

STATE OF WISCONSIN  
Department of Health Services  
Division of Medicaid Services



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**DATE:** 12/20/2024

**ADMINISTRATOR'S MEMO**

**DISPOSAL DATE:** Ongoing

**NOTICE:** 24-06

**TO:** County Departments of Human Services Directors  
County Departments of Social Services Directors

**FROM:** William E. Hanna  
Medicaid Director  
Division of Medicaid Services

Signed by:  
*William Hanna* 12/11/2024  
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**ENHANCED FEDERAL FUNDING FOR QUALIFYING IM ACTIVITIES**

**PURPOSE**

The purpose of this memo is to communicate information about enhanced federal funding for eligibility and enrollment activities under the Income Maintenance (IM) contract between the Department of Health Services (DHS) and Consortia for the period of January 1, 2023 through December 31, 2023.

**BACKGROUND**

In accordance with the Consortia's Income Maintenance contract (Exhibit II, Section 1-C. Reimbursement), DHS requested enhanced federal funding for qualifying eligibility and enrollment activities from the Center for Medicare and Medicaid Services (CMS).

Requests must be submitted for approval for each federal fiscal year (FFY) and are subject to review and demonstrated compliance with CMS requirements. If CMS determines that the enhanced funding is no longer available or if DHS's request is not approved, DHS will return to the standard 50% reimbursement rate for local costs.

**Amount and Distribution of Enhanced Funding**

The amount of enhanced funding was determined by using a blended rate based on the proportion of the total Medicaid related IM activities that qualify for enhanced claiming at 75%, determined by the RMS statistics for calendar year 2023. The attached table shows the amount of local enhanced funding to be distributed to the Consortia for CY23.

Enhanced funding associated with local dollars will be distributed based on the amount of local match each Consortium contributed in CY 2023 and reimbursement to the Consortia will be issued in the form

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of a check. A Consortium's enhanced funding amount is eligible for federal match if the Consortium chooses to re-invest the funds into the IM programs for reimbursement of allowable expenses.

**CENTRAL OFFICE CONTACTS**

For questions or assistance regarding information contained in this memo, please contact Jonelle Brom at (608) 867-4515 or by email at [JonelleM.Brom@dhs.wisconsin.gov](mailto:JonelleM.Brom@dhs.wisconsin.gov)

For fiscal questions, please contact Scott Coleman at (608) 266-2718 or by email at [ScottL.Coleman@dhs.wisconsin.gov](mailto:ScottL.Coleman@dhs.wisconsin.gov)

**CY 2023 IM Enhanced Funding Reimbursement**

<b>Consortium</b>	<b>CY 23 Enhanced FED Reimbursement</b>
Bay Lake (Brown)	\$552,537.21
Capital (Dane)	\$1,645,557.39
Great Rivers (Eau Claire)	\$835,543.66
Moraine Lakes (Fond du Lac)	\$907,475.21
WKRP (Kenosha)	\$568,877.66
Western (LaCrosse)	\$443,950.32
Central (Marathon)	\$349,065.17
East Central (Marquette)	\$904,132.31
Southern (Rock)	\$660,559.93
Northern (Wood)	\$387,350.15
<b>TOTAL</b>	<b>\$7,255,049.01</b>