DHS Note: See MMDL forms S14, S28, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

A. MANDATORY CATEGORICALLY NEEDY

1. AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:

Family Size	***Need Standard**	***PaymentStandard**	**Maximum payment amounts**
1	$311/$301	$248.80/$240.80	Maximum payment amounts are the same as the payment standard rounded down to the nearest whole dollar
2	$550/$533	$440.00/$426.40	
3	$647/$626	$517.60/$500.80	
4	$772/$749	$617.60/$599.20	
5	$886/$861	$708.80/$688.80	
6	$958/$929	$766.40/$743.20	
7	$1,037/$1,007	$829.60/$805.60	
8	$1,099/$1,068	$879.20/$854.40	
9	$1,151/$1,117	$920.80/$893.60	
10	$1,179/$1,143	$943.20/$914.40	
11	$1,204/$1,168	$963.20/$934.40	
12	$1,229/$1,193	$983.20/$395.40	

Add $25 per person to the need standard and $20 per person to the payment standard for groups larger than 12. The payment standard is increased by $56.80 if a pregnant woman who is in at least her eighth month is included in the AFDC group.

* Area I/Area II; need standard is increased by $71 if a pregnant woman who is in at least her eighth month is included in the AFDC group.

2. Pregnant Women and Infants under Section 1902(a)(10)(A)(i)(IV) of the Act:

☐ 133 percent

☒ ~~185~~ percent (no more than 185 percent)
(specify) 150%

TN # 07-007
Supersedes
TN # 07-002

Approval date NOV 2 7 2007

Effective date 02/01/2008

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

DHS Note: See MMDL forms S14, S28, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

B. MANDATORY CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children between Ages 6 and 19

The levels for determining income eligibility for groups of children who are born after September 30, 1983 and who have attained 6 years of age but are under 19 years of age under the provisions of section 1902(l)(1) of the Act (P.L. 101-508) are based on 100 percent (no more than 100 percent) of the official Federal income poverty line for the family size involved, as revised annually in the Federal Register.

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

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

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women and Infants

The levels for determining income eligibiity for optional groups of pregnant women and infants under the provisions of sections 1902(a)(1)(A)(ii)(IX) and 1902(1)(2) of the Act are as follows:

Based on 185% of the official Federal income poverty level (no less than 133 percent and no more than 185 percent) for the family size involved, as revised annually in the Federal Register.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children Between Ages 6 and 8

The levels for determining income eligibility for groups of children who are born after September 30, 1983 and who have attained 6 years of age but are under 8 years of age under the provisions of section 1902(l)(2) of the Act are as follows:

Based on ________ percent (no more than 100 percent) of the official Federal income poverty line.

Family Size	Income Level
1	$
2	$
3	$
4	$
5	$
6	$
7	$
8	$
9	$
10	$

NOT APPLICABLE - SEE PAGE 2a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO THE SUPPLEMENTAL SECURITY INCOME (SSI) FEDERAL BENEFIT RATE

1. SSI-Related Groups Other Than Poverty Level Aged and Disabled Individuals:

1. $583.78
(+ actual shelter up to $250.00)

2. $882.05
(+ actual shelter up to $375.00)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO THE SUPPLEMENTALSECURITY INCOME (SSI) FEDERAL BENEFIT RATE

2. Individuals in institutions who are eligible under a special income level (42 CFR 435.236)

 X The State allows eligibility for individuals with income that does not exceed 300 percent of the SSI Federal benefit rate.

 ___ The State has elected to allow eligibility for individuals with income at an amount lower than 300 percent of the SSI Federal benefit rate.

Effective Date:	Amount

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

3. Aged and Disabled Individuals

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on ______ percent of the official Federal income poverty line.

Family Size	Income Level
1	$
2	$
3	$
4	$
5	$

If an individual receives a title II benefit, any amount attributable to the most recent increase in the monthly insurance benefit as a resultofa title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOMES ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

The levels for determining income eligibility for groups of qualified Medicare beneficiaries under the provisions of section 1905(p)(2)(A) of the Act are as follows:

1. NON-SECTION 1902(f) STATES

a. Based on the following percent of the official Federal poverty income level:

Eff. August 9, 1989: ☐ 85 percent ☒ 100 percent (no more than 100)

Eff. April 1, 1990: ☐ 85 percent ☒ 100 percent (no more than 100)

Eff. January 1, 1991: 100 percent

Eff. January 2, 1992: 100 percent

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. SECTION 1902(f) STATES WHICH AS OF JANUARY 1, 1989 USED INCOME STANDARDS MORE RESTRICTIVE THAN SSI

a. Based on the following percent of the official Federal income poverty level:

Eff. Jan. 1, 1989: /_/ 80 percent /_/ _______ percent (no more than 100)

Eff. Jan. 1, 1990: /_/ 85 percent /_/ _______ percent (no more than 100)

Eff. Jan. 1, 1991: /_/ 95 percent /_/ _______ percent (no more than 100)

Eff. Jan. 1, 1992: 100 percent

b. Levels:

Family Size	Income Levels
1	$
2	$

NOT APPLICABLE

This page has been superseded by MACPro Section “Medically Needy Income Level.”

This page has been superseded by MACPro Section “Medically Needy Income Level.”

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

RESOURCE LEVELS

A. CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women

a. Mandatory Groups

/_/ Same as SSI resources levels.

/X/ Less restrictive than SSI resource levels and is as follows:

Family Size	Resource Level
1	0
2	0

b. Optional Groups (NOT APPLICABLE)

/_/ Same as SSI resources levels.

/_/ Less restrictive than SSI resource levels and is as follows:

Family Size	Resource Level
1	
2	

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

2. Infants

a. Mandatory Group of Infants

/_/ Same as resource levels in the State's approved AFDC plan.

/X/ Less restrictive than the AFDC levels and are as follows:

Family Size	Resource Level
1	0
2	0
3	0
4	0
5	0
6	0
7	0
8	0
9	0
10	0

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

b. Optional Group of Infants

/_/ Same as resource levels in the State's approved AFDC plan.

/_/ Less restrictive than the AFDC levels and are as follows:

Family Size	Resource Level
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

NOT APPLICABLE

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

3. Children

a. Mandatory Group of Children

/_/ Same as resource levels in the State's approved AFDC plan.

/X/ Less restrictive than the AFDC levels and are as follows:

Family Size	Resource Level
1	0
2	0
3	0
4	0
5	0
6	0
7	0
8	0
9	0
10	0

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

b. Mandatory Group of Children under Section 1902(a)(10)(i)(VII) of the Act. (Children born after September 30, 1983 who have attained age 6 but have not attained age 19.)

___ Same as resource levels in the State's approved AFDC plan.

X Less restrictive than the AFDC levels and are as follows:

Family Size	Resource Level
1	0
2	0
3	0
4	0
5	0
6	0
7	0
8	0
9	0
10	0

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

4. Aged and Disabled Individuals

/_/ Same as SSI resource levels.

/_/ More restrictive than SSI levels and are as follows:

Family Size	Resource Level
1	
2	
3	
4	
5	

/X/ Same as medically needy resource levels (applicable only if State has a medically needy program)

This page has been superseded by MACPro Section "Medically Needy Resource Level."

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

REASONABLE LIMITS ON AMOUNT FOR NECESSARY MEDICAL
OR REMEDIAL CARE NOT COVERED UNDER MEDICAID

The deduction is limited to zero for the following medical and remedial care expenses, that:

1. Were incurred as the result of imposition of a transfer of assets penalty period.
2. A patient liability from a previous budget period, whether paid or unpaid, cannot be used as an incurred medical or remedial care expense in a subsequent budget period.
3. Incurred medical and remedial care expenses deducted from income to determine patient liability in a month cannot be used to determine patient liability in a subsequent month.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

METHODS FOR TREATMENT OF INCOME THAT DIFFER FROM THOSE OF THE SSI PROGRAM

(Section 1902(f) more restrictive methods and criteria and State supplement criteria in SSI criteria States without section 1634 agreements and in section 1902(f) States. Use to reflect more liberal methods only if you limit to State supplement recipients. DO NOT USE this supplement to reflect more liberal policies that you elect under the authority of section 1902(r)(2) of the Act. Use Supplement 8a for section 1902(r)(2) methods.)

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE RESTRICTIVE METHODS OF TREATING RESOURCES
THAN THOSE OF THE SSI PROGRAM - Section 1902(f) States only

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

METHODS FOR TREATMENT OF RESOURCES FOR INDIVIDUALS
WITH INCOMES RELATED TO FEDERAL POVERTY LEVELS

(Do not complete if you are electing more liberal methods under the authority of section 1902(r)(2) of the Act instead of the authority specific to Federal poverty levels. Use Supplement 8b for section 1902(r)(2) methods.)

NOT APPLICABLE

DHS Note: See MACPro form Optional State Supplement Beneficiaries for current information.

SUPPLEMENT 6 TO
ATTACHMENT 2.6-A

State: Wisconsin

Standards for Optional State Supplementary Payments

Payment Category (Reasonable Classification)	Administered By: Federal	Administered By: State	Income Level Gross: Person	Income Level Gross: Couple	Income Level Net: Person	Income Level Net: Couple	Income Disregards Employed
Aged	X		$1,500.00		$833.78		
Blind	X		$1,500.00		$833.78		
Disabled	X		$1,500.00		$833.78		
Aged and Aged Spouse	X			$3,000.00		$1,257.05	
Disabled and Disabled Spouse	X			$3,000.00		$1,257.05	
Aged and Blind Spouse	X			$3,000.00		$1,257.05	
Aged and Disabled Spouse	X			$3,000.00		$1,257.05	
Blind and Disabled Spouse	X			$3,000.00		$1,257.05	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME LEVELS FOR 1902(f) STATES - CATEGORICALLY NEEDY WHO ARE COVERED UNDER REQUIREMENTS MORE RESTRICTIVE THAN SSI

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

RESOURCE STANDARDS FOR 1902(f) STATES - CATEGORICALLY NEEDY

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

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

__| Section 1902(f) State   _X_| Non-Section 1902(f) State

A. For persons in remedial or care institutions* and SSI-related medically needy:

1. In-kind support and maintenance - Totally exempt unless regular, predictable, and received in return for a service or product delivered.

2. Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible - Deemed parental income is split among siblings and no further computations are done.

3. Income deductions - Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.

B. For AFDC-related medically needy:

1. Income deductions - Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.

2. Gross income test - In determining eligibility, the AFDC gross income test which is based on 185 percent of the AFDC standard of need is not applied.

3. Income Disregard – For pregnant women covered under 1902(a)(10)(C)(ii)(II), disregard income in the amount of the difference between 300% of the poverty level (as revised annually in the Federal Register) and the Medically Needy income limit for the family size involved.

4. Income Disregard – For children covered under 1902(a)(10)(C)(ii)(I), disregard income in the amount of the difference between 150% of the poverty level (as revised annually in the Federal Register) and the Medically Needy income limit for the family size involved.

* Only includes persons in medical or remedial care institutions who would be eligible for AFDC, SSI, or an optional state supplement if they were not in a medical institution. These disregards do not apply to the eligibility group under section 1902(a)(10)(A)(ii)(V) of the Social Security Act.

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

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

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

[ ] Section 1902(f) State [X] Non-Section 1902(f) State

C. For children age 1 up to age 6, Categorically Needy

1. Income Disregard - For children who are at least one year of age but have not yet attained six years of age applying for coverage under Wisconsin's Medical Assistance Program (WMAP), an amount equal to the difference between 185% of the Federal Poverty Level (FPL) and 133% FPL for their family size is disregarded from family income in determining their eligibility under ss. 1902(a)(10)(A)(i)(VI) of the Social Security Act.

D. The following unearned income regulations apply to Working Disabled individuals as defined in Section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act:

1. Effective January 1, 2000, all of the applicant's unearned income and any deemed spousal unearned income shall be disregarded when determining whether or not the individual meets the financial eligibility requirements for SSI program under this section.

Note: Additional unearned income beyond $20 is not disregarded for purposes of determining whether or not the family's net income is below 250% of the federal poverty level.

Justification for Section 1902(r)(2)

Goals/Purpose

- Remove employment barriers, specifically health and long term care barriers, for working-age people with disabilities who work or are enrolled in a work program.
- Allow people with disabilities to earn and have additional savings from earnings including saving for a home, an automobile, a physically accessible van or for retirement.
- Eliminate eligibility cliffs based on income

All Unearned Income Exclusion (Supplement 8a, page 1)
Under the methodology outlined under Section 4733 alone, a working disabled individual would currently have to have unearned income less than $520. This requirement would make the majority of SSDI beneficiaries ineligible for Medicaid under this section; the average monthly SSDI benefit is $700. The SSDI population is a the prime target group for return-to-work strategies.

Resource Exclusion (Supplement 8b, page 1)
Based on the methodology outlined under Section 4733 alone, a single person participating in the Medicaid Purchase Plan would not be allowed to have more than $2000 in non-exempt assets. This requirement means that persons with disabilities are not able to save for a home, auto, physically accessible van, or participate in employers' retirement accounts.

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

LESS RESTRICTIVE METHODS OF TREATING INCOME
UNDER SECTION 1902(r)(2) OF THE ACT

The methodologies described in Paragraph E apply to all eligibility groups covered under sections 1902(a)(10)(A)(i)(IV), (VI) and (VII); 1902(a)(10)(A)(ii)(I), (II), (III), (IV), (IX), (XI), (XII), (XIII) and (XIV), 1902(a)(10)(C)(i)(III) and QMB, SMB and QI under 1905(p).

E.

1. All wages paid by the Census Bureau for temporary employment related to the decennial Census are excluded.

2. 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. 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).

* Less restrictive methods may not result in exceeding gross income limitations under section 1903 (f).

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

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

[ ] Section 1902(f) State [X] Non-Section 1902(f) State

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

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

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

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

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

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

H. Depreciation is deducted from self-employment income.

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

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

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

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

M. For all persons covered under section 1902(a)(10)(A)(ii)(XXI) and 1902(ii) of the Act, income changes that occur after the person has been determined eligible are disregarded until the next annual redetermination of eligibility. For children under the age of 19 covered under these sections of the Act, all income of their parents is disregarded.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r) OF THE ACT**

☐ Section 1902(f) State ☒ Non-Section 1902(f) State

a. For persons in remedial or care institutions* and SSI-related Medically Needy:

1. $2,000 limit on household goods and personal effects. Household goods and personal effects are only counted if of unusual value.

2. First moment of the month rule for counting of resources. For an applicant - A person can become eligible any time during the month when assets are at or below limit. For a recipient - A person can maintain eligibility during the month even if resources exceed limits if the excess is used to discharge legal debts within the month or is converted to exempt resources.

3. Irrevocable burial trusts. Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.

4. 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.

5. 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.

B. For AFDC-related Medically Needy:

All resources will be disregarded for persons eligible as AFDC-related medically needy under 1902(a)(10)(C)(ii).

* Includes persons in medical or remedial care institutions who are eligible under a special income level and persons in medical or remedial care institutions who would be eligible for AFDC, SSI, or an optional state supplement if they were not in a medical institution.

** These policies were approved effective October 1, 1988, as part of TN #88-0037

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

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r) OF THE ACT**

☐ Section 1902(f) State ☒ Non-Section 1902(f) State

C. The following resource regulations apply to Working Disabled individuals as defined in Section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act:

1. Up to $13,000 of available resources plus the value of an Independence Account shall be disregarded.

2. A resource disregard shall be given to a working disabled individual who holds monies in an Independence Account. To be eligible for this resource disregard the Independence Account is subject to the following provisions:

   - Only deposits made after an individual's first enrollment in Medicaid under this section will be allowed as an Independence Account.

   - Deposits into the account must not exceed 50% of earned income in any calendar year.

   - These accounts will be held separate from non-exempt resources, in an account for which prior approval has been obtained from the Department, and for which the owner authorizes regular monitoring and/or reporting including deposits, withdrawals, and other information deemed necessary by the Department for the proper administration of this provision. The separateness requirement may be waived in the case of an employer's pension and/or a retirement account.

   - Amounts deposited and all gains, dividends or interest earned in an employer's retirement fund and an individual's IRA account after that person's first enrollment in Medicaid under this section will automatically qualify as part of an *Independence Account* if registered with the Department.

3. A spouse's resources will not be deemed to the applicant when determining whether or not the individual meets the financial eligibility requirements for the SSI program under this section.

D. For AFDC-related Categorically Needy:

All resources will be disregarded for persons eligible as AFDC-related categorically needy under ss. 1902 (a) (10) (A) (i) (III) and 1902 (a) (10) (A) (ii) (I) and (III).

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

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

☐ Section 1902(f) State ☒ Non-Section 1902(f) State

E. For all children:

All resources will be disregarded for children eligible in the following eligibility groups:

1902(a)(10)(A)(ii)(I) and 1905(a)(i): Reasonable categories of children.

1902(a)(10)(A)(ii)(II) and 1905(a)(i): children who would meet the AFDC requirements if work-related child care costs were paid from earnings rather than by State agency.

1902(a)(10)(A)(ii)(VIII): non-IV-E State subsidized adoption children.

1902(a)(10)(C)(i)(III) and 1905(a)(i): medically needy children.

F. For all aged, blind and disabled eligibility groups covered under sections 1902(a)(10)(A)(ii)(I), (II), (III), (IV), (IX), (XI), (XII), (XIII) and (XIV), 1902(a)(10)(C)(i)(III) and QMB, SMB and QI under section 1905(p):

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.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

1902(r)(2) 1917(b)(1)(C) The following more liberal methodology applies to individuals who are eligible for medical assistance under one of the following eligibility groups:

Persons who meet the requirements under the following sections of the Social Security Act:

1902(a)(10)(A)(ii)(I), (IV), (V), (XI), (XII) and (XIII)
Medically Needy SSI-related persons under 1902(a)(10)(C)(i)(III), of the Act, and
Qualified Medicare Beneficiaries under section 1905(p) of the Act,

An individual who is a beneficiary under a long-term care insurance policy that meets the requirements of a "qualified State long-term care insurance partnership" policy (partnership policy) as set forth below, is given a resource disregard as described in this amendment. The amount of the disregard is equal to the amount of the insurance benefit payments made to or on behalf of the individual. The term "long-term care insurance policy" includes a certificate issued under a group insurance contract.

_x_ The State Medicaid Agency (Agency) stipulates that the following requirements will be satisfied in order for a long-term care policy to qualify for a disregard. Where appropriate, the Agency relies on attestations by the State Insurance Commissioner (Commissioner) or other State official charged with regulation and oversight of insurance policies sold in the state, regarding information within the expertise of the State's Insurance Department.

- The policy is a qualified long-term care insurance policy as defined in section 7702B(b) of the Internal Revenue Code of 1986.

- The policy meets the requirements of the long-term care insurance model regulation and long-term care insurance model Act promulgated by the National Association of Insurance Commissioners (as adopted as of October 2000) as those requirements are set forth in section 1917(b)(5)(A) of the Social Security Act.

- The policy was issued no earlier than the effective date of this State plan amendment.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

- The insured individual was a resident of Wisconsin when coverage first became effective under the policy. If the policy is later exchanged for a different long-term care policy, the individual was a resident of Wisconsin when coverage under the earliest policy became effective.

- The policy meets the inflation protection requirements set forth in section 1917(b)(1)(C)(iii)(IV) of the Social Security Act.

- The Commissioner requires the issuer of the policy to make regular reports to the Secretary that include notification regarding when benefits provided under the policy have been paid and the amount of such benefits paid, notification regarding when the policy otherwise terminates, and such other information as the Secretary determines may be appropriate to the administration of such partnerships.

- The State does not impose any requirement affecting the terms or benefits of a partnership policy that the state does not also impose on non-partnership policies.

- The State Insurance Department assures that any individual who sells a partnership policy receives training, and demonstrates evidence of an understanding of such policies and how they relate to other public and private coverage of long-term care.

- The Agency provides information and technical assistance to the Insurance Department regarding the training described above.

_X_ The State Medicaid Agency elects to be subject to the reciprocity standards under section 6021(b)of the Deficit Reduction Act of 2005 (DRA). The long-term care insurance partnership resource disregards will be provided to Medicaid applicants who originally purchased a qualified long-term care insurance policy in any state that participates in the reciprocity agreement.

___ The State Medicaid Agency elects to be exempt from the reciprocity standards under section 6021(b)of the Deficit Reduction Act of 2005 (DRA). The long-term care insurance partnership resource disregards will not be provided to Medicaid applicants who originally purchased a qualified long-term care insurance policy in another state.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF RESOURCES

1902(f) and 1917 of the Act

The agency provides for the denial of eligibility by reason of disposal of resources for less than fair market value.

A. Except as noted below, the criteria for determining the period of ineligibility are the same as criteria specified in section 1613(c) of the Social Security Act (Act).

1. Transfer of resources other than the home of an individual who is an inpatient in a medical institution.

a. /v/ The agency uses a procedure which provides for a total period of ineligibility greater than 24 months for individuals who have transferred resources for less than fair market value when the uncompensated value of disposed of resources exceeds $12,000. This period bears a reasonable relationship to the uncompensated value of the transfer. The computation of the period and the reasonable relationship of this period to the uncompensated value is described as follows:

The entire sum must be expended on the divesting person's maintenance needs and medical care

The amount expended is calculated by keeping a running account of the person's medical expenses and adding the medically needy monthly income limit to it.

HCFA-179 # 85-0150 Date Rec'd 5/3/85 Rev. 6/
Supercedes NEW Date Appr. 6/25/85
State Rep. In. LMR Date Eff. 10/1/84

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

b. /_/ The period of ineligibility is less than 24 months, as specified below:

If the amount to divested is $12 000 or less when the entire sum of the divestment has been expended for maintenance needs and medical care, or two years have elapsed since the date of the divestment whichever occurs first.

c. /_/ The agency has provisions for waiver of denial of eligibility in any instance where the State determines that a denial would work an undue hardship.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

2. Transfer of the home of an individual who is an inpatient in a medical institution.

/√/ A period of ineligibility applies to inpatients in an SNF, ICF or other medical institution as permitted under section 1917(c)(2)(B)(i).

a. Subject to the exceptions on page 2 of this supplement, an individual is ineligible for 24 months after the date on which he disposed of the home. However, if the uncompensated value of the home is less than the average amount payable under this plan for 24 months of care in an SNF, the period of ineligibility is a shorter time, bearing a reasonable relationship (based on the average amount payable under this plan as medical assistance for care in an SNF) to the uncompensated value of the home as follows:

The agency keeps a running account of the total cost of the institutional care.

The amount expended is calculated by using the average monthly MA expenditure statewide for care provided by a SNF.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

b. /X/ Subject to the exceptions on page 2 of this supplement, if the uncompensated value of the home is more than the average amount payable under this plan as medical assistance for 24 months of care in an SNF, the period of ineligibility is more than 24 months after the date on which he disposed of the home. The period of ineligibility bears a reasonable relationship (based upon the average amount payable under this plan as medical assistance for care in an SNF) to the uncompensated value of the home as follows:

If the amount of divestment to be removed exceeds $12,000 the entire sum must be expended on the divesting person' maintenance needs and medical care since the date of divestment.

The amount expended is calculated by usin the average monthly MA expenditure statew for care provided by a SNF.

HCFA-179 # 850150 Date Rec'd 5/3/85 - REVISED. 6/17/85
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State Rep. In. LMR Date Eff. 10/1/84

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

No individual is ineligible by reason of item A.2 if--

i. A satisfactory showing is made to the agency (in accordance with any regulations of the Secretary of Health and Human Services) that the individual can reasonably be expected to be discharged from the medical institution and to return to that home;

ii. Title to the home was transferred to the individual's spouse or child who is under age 21, or (for States eligible to participate in the State program under title XVI of the Social Security Act) is blind or permanently and totally disabled or (for States not eligible to participate in the State program under title XVI of the Social Security Act) is blind or disabled as defined in section 1614 of the Act;

iii. A satisfactory showing is made to the agency (in accordance with any regulations of the Secretary of Health and Human Services) that the individual intended to dispose of the home either at fair market value or for other valuable consideration; or

iv. The agency determines that denial of eligibility would work an undue hardship.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

3. 1902(f) States

/_/ Under the provisions of section 1902(f) of the Social Security Act, the following transfer of resource criteria more restrictive than those established under section 1917(c) of the Act, apply:

B. Other than those procedures specified elsewhere in the supplement, the procedures for implementing denial of eligibility by reason of disposal of resources for less than fair market value are as follows:

1. If the uncompensated value of the transfer is $12,000 or less:

The entire sum must be expended on the divesting person's maintenance meeds and medical care or two years must have elapsed since the date of divestment. whichever occurs first.

2. If the uncompensated value of the transfer is more than $12,000:

The entire sum must be expended on the divesting person's maintenance needs and medical care since the date of divestment.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

3. If the agency sets a period of ineligibility of less than 24 months and applies it to all transfers of resources (regardless of uncompensated value):

4. Other procedures:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

1917(c) The agency provides for the denial of certain Medicaid services by reason of disposal of assets for less than fair market value.

1. Institutionalized individuals may be denied certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

The agency withholds payment to institutionalized individuals for the following services:

Payments based on a level of care in a nursing facility;

Payments based on a nursing facility level of care in a medical institution;

Home and community-based services under a 1915 waiver.

2. Non-institutionalized individuals:

X The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

All MA recipients eligible to receive the services listed in the next paragraph.

The agency withholds payment to non-institutionalized individuals for the following services:

Home health services (section 1905(a)(7));

Home and community care for functionally disabled and elderly adults (section 1905(a)(22));

Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

___ The following other long-term care services for which medical assistance is otherwise under the agency plan:

State: WISCONSIN

TRANSFER OF ASSETS

3. Penalty Date--The beginning date of each penalty period imposed for an uncompensated transfer of assets is:

   X the first day of the month in which the asset was transferred;

   ___ the first day of the month following the month of transfer.

4. Penalty Period - Institutionalized Individuals--
   In determining the penalty for an institutionalized individual, the agency uses:

   X the average monthly cost to a private patient of nursing facility services in the agency;

   ___ the average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized.

5. Penalty Period - Non-institutionalized Individuals--
   The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual, including the use of the average monthly cost of nursing facility services;

   ___ imposes a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:

TRANSFER OF ASSETS

6. Penalty period for amounts of transfer less than cost of nursing facility care--

a. Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency:

X does not impose a penalty;

___ imposes a penalty for less than a full month, based on the proportion of the agency's private nursing facility rate that was transferred.

b. Where an individual makes a series of transfers, each less than the private nursing facility rate for a month, the agency:

X does not impose a penalty;

___ imposes a series of penalties, each for less than a full month.

7. Transfers made so that penalty periods would overlap-- The agency:

X totals the value of all assets transferred to produce a single penalty period;

___ calculates the individual penalty periods and imposes them sequentially.

8. Transfers made so that penalty periods would not overlap-- The agency:

X assigns each transfer its own penalty period;

___ uses the method outlined below:

State: WISCONSIN

TRANSFER OF ASSETS

9. Penalty periods - transfer by a spouse that results in a penalty period for the individual--

(a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

STEP #1 - Take the original divested amount used to calculate the institutionalized individual's penalty.

STEP #2 - Subtract the average nursing home private pay rate times the number of months of penalty that have been served through the end of the month prior to the current month.

STEP #3 - Divide the remaining divested amount by the current average nursing home private pay rate and,

STEP #4 - Divide the result in half.

FINAL RESULT - This is the penalty that must be applied to both spouses.

(b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

10. Treatment of income as an asset--
When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

___ The agency will impose partial month penalty periods.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

___ For transfers of individual income payments, the agency will impose partial month penalty periods.

___ For transfers of the right to an income stream, the agency will use the actuarial value of all payments transferred.

___ The agency uses an alternate method to calculate penalty periods, as described below:

State: WISCONSIN

TRANSFER OF ASSETS

11. Imposition of a penalty would work an undue hardship-- The agency does not apply the transfer of assets provisions in any case in which the agency determines that such an application would work an undue hardship. The agency will use the following procedures in making undue hardship determinations:

The State's undue hardship procedure will, at a minimum, include:

- Notice to recipients that an undue hardship exception exists.
- A timely process for determining whether an undue hardship waiver will be granted.
- A process under which an adverse determination can be appealed.

The following criteria will be used to determine whether the agency will not count assets transferred because the penalty would work an undue hardship:

"Undue hardship" means that a serious impairment to the covered individual's health status would occur if the assets transferred were counted.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

1917(c) **FOR TRANSFERS OF ASSETS FOR LESS THAN FAIR MARKET VALUE MADE ON OR AFTER FEBRUARY 8, 2006,** the agency provides for the denial of certain Medicaid services.

1. Institutionalized individuals are denied coverage of certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

   The agency does not provide medical assistance coverage for institutionalized individuals for the following services:

   Nursing facility services;

   Nursing facility level of care provided in a medical institution;

   Home and community-based services under a 1915(c) or (d) waiver.

2. Non-institutionalized individuals:

   _X_ The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

   All individuals who are aged, blind or disabled.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

The agency withholds payment to non-institutionalized individuals for the following services:

Home health services [section 1905(a)(7)];

Home and community care for functionally disabled elderly adults [section 1905(a)(22)];

Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

___ The following other long-term care services for which payment for medical assistance is otherwise made under the agency plan:

3. Penalty Date--The beginning date of each penalty period imposed for an uncompensated transfer of assets is the later of:

- the first day of a month during or after which assets have been transferred for less than fair market value;

_X_ The State uses the first day of the month in which the assets were transferred.

___ The State uses the first day of the month after the month in which the assets were transferred

or

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

- the date on which the individual is eligible for medical assistance under the State plan and is receiving institutional level care services described in paragraphs 1 and 2 that, were it not for the imposition of the penalty period, would be covered by Medicaid;

AND

which does not occur during any other period of ineligibility for services by reason of a transfer of assets penalty.

4. Penalty Period - Institutionalized Individuals-- In determining the penalty for an institutionalized individual, the agency uses:

_X_ the average monthly cost to a private patient of nursing facility services in the State at the time of application;

___ the average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized at the time of application.

5. Penalty Period - Non-institutionalized Individuals-- The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual, including the use of the average monthly cost of nursing facility services;

___ imposes a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

6. Penalty period for amounts of transfer less than cost of nursing facility care--

___ Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency imposes a penalty for less than a full month, based on the option selected in item 4.

_X_ The state adds together all transfers for less than fair market value made during the look-back period in more than one month and calculates a single period of ineligibility, that begins on the earliest date that would otherwise apply if the transfer had been made in a single lump sum.

7. Penalty periods - transfer by a spouse that results in a penalty period for the individual--

(a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

(b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

8. Treatment of a transfer of income—

When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

___ For transfers of individual income payments, the agency will impose partial month penalty periods using the methodology selected in 6. above.

_X_ For transfers of the right to an income stream, the agency will base the penalty period on the combined actuarial value of all payments transferred.

9. Imposition of a penalty would work an undue hardship--

The agency does not impose a penalty for transferring assets for less than fair market value in any case in which the agency determines that such imposition would work an undue hardship. The agency will use the following criteria in making undue hardship determinations:

Application of a transfer of assets penalty would deprive the individual:

(a) Of medical care such that the individual's health or life would be endangered; or

(b) Of food, clothing, shelter, or other necessities of life.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

10. Procedures for Undue Hardship Waivers

The agency has established a process under which hardship waivers may be requested that provides for:

(a) Notice to a recipient subject to a penalty that an undue hardship exception exists;

(b) A timely process for determining whether an undue hardship waiver will be granted; and

(c) A process, which is described in the notice, under which an adverse determination can be appealed.

These procedures shall permit the facility in which the institutionalized individual is residing to file an undue hardship waiver application on behalf of the individual with the consent of the individual or the individual's personal representative.

11. Bed Hold Waivers For Hardship Applicants

The agency provides that while an application for an undue hardship waiver is pending in the case of an individual who is a resident of a nursing facility:

_X_ Payments to the nursing facility to hold the bed for the individual will be made for a period not to exceed _30_ days (may not be greater than 30).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

The agency does not apply the trust provisions in any case in which the agency determines that such application would work an undue hardship.

The following criteria will be used to determine whether the agency will not count assets transferred because doing so would work an undue hardship:

"Undue hardship" means that a serious impairment to the covered individual's health status would occur if the trust provisons were applied.

The State's undue hardship procedure will, at a minimum, include:

- Notice to recipients that an undue hardship exception exists.
- A timely process for determining whether an undue hardship waiver will be granted.
- A process under which an adverse determination can be appealed.

Under the agency's undue hardship provisions, the agency exempts the funds in an irrevocable burial trust.

The maximum value of the exemption for an irrevocable burial trust is $ 2000.00 .

State/Territory: Wisconsin

Citation	Condition or Requirement
	COST EFFECTIVENESS METHODOLOGY FOR COBRA CONTINUATION BENEFICIARIES
1902(u) of the Act	Premium payments are made by the agency only if such payments are likely to be cost-effective. The agency specifies the guidelines used in determining cost effectiveness by selecting one of the following methods:
	___ The methodology as described in SMM section 3598.
	___ Another cost-effective methodology as described below.

NOT APPLICABLE

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The State covers low-income families and children under section 1931 of the Act.

The following optional groups are covered:

__X__ Pregnant women with no other eligible children.

__X__ AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.

_____ In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, without modification.

__X__ In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, with the following modifications:

_____ The agency applies lower income standards which are no lower than the AFDC standards in effect on May 1, 1988, as follows:

_____ The agency applies higher income standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:

_____ The agency applies higher resource standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

X The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

1. Wisconsin will disregard Temporary Assistance to Needy Families (TANF) income for purposes of determining Medicaid eligibility.

2. All wages paid by the Census Bureau for temporary employment related to the decennial census activities are excluded.

3. 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 deploy-ent 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. Wisconsin will disregard all resources for the purposes of determining Medicaid eligibility.

5. Wisconsin will use the same income availability and exemption policies as for AFDC. Then, Wisconsin will disregard the difference between the calculated amount and 100% of the Federal poverty level for the family size involved, as revised annually in the Federal Register.

6. Depreciation is deducted from self-employment income.

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

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

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

10. 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).

DHS Note: See MMDL forms S14, S25, S28, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

1. TANF did not exist prior to July 16, 1996.
2. Count the wages paid by the Census Bureau for temporary employment to decennial census activities.
3. Counting all military pay with no exemptions for combat zone pay.
4. Counting all resources that were not exempt under AFDC regulations at 45 CFR 233.20 (a) and comparing the total to a resource limit of $1,000.
5. Deduct from income the four disregards/deductions associated with the AFDC program:
   a. $30 & 1/3 earned income disregard
   b. $30 earned income disregard
   c. $90 work related expense deduction
   d. $175/$200 dependent care deduction
6. Do not allow depreciation to be deducted when determining self-employment income.
7. Exclude the earnings of a person under age 18 or who meets the definition of a dependent 18 year old when that individual is a full-time student or is a part-time student who works fewer than 30 hours per week.
8. Exclude the income, resources and needs of any person who is receiving Supplemental Security Income benefits.
9. Count income from the following sources: Charitable contributions, General Assistance payments from a local government agency, interest and dividends.
10. Count the total amount of tribal per capita payments from tribally managed gaming revenues in determining eligibility.

_____ The agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requirements.

_____ The agency continues to apply the following waivers of provisions of Part A of Title IV in effect as of July 16, 1996, or submitted prior to August 22, 1996, and approved by the Secretary on or before July 1, 1997.

DHS Note: See MMDL forms S14, S25, S28, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The State covers low-income families and children under section 1931 of the Act.

__√__ The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

All wages paid by the Census Bureau for temporary employment related to Census 2000 activities are excluded.

_____ The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

DHS Note: See MMDL forms S25 and S28 for current information.

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1925 OF THE ACT
TRANSITIONAL MEDICAL ASSISTANCE

The State covers low-income families and children for Transitional Medical Assistance (TMA) under section 1925 of the Social Security Act (the Act). This coverage is provided for families who no longer qualify under section 1931 of the Act due to increased earned income, or working hours, from the caretaker relative's employment, or due to the loss of a time-limited earned income disregard. **(42 CFR 435.112, 1902(a)(52), 1902(e)(1), and 1925 of the Act)**

The amount, duration, and scope of services for this coverage are specified in Section 3.5 of this State plan.

For Medicaid eligibility to be extended through TMA, families must have been Medicaid eligible under section 1931 (months of retroactive eligibility may be used to meet this requirement):

_X_ During at least 3 of the 6 months immediately preceding the month in which the family became ineligible under section 1931.

____ For fewer than 3 of the 6 previous months immediately preceding the month in which the family became ineligible under section 1931. Specify:

The State extends Medicaid eligibility under TMA for an initial period of:

____ 6 months. For TMA eligibility to continue into a second 6-month extension period, the family must meet the reporting, technical, and income eligibility requirements specified at section 1925(b) of the Act.

_X_ 12 months. Section 1925(b) does not apply for a second 6-month extension period.

The State collects and reports participation information to the Department of Health and Human Services as required by section 1925(g) of the Act, in accordance with the format, timing, and frequency specified by the Secretary and makes such information publicly available.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: WISCONSIN

SECTION 1924 PROVISIONS

A. Income and resource eligibility policies to determine eligibility for institutionalized individuals who have spouses living in the community are consistent with Section 1924.

B. In the determination of resource eligibility the State resource standard is $90,660.00.

C. An institutionalized spouse who (or whose spouse) has excess resources shall not be found ineligible under Title XIX of the Social Security Act, per section 1924(c)(3)(C), where the state determines that denial of eligibility would work an undue hardship.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

ASSET VERIFICATION SYSTEM

1940(a) of the Act

1. The agency will provide for the verification of assets for purposes of determining or redetermining Medicaid eligibility for aged, blind and disabled Medicaid applicants and recipients using an Asset Verification System (AVS) that meets the following minimum requirements.

   A. The request and response system must be electronic:

      (1) Verification inquiries must be sent electronically via the internet or similar means from the agency to the financial institution (FI).
      (2) The system cannot be based on mailing paper-based requests.
      (3) The system must have the capability to accept responses electronically.

   B. The system must be secure, based on a recognized industry standard of security (e.g., as defined by the U.S. Commerce Department's National Institute of Standards and Technology, or NIST).

   C. The system must establish and maintain a database of FIs that participate in the agency's AVS.

   D. Verification requests also must be sent to FIs other than those identified by applicants and recipients, based on some logic such as geographic proximity to the applicant's home address, or other reasonable factors whenever the agency determines that such requests are needed to determine or redetermine the individual's eligibility.

   E. The verification requests must include a request for information on both open and closed accounts, going back up to 5 years as determined by the State.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

ASSET VERIFICATION SYSTEM

2. System Development

___ A. The agency itself will develop an AVS.

In 3 below, provide any additional information the agency wants to include.

_X_ B. The agency will hire a contractor to develop an AVS.

In 3 below, provide any additional information the agency wants to include.

___ C. The agency will be joining a consortium to develop an AVS.

In 3 below, identify the States participating in the consortium. Also, provide any other information the agency wants to include pertaining to how the consortium will implement the AVS requirements.

___ D. The agency already has a system in place that meets the requirements for an acceptable AVS.

In 3 below, describe how the existing system meets the requirements in Section 1.

___ E. Other alternative not included in A. – D. above.

In 3 below, describe this alternative approach and how it will meet the requirements in Section 1.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

ASSET VERIFICATION SYSTEM

3. Provide the AVS implementation information requested for the implementation approach checked in Section 2, and any other information the agency may want to include.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

DISQUALIFICATION FOR LONG-TERM CARE ASSISTANCE FOR INDIVIDUALS WITH SUBSTANTIAL HOME EQUITY

1917(f) The State agency denies reimbursement for nursing facility services and other long-term care services covered under the State plan for an individual who does not have a spouse, child under 21 or adult disabled child residing in the individual's home, when the individual's equity interest in the home exceeds the following amount:

_____ $500,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest $1,000).

__X__ An amount that exceeds $500,000 but does not exceed $750,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest $1,000).

The amount chosen by the State is $750,000.

__X__ This higher standard applies statewide.

_____ This higher standard does not apply statewide. It only applies in the following areas of the State:

__X__ This higher standard applies to all eligibility groups.

_____ This higher standard only applies to the following eligibility groups:

The State has a process under which this limitation will be waived in cases of undue hardship.