see the following table) you may be able to enroll in FoodShare. Certain credits for shelter, child care and child support, are subtracted from your gross monthly income to find your net monthly income.

The FoodShare benefit amount is based on the number of people in your household and your net monthly income.

*FOODSHARE MONTHLY PROGRAM INCOME LIMITS

People in Household	Gross Monthly Income Limit	Net Monthly Income Limit
1	\$1,734	\$ 867
2	\$2,334	\$1,167
3	\$2,934	\$1,467
4	\$3,534	\$1,767
5	\$4,134	\$2,067
6	\$4,734	\$2,367
For each additional person add:		
	\$600	\$300

*Effective October 1, 2008. These income amounts are based on the 2008 federal guidelines, which increase by a small amount each October. For current guidelines go to dhs.wisconsin.gov/em/customerhelp.

You can use your benefits to buy food at any grocery store that takes part in FoodShare. You can buy food items such as:

- ✓ Breads and cereals,
- ✓ Fruits and vegetables,
- ✓ Meats, fish and poultry,
- ✓ Dairy products, and
- ✓ Seeds and plants to grow food for your family to eat.

You may also use your benefits to pay for meals, if the provider accepts the QUEST card and you reside in a:

- ✓ Drug and alcohol treatment center,
- ✓ Shelter for battered women,
- ✓ Shelter for the homeless, or
- ✓ Group home for people with disabilities.

You can use your benefits to:

- ✓ Eat at a group meal site for senior citizens, or
- ✓ Have your meals delivered to your home.

FAIR HEARINGS FOR FOODSHARE, BADGERCARE PLUS AND MEDICAID

You may ask for a Fair Hearing with the Division of Hearings and Appeals, if you believe your:

- ✓ Application was denied and you don't think it should have been,
- ✓ Application was not acted upon within 30 days,
- ✓ Benefits were ended, suspended or reduced and you don't think they should have been,
- ✓ Prior authorization request for a medical service was denied and should not have been, or
- ✓ If you don't agree with the amount of the benefits you get.

For more information about Fair Hearings go to dhfs.wisconsin.gov/em/customerhelp or call 1-800-362-3002.

REPORTING CHANGES

Certain changes must be reported to the local agency. If you are enrolled in any BadgerCare Plus Plan, Medicaid or FoodShare, you will get a Notice of Decision. This notice will list what changes you must report.

If you do not report a change, you may be prosecuted for fraud or you may be required to repay to the state any benefits you should not have gotten.

You can report changes to your local agency online at access.wi.gov (click on "Report My Changes"), by phone, mail or in person.

YOUR RIGHTS

Anyone applying for or enrolled in Medicaid, BadgerCare Plus or FoodShare has the right to:

- ✓ Be treated with respect by state and county employees,
- ✓ Have all the information given to the county or tribal office kept private,
- ✓ Have access to records and files relating to your case, except information given to the county or tribal agency under a promise of privacy,
- ✓ Keep getting benefits, even if you are temporarily out of Wisconsin but you are still a Wisconsin resident,
- ✓ Have your enrollment determined within 30 days from the day the local agency gets your application,
- ✓ Be told before you have any changes in your benefits or enrollment status,
- ✓ Get emergency medical care, and
- ✓ Ask for reasonable accommodation to take part in FoodShare, BadgerCare Plus or Medicaid for a disability-related reason, or the right to ask for interpreters or translators in order to enroll.

HOW TO APPLY FOR FOODSHARE, BADGERCARE PLUS AND MEDICAID

When you apply with the local county or tribal agency, you'll need to tell us certain information and give us proof of some of the information.

You can apply with your local county or tribal agency online at access.wi.gov (click on Apply For Benefits), by phone, mail or in person.

If you apply online or by phone, you'll need to take or mail your proof to the local agency. If you apply by mail you should include your proof with your application. If you apply in person, take all of your proof with you when you go to your interview.

If you have questions or need the address and phone number of your local agency go to dhs.wisconsin.gov/em/customerhelp or call 1-800-362-3002.

INTERVIEWS

If you are applying for FoodShare, you will have to have an interview. FoodShare interviews can be done by phone if you have a hardship. Some hardships could be that you:

- ✓ Are elderly or disabled
- ✓ Work during regular business hours
- ✓ Are having bad weather
- ✓ Don't have a ride to the local office
- ✓ Can't get child care
- ✓ Take care of a family member in your home
- ✓ Wouldn't be comfortable going to the local agency

INFORMATION YOU MUST TELL US

For each person who is applying for Medicaid, BadgerCare Plus or FoodShare, you'll need to tell us:

- ✓ Social Security Number (SSN) (Anyone who applies for BadgerCare Plus Emergency Services or BadgerCare Plus Prenatal Care does not have to provide an SSN.)
- ✓ Date of birth
- ✓ Marital status
- ✓ Who lives in your home and how you're related
- ✓ Where you live (street address, city)
- ✓ Citizenship/immigration status
- ✓ Job information including employer's name, street address and city
- ✓ Income (self-employment income, job income and wages, how often and how much paid)
- ✓ Other income (child support, Veterans Benefits, Social Security, Unemployment Compensation, etc.)
- ✓ Assets
- ✓ For BadgerCare Plus and Medicaid any health insurance and long term care information including the name of the insurance company, policy number and who is covered under that policy.

PROOF

When you apply, you'll have to provide proof of some of the information you tell us. The following charts list what to send or bring with you to the local office.

Proof Needed and Items You Can Use	BadgerCare Plus	Medicaid	FoodShare
<p>U.S. Citizenship (See Note on page 10)</p> <ul style="list-style-type: none"> • U.S. passport • U.S. birth certificate • Citizenship ID card • Adoption papers • Military record • Hospital record of U.S. birth • Insurance record with U.S. birth • Nursing home admission papers showing U.S. birth 	Yes	Yes	No
<p>Immigration Status — Any one who isn't a U.S. citizen can use a copy of his or her:</p> <ul style="list-style-type: none"> • Alien Registration card • Naturalization certificate 	Yes	Yes	Yes
<p>Identity (See Note on page 8)</p> <ul style="list-style-type: none"> • U.S. passport • Military dependent ID card • State driver license • Military ID or draft record • School picture ID • Native American Tribal document • For children under 18 applying for BadgerCare Plus or Medicaid, a signed Statement of Identity form, (HCF 10154). To get this form, contact your local agency. 	Yes	Yes	Yes
<p>Disability — You may be asked to provide proof of disability or blindness if the state is not able to get this information. If so, you may provide an approval letter from the State Disability Determination Bureau or award letter from the Social Security Administration.</p>	No	Yes	Yes
<p>Assets</p> <ul style="list-style-type: none"> • Bank statements • Titles • Contracts • Deeds • Life insurance policies, etc. 	No	Yes	No
<p>Health Insurance — The State of Wisconsin will find out if employer health insurance is available to BadgerCare Plus applicants and family members. You may be asked to provide proof of employer health insurance if the state is not able to get this information.</p>	Yes	No	No
<p>Pregnancy — You can use a note or letter from your health care provider that confirms the pregnancy and includes the due date.</p>	Yes	Yes	No

If you don't have an item listed, contact your local county or tribal agency and ask for help.

Proof Needed and Items You Can Use	BadgerCare Plus	Medicaid	FoodShare
<p>Income — Proof of all job income and wages for any family members who have a job.</p> <ul style="list-style-type: none"> • Check stubs • An Employer Verification of Earnings (EVF-E) form • A letter from the employer. If you choose a letter, it must have the same information as the EVF-E form. Note: If you want to use an EVF-E form, ask the local agency to send one to you. Your employer must complete and sign this form. Once completed, return it to the local agency. 	Yes	Yes	Yes
<p>Self-Employment Income — Proof of income for all family members who are self-employed.</p> <ul style="list-style-type: none"> • Copies of tax forms • A Self-Employment Income Report. Contact the local agency for this form. 	Yes	Yes	Yes
<p>Other Income — You must provide proof of all other income for anyone in your home such as Social Security, Supplemental Security Income, alimony, child support, disability or sick pay, interest or dividends, Veterans Benefits, workers compensation, unemployment insurance, etc. You can use:</p> <ul style="list-style-type: none"> • Pension statement • Current award letter • Current Social Security or Supplemental Security Income check 	Yes	Yes	Yes
<p>Child Support Paid or Received — You can use:</p> <ul style="list-style-type: none"> • Court order • Payment record from other state <p>If you pay or get child support in Wisconsin, the local agency may be able to get this proof. If not, you will need to provide proof.</p>	Yes	Yes	Yes
Proof Needed and Items You Can Use, If You Want to Get the Credit	BadgerCare Plus	Medicaid	FoodShare
<p>Rent or House Payments — Some items you can use:</p> <ul style="list-style-type: none"> • Lease or rental agreement or receipt/letter from landlord • Mortgage payment record 	No	Yes	Yes
<p>Utility Cost — Some items you can use are:</p> <ul style="list-style-type: none"> • Utility and/or phone bill • Letter from utility company • Firewood receipt 	No	Yes	Yes
<p>Medicaid Expenses — Items you can use:</p> <ul style="list-style-type: none"> • Billing statement/Itemized receipts • Medicare card showing Part “B” coverage • Health insurance policy showing premium coinsurance, co-payment, or deductible • Medicine or pill bottle with price on label 	No	Yes	Yes
<p>Child Care Cost — You can use:</p> <ul style="list-style-type: none"> • Copy of cancelled check • Receipt or letter from your child care provider 	No	No	Yes



NOTE: If you need help getting proof, contact the local agency. They can help you.

If you need the address or phone number of your local county or tribal agency, visit dhs.wisconsin.gov/em/customerhelp or call 1-800-362-3002.

If you have already given proof of citizenship and identity to your local agency, you will not have to provide this information again.

You will not have to provide proof of citizenship or identity if you are:

- ✓ Currently getting Social Security Disability Insurance (SSDI)
- ✓ Currently getting Supplemental Security Income (SSI) benefits
- ✓ Currently receiving Medicare
- ✓ Applying for or enrolled in the BadgerCare Plus Prenatal Program
- ✓ Applying for or enrolled in Medicaid or BadgerCare Plus Emergency Services

Please keep in mind, that for FoodShare and Medicaid, you are given credit for some expenses. For BadgerCare Plus, you are given credit for child support you pay to someone else. To get these credits, you must report and provide proof of the expense.

BEGIN DATES

Apply as soon as possible! The earliest date you can get benefits is the date the local agency gets your completed application or a signed request for assistance and have met all program rules.

You can complete an application and/or a request for assistance online at access.wi.gov, by completing a paper application, the Medicaid/BadgerCare Plus and Family Planning Waiver Registration Application (HCF 10129) or the FoodShare Wisconsin Registration/Important Information (HCF 16019A).

You will be notified, in writing, within 30 days from the day the local agency receives your application of your enrollment status.

BACKDATED COVERAGE FOR MEDICAID AND BADGERCARE PLUS

If you have medical bills in any of the three months prior to your application date you may be able to get coverage if you are:

- ✓ Enrolled in Medicaid
- ✓ A pregnant women enrolled in either the Standard or Benchmark Plan
- ✓ A young adult leaving out of home care (foster care)
- ✓ A child, family or person who cares for a child and you have with family income at or below 150% of the FPL

If you want to ask for backdated coverage, check “yes” to the question on the application “Do you need help paying for health care in any of the previous three months, for anyone in your home?”. If you are completing a paper application, you need to fill out the Backdated Coverage form in the application. You will need to send proof (including proof of income) for all of the months you are asking for backdated coverage.

Keep in mind, you can ask for backdated coverage at any time.

PREMIUMS

You may have to pay a premium to enroll in BadgerCare Plus.

If you do, you must pay your first premium payment to the local agency before you can enroll. Premium payments are applied to the oldest month of enrollment.

Only your first premium payment should be sent to the local agency. All other premiums must be sent to:

BadgerCare Plus
c/o WI Dept of Health Services
Box 93187
Milwaukee, WI 53293-0187

Do not send cash!

More information about premiums is available online at badgercareplus.org or in the BadgerCare Plus Enrollment and Benefits handbook. This handbook is available online or you will get this handbook when your application has been processed.

BADGERCARE PLUS AND MEDICAID DEDUCTIBLE PROGRAMS

A BadgerCare Plus or Medicaid Deductible is for those who have high medical bills and have been denied BadgerCare Plus or Medicaid because your family income is too high.

If you were denied BadgerCare Plus or Medicaid because your family income was over the limit, but you meet all other program rules you may still be able to enroll in the BadgerCare Plus or Medicaid Deductible program. You may be able to enroll, if you are a:

- ✓ Pregnant woman
- ✓ Child under 19 years of age
- ✓ Elderly or disabled adult

The Deductible amount is the difference between your monthly income and the monthly program income limits.

ForwardHealth and QUEST Cards

If you are enrolled in a health care program, you will get a *ForwardHealth* card. If you are enrolled in FoodShare you will get a QUEST card. You will get your card(s) in the mail, within 4 - 5 days from when your application is approved. You will need these cards to get benefits.

If you lose your benefits, you should keep your card(s) because you will use the same card if you get benefits at a future date.

If you have had a card previously, a new card will not be mailed to you unless you ask for one.

See the “Key Contact” section, if you need a new card.

ACCESS gives you four online tools that you or someone you know can use to:

- ① Find out which low or no-cost health, nutrition and other programs you might be able to get.
- ② Apply online for BadgerCare Plus, Family Planning Waiver, Medicaid and FoodShare.
- ③ Get up-to-date information about the status of your FoodShare, Medicaid or BadgerCare Plus, Family Planning Waiver, SeniorCare or Caretaker Supplement benefits.
- ④ Report changes online.

access.wi.gov

OTHER PROGRAMS

CARETAKER SUPPLEMENT



Wisconsin’s Caretaker Supplement (CTS) is a cash benefit for families in which the parent(s) get Supplemental Security

Income payments. Caretaker Supplement is not a health care benefit; it pays cash to eligible parents. Caretaker Supplement benefits are \$250 each month for the first eligible child and \$150 per month for each additional eligible child.

For more information on CTS, visit dhs.wisconsin.gov/ssi/caretaker.htm or call 1-800-362-3002.

WOMEN, INFANTS AND CHILDREN (WIC) PROGRAM



If you are able to get FoodShare, Medicaid or BadgerCare Plus, you may also be able to get the Special Supplemental Food Program for Women, Infants and Children (WIC). Pregnant women and young children may get nutritious food, health and nutrition counseling through this program.

To find out more about WIC and other programs you may be able to get, contact 1-800-722-2295 or go to dhs.wisconsin.gov/wic.



KEY CONTACTS

Member Services: 1-800-362-3002

General information, questions about your *ForwardHealth* card or if you need a new card, or bills for services

QUEST Customer Service: 1-877-415-5164

General information about your QUEST card or a new card.

Premium Information: 1-888-907-4455

Including questions about other health insurance and Health Insurance Premium Payment [HIPP]

HMO - Enrollment: 1-800-291-2002

General information

HMO - Complaints: 1-800-760-0001

ACCESS: access.wi.gov to see what benefits you may be able to get, to apply for health, nutrition and other programs, to check benefits or report changes to your worker.

More Information:

dhs.wisconsin.gov/em/customerhelp

All the telephone numbers listed have TTY and interpretation services available. These services are free of charge. For TTY services, call 711.

Write the information for your local agency here. That way you'll always have it when you need it.



County Agency Contact Information

County Name _____

Address _____

Phone _____

Fax _____

Information provided in this booklet is general. To find out more detailed information regarding these programs, please contact **1-800-362-3002** or your local county or tribal agency.

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