

WISCONSIN DEPARTMENT OF HEALTH SERVICES
Division of Medicaid Services
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To: BadgerCare Plus Eligibility Handbook Users

From: Rebecca McAtee, Bureau Director
Bureau of Enrollment Policy and Systems

Re: **BadgerCare Plus Eligibility Handbook Release 19-02**

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EFFECTIVE DATE	The following policy additions or changes are effective 08/16/2019 unless otherwise noted. Underlined text denotes new text. Text with a strike through it denotes deleted text.	
POLICY UPDATES		
1.1.3	Limited Coverage Health Care Plans	Added Tuberculosis Related Medicaid as a limited coverage health care plan under BadgerCare Plus
1.1.4.1	Medicaid Programs	Deleted Tuberculosis Related Medicaid as a limited benefit subprogram under Medicaid
2.8	Modified Adjusted Gross Income Counting Rules	Updated tax filing income thresholds
3.6.4	DOC Pre-Release Applications from Offenders	Updated policy for processing an application for someone in a DOC facility
4.3.2	Verification	Updated verification procedures for Cuban and Haitian entrants
4.3.3.1	Qualifying Immigrants	Updated qualifying requirements for Amerasian immigrants
4.3.3.2	Lawfully Present Immigrant Children, Young Adults, and Pregnant Women	Updated policy for immigrants who are lawfully present but not in a qualifying immigrant category
4.3.8	Immigration Status Chart	Updated chart header
5.2.1	Introduction	Added cross reference
5.2.2	Exemptions from Cooperation	New section
5.2.3	Failure to Cooperate	Clarified policy on exemptions and good cause
5.3.5	Evidence	Updated evidence requirements for good cause claims
5.4.4	Fraud	Deleted invalid reference to Income Maintenance Manual

The information concerning the BadgerCare Plus program provided in this handbook release is published in accordance with: Titles XI, XIX and XXI of the Social Security Act; Parts 430 through 481 of Title 42 of the Code of Federal Regulations; Chapter 49 of the Wisconsin Statutes; and Chapters HA 3, DHS 2 and 101 through 109 of the Wisconsin Administrative Code.

9.12.3	Reasonable Compatibility Test	Clarified change reporting requirements for eligibility determinations based on reasonably compatible income
16.2	Income Types not Counted	Deleted gaming revenue
16.3.3	Tax Deductions	Clarified policy on net loss carryover from previous period
16.4.3.3	Self-Employed Income Sources	Policy clarification regarding rental income
16.4.3.4.1 and 16.4.3.4.2	IRS Tax Forms Worksheets	Combined sections and updated policy
16.4.3.4.4.1	Reporting Anticipated Earnings	Updated policy for reporting anticipated earnings
16.4.3.4.4	Backdated Months	New section
16.4.4	Verification	Updated policy for Program Add requests on cases with self-employment income
16.5	Other Income	Added gaming revenue
18.4	Income Changes During the Extension	Updated policy to keep the member in an extension if income verification is not provided
19.7	Refunds	Clarified policy for when a premium refund is allowed
19.9	Late Payments	Clarified policy for late payments and RRP
19.10.1	Decreased Premium Amount	Clarified policy on when a premium refund is allowed
19.11.2	Reinstatement	Clarified policy about eligibility and owed premium payment
19.11.4	De-requesting BadgerCare Plus	New section
25.8.1	Backdated Eligibility	Added cross reference to section 16.4.3.4.5 regarding information on counting self-employment income for backdated months
26.1.1	Renewals Introduction	Clarified renewal process
28.4.3	Liability	Clarified policy about a household member's liability for BadgerCare Plus overpayment
40.1	Family Planning Only Services Program	Updated cross references for information moving from MEH to BC+
43	Tuberculosis-related Medicaid	New chapter

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1.1 INTRODUCTION TO BADGERCARE PLUS

1.1.3 Limited Coverage Health Care Plans

BadgerCare Plus also has several limited coverage health care plans. These include:

- **Family Planning Only Services.** People of childbearing or reproductive age may be eligible for limited benefits under the Family Planning Only Services Program.
- **BadgerCare Plus Prenatal Program.** Documented and undocumented immigrants who are pregnant and ineligible for BadgerCare Plus solely due to their immigration status may be eligible for the BadgerCare Plus Prenatal Program.
- **BadgerCare Plus Emergency Services.** Documented and undocumented immigrants who are children, pregnant women, parents, or caretakers and who are ineligible for BadgerCare Plus solely due to their immigration status may be eligible for coverage for BadgerCare Plus Emergency Services.
- **Tuberculosis (TB)-Related Medicaid.** People infected with TB who are not eligible for any other category of full-benefit BadgerCare Plus or Medicaid may be eligible for limited benefits for the treatment of TB.

1.1.4 Wisconsin Medicaid

1.1.4.1 Medicaid Programs

The following are different subprograms of Medicaid:

- Home and Community Based Waivers Long-Term Care and *IRIS*
- Institutional Long-Term Care Medicaid
- Katie Beckett
- Managed long-term care programs (Family Care, Family Care Partnership, *PACE*)
- *MAPP*
- *SSI* Medicaid
- SSI-related Medicaid
- Wisconsin Well Woman Medicaid
- Emergency Services for Non-Qualifying Immigrants (limited benefit)
- Medicare Savings Programs (limited benefit): *QMB*, *SLMB*, *SLMB+*, *QDWI*
- SeniorCare (limited benefit)
- ~~Tuberculosis-related Medicaid (limited benefit)~~

2.8 MODIFIED ADJUSTED GROSS INCOME COUNTING RULES

Within each *MAGI* assistance group, all counted and eligible individuals' countable income is budgeted with one exception: if a group member is a child or tax dependent of a counted or eligible member within the same assistance group, his or her income is only counted if he or she is "expected to be required" to file a tax return for the current year. If the tax dependent or child chooses to file a tax return when he or she is not required to, his or her income will not be counted. Tax dependents' and children's income is only counted when they are "expected to be required" to file a tax return.

Note: If a child or tax dependent is the only person in the MAGI group, he or she would not have a parent or tax filer eligible or counted in that group. As a result, his or her income will always be counted, regardless of whether or not she or he is expected to be required to file taxes. *NLRR* children are an example of children who are the only counted or eligible people in a MAGI group.

Tax dependents are only required to file a tax return if they have more income than the filing thresholds set by the *IRS* each year. If the child or tax dependent of another member in the same assistance group expects to have less annual taxable income than the amounts below, his or her income is not included in the eligible determination for the assistance group.

The following amounts are effective ~~January~~ October 1, ~~2019~~ 2018:

- \$1, ~~100~~ 050 per year in taxable unearned income*
- \$12, ~~200~~ 000 per year in taxable earned income

*For expected unearned income, do not count Child Support, Social Security, *SSI*, Workers' Compensation, Veteran's Benefits, money from another person, or educational aid.

3.6 INMATES

3.6.4 DOC Pre-Release Applications from Offenders

Upon release from prison, many offenders are eligible for BadgerCare Plus as parents/caretakers or as childless adults. In order to prevent a gap in medical or pharmacy coverage upon the offender's release, ~~DHS~~the Department of Health Services (DHS) requires consortia and tribal IM agencies to accept telephonic applications for health care from offenders nearing their date of release.

Inmates who have a definitive release date may apply for health care benefits by calling their ~~income maintenance (IM)~~ agency on or after the 20th day of the month before the month of release. The application must be processed at the time of the initial call. The applicant must be allowed to sign the application telephonically.

Eligibility begins the first of the month in which the applicant is released, but providers are prohibited from billing BadgerCare Plus for any services while the applicant is still incarcerated. The first day that a member can receive BadgerCare Plus-covered services is the day of release.

Most verification can be obtained through current data exchanges, but if additional verification is needed, the applicant must be given 30 days to provide the verification.

When processing applications from applicants whose only source of income is through employment inside a prison in either DOC or Badger State Industries (BSI) jobs, the worker does not need to verify this income. DHS has already received verification that the maximum possible earnings in these positions are below program limits.

Applicants with sources of income in addition to DOC or BSI income are required to verify the income from employment within the prison, in addition to verifying the other income sources.

When processing an application ~~with DOC assistance, the DOC staff may verbally verify the release date of the applicant. If the release date is not verbally confirmed by a DOC staff member as part of an assisted application,~~ the worker will verify the reported discharge date using the appropriate resource before requesting verification from the applicant or a DOC staff member. Depending ~~by searching for the applicant~~ on the facility type, the worker may need to use different resources or websites. ~~WI DOC Offender Locator site.~~

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See Process Help, Section 9.8 Processing Telephonic HC Applications ~~from~~From Offenders for more information on processing these applications and how to verify release dates. -

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The inmate's release date may not be up to date. Consider the release date verified if the date reported is within seven calendar days of the applicant's reported release date.

Example 3: Clifford is an inmate near release calling to complete his BadgerCare Plus application on June 3. He states he is being released on Tuesday, June 11. The worker checks the WI DOC Offender Locator site to verify Clifford's release date. His Mandatory Release/Extended Supervision Date is listed as Saturday, June 15. Since his reported date release date is within seven days of what is listed on the WI DOC Offender Locator site, his release date is verified.

A prison or jail staff member may verbally verify the release date of the applicant but do not require a prison or jail staff member to verbally verify the release date or prevent the applicant from completing the telephonic application.

4.3 IMMIGRANTS

4.3.2 Verification

Primary verification of immigration status is done through the Department of Homeland Security (~~DHS~~) by use of the Federal Data Services Hub (FDSH) or SAVE, which is an automated telephone and computer database system. A worker processing an application can simply enter the immigrant's alien number and immigration document type into CWW. That information, along with demographic information of the individual, is sent in real time to the FDSH. The FDSH will immediately return verification of the immigrant's status, date of entry, and the date the status was granted if it's available from the Department of Homeland Security, along with other information. If the FDSH cannot provide verification of the immigration status, workers are directed to seek secondary verification through SAVE or take other action.

The verification query via the FDSH or SAVE most likely results in returning the latest date of any qualified alien status update for an individual, not his or her original date of arrival. The only way to obtain an accurate date of arrival for those who do not meet an exemption category and who report a date of arrival prior to August 22, 1996, is through the secondary verification procedure. The FDSH or SAVE will describe the immigrant's current status which may have changed from the original status. In some situations described later workers will need to maintain the original status in CARES.

It may be necessary to complete a secondary or third level verification procedure with the U.S. Citizenship and Immigration Services (USCIS), including confirming the date of arrival, in the following situations:

- The applicant does not fall into any of the categories of non-citizens who are exempt from the five-year ban (e.g., refugees, asylees, those with military service).
- An IM worker has made an initial or primary verification inquiry using the SAVE database. The information from the inquiry conflicts with information on the applicant's immigration documents or what he or she is telling the IM worker.
- A non-citizen applicant tells an IM worker that he or she came to the U.S. prior to August 22, 1996. If he or she arrived in a legal or documented status, the IM worker needs to verify the date of arrival to ensure that the correct alien eligibility rules are being applied.
- The FDSH or SAVE returns the message "Institute Secondary Verification."
- The IM worker finds any questionable information in the initial verification process.
- Cuban/Haitian entrants when SAVE or the Hub indicates the need.

An Immigration Status Verifier at Department of Homeland Security~~DHS~~ will research the alien's records and complete the response portion of the verification request.

[See Process Help, Section 82 SAVE for more information.](#) ~~Consult the SAVE manual for more information.~~

Additional verifications from sources other than the Department of Homeland Security are sometimes required as well. For example, persons who are in an immigration status subject to the 5-year bar and who indicate that they, their spouse or parent is in the military service or is a veteran, that military status must also be verified.

The following documents are considered valid verification of military service:

- A signed statement or affidavit form from an applicant attesting to being a veteran, surviving spouse, or dependent child.
- Military records

Immigration statuses for most immigrants are permanent and most often change when the immigrant become a U.S. citizen. For this reason, immigration status for most members should only be verified once, unless the status for an individual is questionable or ~~it's~~ a status subject to reverification (see Section 4.3.2.1 Reverification of Immigration Status). Even if an immigrant loses health care eligibility for a period of time, his or her immigration status does not need to be re-verified unless the status is subject to reverification.

See Process Help, Section 44.3.9 Immigrant/Refugee Information Page for additional information on using the FDSH or the procedures in the SAVE Manual.

4.3.3 Immigrants Eligible for BadgerCare Plus

Immigrants may be eligible for BadgerCare Plus if they meet all other eligibility requirements and are either Qualifying Immigrants or are Lawfully Present as described below.

4.3.3.1 Qualifying Immigrants

Immigrants of any age meeting the criteria listed below are considered Qualifying Immigrants.

1. A refugee admitted under *INA* Section 207. A refugee is a person who flees his or her country due to persecution or a well-founded fear of persecution because of race, religion, nationality, political opinion, or membership in a social group. An immigrant admitted under this refugee status may be eligible for BadgerCare Plus even if his or her *immigration status* later changes.
2. An asylee admitted under *INA* Section 208. Similar to a refugee, an asylee is a person who seeks asylum and is already present in the U.S. when he or she

requests permission to stay. An immigrant admitted under this asylee status may be eligible for BadgerCare Plus even if his or her immigration status later changes.

3. An immigrant whose deportation is withheld under INA Section 243(h) and such status was granted prior to April 1, 1997, or an immigrant whose removal is withheld under INA Section 241(b)(3) on or after April 1, 1997. An immigrant admitted under this status may be eligible for BadgerCare Plus even if his or her immigration status later changes.

4. A Cuban/Haitian entrant. An immigrant admitted under this Cuban/Haitian entrant status may be eligible for BadgerCare Plus even if his or her immigration status later changes.

Haitians paroled into the U.S. through the Haitian Family Reunification Parole Program are considered Cuban/Haitian entrants.

5. An American Indian born in Canada who is at least 50 percent American Indian by blood or an American Indian born outside the U.S. who is a member of a federally recognized Indian tribe.

6. Victims of a severe form of trafficking in accordance with 107(b)(1) of the Trafficking Victims Protection Act of 2000 (P.L. 106-386). See Section 4.3.11 Victims of Trafficking.

7. An immigrant lawfully admitted for permanent residence under INA 8 USC 1101 et seq.*

8. An immigrant paroled into the U.S. under INA Section 212(d)(5).*

9. An immigrant granted conditional entry under immigration law in effect before April 1, 1980 [INA Section 203(a)(7)].*

10. An immigrant who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*

11. An immigrant whose child has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*

12. An immigrant child who resides with a parent who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*

*If these immigrants lawfully entered the U.S. on or after August 22, 1996, they must also meet one of the following:

- Be lawfully residing in Wisconsin and an honorably discharged veteran of the U.S. Armed Forces (see Section 4.3.10 Military Service)

- Be lawfully residing in Wisconsin and on active duty (other than active duty for training) in the U.S. Armed Forces (see Section 4.3.10 Military Service)
- Be lawfully residing in Wisconsin and the spouse, unmarried dependent child, or surviving spouse of either an honorably discharged veteran or a person on active duty in the U.S. Armed Forces
- Certain Amerasian immigrants defined under §584 of the Foreign Operations, Export Financing and Related Programs Appropriations Act of 1988, with Class of Admission codes: AM1, AM2, AM3, AM6, AM7, or AM8
- ~~Be an Amerasian~~
- Have resided in the U.S. for at least five years since his or her date of entry (see Section 4.3.6 Continuous Presence)

4.3.3.2 Lawfully Present Immigrant Children, Young Adults, and Pregnant Women

Children younger than 19 years old, adults younger than 21 years old who are residing in an IMD, and pregnant women do not have to wait five years to be eligible for full-benefit Medicaid and BadgerCare Plus if they meet one of the following:

- Are lawfully admitted for permanent residence (see Registration Status ~~CARES TCTZ~~ Code #1 in the Immigration Status Chart in Section 4.3.8)
- Are lawfully present under Section 203(a)(7) (see Code #3 in the Immigration Status Chart in Section 4.3.8)
- Are lawfully present under Section 212(d)(5) (see Code #6 in the Immigration Status Chart in Section 4.3.8)
- Have suffered from domestic abuse and are considered to be a battered immigrant (See Code #16 in the Immigration Status Chart in Section 4.3.8)

Women who have an immigration status requiring a five-year waiting period before being eligible for BadgerCare Plus will have the waiting period lifted when their pregnancy is reported to the agency. The lift on the five-year waiting period continues for an additional 60 days after the last day of pregnancy and through the end of the month in which the 60th day occurs.

Example 2: Rose has an immigration status that requires a five-year waiting period before being eligible for BadgerCare Plus. Her date of entry to the U.S. was two years ago, so she is not eligible for BadgerCare Plus. In March, Rose reports that she is pregnant. She meets the other financial and nonfinancial requirements, so she is determined eligible for BadgerCare Plus as a pregnant woman. Rose's last day of pregnancy is September 5. The 60th day after her last day of pregnancy is November 4, so Rose's BadgerCare Plus coverage will end November 30. Starting in December, Rose is again subject to the five-year waiting period from her date of entry to the U.S.

Children younger than 19 years old, young adults younger than 21 years old who are residing in an IMD, and pregnant women may qualify for BadgerCare Plus if they are lawfully present in the U.S. under many of the immigrant and nonimmigrant statuses. For those who are not in a qualifying Immigrant category, but are lawfully present, use

the Registration Status Code of 20 (see Process Help, Section 82.6 VIS SAVE Verification Responses Table for a list of SAVE Responses and the appropriate Registration Status Code in CWW to apply). any of the nonimmigrant statuses listed in the table below and are otherwise eligible.

Eligible Nonimmigrant Statuses for Children, Young Adults in an IMD, and Pregnant Women	
Description	Class of Admission Code or Section of Law Citation
Aliens currently in temporary resident status pursuant to section 210 or 245A of the Act.	S16, S26, W16, W25, W26, W36 or 8 CFR 103.12(a)(4)(i)
Aliens currently under Temporary Protected Status (TPS) pursuant to section 244 of the Act. Child accompanying or following to join a K-3 alien.	TPS, 8 CFR 103.12(a)(4)(ii)
Family Unity beneficiaries pursuant to section 301 of Pub. L. 101-649. (These are the spouses and unmarried children of individuals granted temporary or permanent residence under Section 210 or 245A above.)	FUG, 8 CFR 103.12(a)(4)(iv)
Aliens currently under Deferred Enforced Departure (DED) pursuant to a decision made by the President.	8 CFR 103.12(a)(4)(v)
Aliens currently in deferred action status pursuant to Service Operations Instructions at OI 242.1(a)(22).	8 CFR 103.12(a)(4)(vi)
Aliens who are the spouse or child of a United States citizen whose visa petition has been approved and who have a pending application for adjustment of status	8 CFR 103.12(a)(4)(vii)
Legal non-immigrants from the Compact of Free Association states (Republic of the Marshall Islands, the Federated States of Micronesia and the Republic of Palau) who are considered permanent non-immigrants.	NA
Spouse/dependent of a non-immigrant foreign government official, dependent of foreign government official	A-2
Attendant, servant, or personal employee	A-3

of A-1 or A-2 and members of immediate family.	
Domestic servant of certain non-immigrants or US Citizens	B-1, B-2
Treaty Trader/Investor, spouse and children	E-1, E-2, E-3; 8 USC 1101(a)(15)(E)
Students; their spouse and children	F-1, F-2, F-3; 8 USC 1101(a)(15)(F)
Spouse/dependent of foreign government official or representative of international organization and their dependents, servants or employees	G-1, G-2, G-3, G-4, G-5; 8 USC 1101(a)(15)(G)
Spouse of a temporary worker (other than registered nurse) with "specialty occupation" admitted on the basis of professional education, skills, and/or equivalent experience	H1-B, H4
Spouse or children of an exchange visitor	J-2
An alien who is the fiancée or fiancé of a U.S. citizen entering solely to conclude a valid marriage contract.	K-1
Child of K-1	K-2
Spouse of a U.S. citizen who is a beneficiary of a petition for status as the immediate relatives of a U.S. citizen (I-130).	K-3
Child accompanying or following to join a K-3 alien.	K-4
Individuals in the U.S. who have been transferred from a subsidiary, affiliate, or branch office overseas to the U.S. to work in an executive, managerial, or specialized knowledge capacity; their spouse and children	L-1, L-2, L-3
Student pursuing a full course of study at an established vocational or other recognized nonacademic institution (other than in a language training program); their spouse and children	M-1, M-2
Parent of an alien classified SK3 or SN3	N-8
Child of N-8 or of an alien classified SK1, SK2, SK4, SN1, SN2, SN4.	N-9
Temporary worker to perform work in religious occupations.	R1
Spouse and children of R1	R2

An alien who is in possession of critical reliable information concerning a criminal organization or enterprise, is willing to supply or has supplied such information to Federal or State law enforcement authorities or a Federal or State court; and whose presence in the United States the Attorney General determines is essential to the success of an authorized criminal investigation or the successful prosecution of an individual involved in the criminal organization or enterprise	8 U.S.C. 1101(a)(15)(S)(i)
An alien who the Secretary of State and the Attorney General jointly determine is in possession of critical reliable information concerning a terrorist organization, enterprise, or operation; is willing to supply or has supplied such information to Federal law enforcement authorities or a Federal court; will be or has been placed in danger as a result of providing such information; and is eligible to receive a reward from the State Department.	8 U.S.C. 1101(a)(15)(S)(ii)
An alien who is the spouse, married and unmarried sons and daughters, and parents of an alien in possession of critical reliable information concerning either criminal activities or terrorist operations.	8 U.S.C. 1101(a)(15)(S)
Individuals who have suffered substantial physical or mental abuse as victim of criminal activity.	U-1
An alien who is the spouse, child, unmarried sibling or parent of the victim of the criminal activity above.	U-2, U-3, U-4, U-5
An alien who are the spouses or children of an alien lawfully admitted for permanent residence and who have been waiting since at least December 2000 for their visa application to be approved.	V-1, V-2, V-3

Immigrants who are ~~do not a qualifying immigrant nor lawfully present~~ ~~appear in the lists above~~ (e.g., someone with a status of *DACA*) and who apply for BadgerCare Plus and meet all eligibility requirements except for citizenship and immigration status are entitled to receive BadgerCare Plus Emergency Services only (see Chapter 39 Emergency Services).

Pregnant immigrants who ~~are~~ not a qualifying immigrant nor lawfully present ~~appear in the list above~~ and who apply for BadgerCare Plus and meet the eligibility requirements, except for citizenship and immigration status, are entitled to receive BadgerCare Plus Prenatal Program benefits (see Chapter 41 BadgerCare Plus Prenatal Program) and/or BadgerCare Plus Emergency Services (see Chapter 39 Emergency Services).

Immigration status is an individual eligibility requirement. An individual's immigration status does not affect the eligibility of the BadgerCare Plus Group. The citizen spouse or child of an ineligible immigrant may still be eligible even though the immigrant is not.

4.3.8 Immigration Status Chart

See Process Help, Section 82.6 VIS SAVE Verification Responses Table for a list of SAVE Responses and the appropriate Registration Status Code in CWW to apply.

CARES Registration Status TCTZ Code	Immigration Status	Arrived Before August 22, 1996	Veteran* Arrived before August 22, 1996	Arrived on or after August 22, 1996	Veteran* Arrived on or after August 22, 1996	Children under age 19 and pregnant women; Arrived on or after August 22, 1996
01	Lawfully admitted for permanent residence	Eligible	Eligible	Ineligible for 5 years	Eligible	Effective October 1, 2009 Eligible
02	Permanent resident under color of law (PRUCOL)	Ineligible	Ineligible	Ineligible	Ineligible	Ineligible
03	Lawfully present under Section 203(a)(7)	Eligible	Eligible	Ineligible for 5 years	Eligible	Effective October 1, 2009 Eligible
04	Lawfully present under Section 207(c)	Eligible	Eligible	Eligible	Eligible	Eligible
05	Lawfully present under Section 208	Eligible	Eligible	Eligible	Eligible	Eligible

06	Lawfully present under Section 212(d)(5)	Eligible	Eligible	Ineligible for 5 years	Eligible	Effective October 1, 2009 Eligible
07	IRCA (No longer valid)	N/A	N/A	N/A	N/A	N/A
08	Lawfully admitted - temporary	Ineligible	Ineligible	Ineligible	Ineligible	Ineligible
09	Undocumented Immigrant	Ineligible	Ineligible	Ineligible	Ineligible	Ineligible
10	Illegal Immigrant	Ineligible	Ineligible	Ineligible	Ineligible	Ineligible
11	Cuban/Haitian Entrant	Eligible	Eligible	Eligible	Eligible	Eligible
12	Considered a Permanent Resident by USCIS	Ineligible	Ineligible	Ineligible	Ineligible	Eligible
13	Special agricultural worker under Section 210(A)	Ineligible	Ineligible	Ineligible	Ineligible	Eligible
14	Additional special agricultural worker under Section 210(A)	Ineligible	Ineligible	Ineligible	Ineligible	Eligible
15	Withheld deportation - Section 243(h)	Eligible	Eligible	Eligible	Eligible	Eligible
16	Battered Immigrant	Eligible	Eligible	Ineligible for 5 years	Eligible	Effective October 1, 2009 Eligible
17	Amerasian	Eligible	Eligible	Eligible	Eligible	Eligible
18	Foreign Born Native American	Eligible	Eligible	Eligible	Eligible	Eligible
19	Victims of Trafficking**	Eligible	Eligible	Eligible	Eligible	Eligible
20	Lawfully Residing	Ineligible	Ineligible	Ineligible	Ineligible	Eligible

21	Victims of Trafficking Subject to 5 Year Bar	Eligible	Eligible	Ineligible for 5 years	Eligible	Eligible
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* "Veteran" includes certain veterans and active duty servicemen and women, their spouses, dependent children, or certain surviving spouses.

**Some victims of trafficking may need to provide certain verification to be exempt from the five-year bar. See Section 4.3.11 Victims of Trafficking for more information.

5.2 MEDICAL SUPPORT/CHILD SUPPORT AGENCY COOPERATION

5.2.1 Introduction

Unless the person is exempt or has *good cause* for refusal to cooperate (see Section [5.2.2 Exemptions from Cooperation](#) and Section [5.3 Claiming Good Cause](#)), each applicant or member that is referred, must, as a condition of eligibility, cooperate in both of the following:

- Establishing the paternity of any child born out of wedlock for whom BadgerCare Plus is requested or received
- Obtaining medical support for the applicant and for any child for whom BadgerCare Plus is requested or received

Cooperation includes any relevant and necessary action to achieve the above. As a part of cooperation, the applicant may be required to:

- Provide verbal or written information known to, possessed by, or reasonably obtainable by the applicant
- Appear as a witness at judicial or other hearings or proceedings
- Provide information, or attest to the lack of information, under penalty of perjury
- Pay to the *CSA* any court-ordered medical support payments received directly from the absent parent after support has been assigned
- Attend office appointments as well as hearings and scheduled genetic tests

Note: [5.2.2 Exemptions from Cooperation](#)

The ~~caretaker relative applicant or member~~ is exempt from the requirement only required to cooperate and exempt from any sanction for non-cooperation if:

1. The ~~the~~ child under his or her care is eligible for benefits funded under any source other than Title 19, ~~or is eligible for the Medicaid expansion category of CHIP. If the child's BadgerCare Plus benefit is funded through any other source such as Title 21 (Separate CHIP) or General Purpose Revenue (i.e., state funds), the caretaker relative is not required to cooperate and cannot be sanctioned for non-cooperation.~~ Check the BadgerCare Plus categories table in Section 51.1 BadgerCare Plus Categories to determine funding source. The CSA will monitor the ~~child's~~ child's BadgerCare Plus funding source.
2. The child under his or her care is on SSI.
3. The caretaker relative is:
 - a. Eligible for the BadgerCare Plus Extension,
 - b. A pregnant woman, until the end of the month in which the 60th day after the termination of pregnancy occurs.

- c. Under 18 years old.
4. Both absent parents are now living in the home with the child.
 5. Absent parent is deceased.
 6. Paternity has been established and the father is living in the home with the mother and child.
 7. The only parent absent from the home is absent because of military service.

5.2.3~~2~~ Failure to Cooperate

The CSA determines if there is non-cooperation for people required to cooperate. The *IM* agency determines if good cause exists (see Section 5.3 Claiming Good Cause) and whether the applicant or member is exempt (See Section 5.2.2 Exemptions from Cooperation). If there is a dispute, the CSA makes the final determination of cooperation while the IM agency makes the final determination of exemptions or good cause. The member remains ineligible until he or she cooperates or establishes good cause or his or her cooperation is no longer required.

~~The following are not sanctioned for non-cooperation:~~

- ~~• Pregnant women~~
- ~~• Minors~~
- ~~• Parents or caretaker relatives while the family is in a BadgerCare Plus extension~~

~~- For a pregnant woman, failure to cooperate cannot be determined prior to the end of the month in which the 60th day after the termination of pregnancy occurs.~~

~~-~~
Note: If the local CSA determines that a parent is not cooperating because court-ordered birth costs are not paid, the parent or caretaker mayis not be sanctioned.

Example: Mary, a disabled parent, is applying for BadgerCare Plus for her and her son, Michael. She refuses to cooperate in obtaining medical support for Michael. Mary meets all other non-financial and financial criteria for BadgerCare Plus and EBD Medicaid.

Mary is not eligible for EBD Medicaid or BadgerCare Plus because she will not cooperate in obtaining medical support for Michael. Even though Mary has not cooperated in obtaining medical support for Michael, he remains eligible for BadgerCare Plus.

5.3 CLAIMING GOOD CAUSE

5.3.5 Evidence

An initial good cause claim may be based only on evidence in existence at the time of the claim. There is no limit to the age of the evidence. Once a final determination is made, including any fair hearing decision, any subsequent claim must be based on new evidence.

The following may be used as evidence:

- Birth certificates or medical or law enforcement records that indicate that the child may have been conceived as a result of incest or sexual assault.
- Court documents or other records that indicate that a petition for the adoption of the child has been filed with a court.
- Court, medical, criminal, child protective services, social services, psychological school, or law enforcement records that indicate the alleged father or absent parent might inflict physical or emotional harm on the member or the child.
- Medical records that give the emotional health history and present emotional health status of the member or the child.
- A written statement from a mental health professional indicating a diagnosis of or prognosis on the emotional health of the member or the child.
- A written statement from a public or private social agency that the agency is assisting the parent to decide whether or not to terminate parental rights.
- A sworn statement from someone other than the member with knowledge of the circumstance on which the claim is based.
- [Authorization card or other proof from Safe at Home confirming the person's status as a program participant in the Safe at Home program. Safe at Home can be contacted by calling 608-266-6613 or emailing \[safeathome@doj.state.wi.us\]\(mailto:safeathome@doj.state.wi.us\).](#)
- Any other supporting or corroborative evidence.

When a claim is based on emotional harm to the child or the member, the IM agency must consider all of the following:

- Person's present emotional state
- Person's emotional health history
- Intensity and probable duration of the emotional impairment
- Degree of cooperation required
- Extent of the child's involvement in the paternity or the support enforcement activity to be undertaken.

If the member submits only one piece of evidence or inclusive evidence, you may refer him or her to a mental health professional for a report relating to the claim.

When a claim is based on his or her undocumented statement that the child was conceived as a result of incest or sexual assault, it should be reviewed as one based on emotional harm.

The IM agency must conduct an investigation when a claim is based on anticipated physical harm and no evidence is submitted.

The member has 20 days, from the date the claim is signed, to submit evidence. The IM agency, with supervisory approval, may determine that more time is needed.

There must be at least one document of evidence, in addition to any sworn statements from the member.

The IM agency should encourage the provision of as many types of evidence as possible and offer any assistance necessary in obtaining necessary evidence.

When insufficient evidence has been submitted:

1. The member must be notified, and the specific evidence needed must be requested.
2. The IM agency must advise that person on how to obtain the evidence, and
3. The IM agency must make a reasonable effort to obtain specific documents that are not reasonably obtainable without assistance.

If the parent or caretaker continues to refuse to cooperate or the evidence is still insufficient, a 10-day notice must be sent informing the parent or caretaker that, if no further action is taken within 10 days from the notification date, good cause will not be found and that he or she may first:

- Withdraw the claim and cooperate, or
- Exclude allowable individuals, or
- Request a hearing, or
- Withdraw the application or request that the case be closed.

If no option above has been taken when the 10 days have expired, the IM worker will deny BadgerCare Plus to the applicant or disenroll the member from BadgerCare Plus. The sanctions remain in effect until there is cooperation or until it is no longer required.

5.4 COOPERATION BETWEEN IM & CSA

5.4.4 Fraud

When the CSA has knowledge of possible fraud, they will refer the case back to the IM agency. For example, if in the process of collecting support, the CSA establishes that a parent is in fact not absent, the CSA will give that information to the IM agency for appropriate action. ~~(IMM, Ch. III, Public Assistance Fraud Program).~~

9.12 REASONABLE COMPATIBILITY FOR HEALTH CARE

9.12.3 Reasonable Compatibility Test

The reasonable compatibility test is based on whether using member-reported information about earnings and information about earnings from data exchanges results in the same eligibility outcome when all other countable income is taken into account.

Reasonable compatibility will first be tested based on the household's total countable income as reported to the agency or verified through other sources. This test will determine whether the member is required to provide verification of earnings.

If the member-reported earnings amount is not reasonably compatible (based on the household's total reported income), verification of earnings will be required at the same time that verification is required for unearned income, self-employment, and/or tax deductions.

A second verification request will be required if the initial test leads to a determination of reasonable compatibility but the earnings are no longer reasonably compatible after other income types or deductions have been verified.

If earnings are determined to be reasonably compatible, the amount reported by the member should be used to determine eligibility and premium amounts for health care.

If the earnings are later verified (for example, because verification is required for another program), the verified earnings should then be used to determine eligibility and premium amounts for health care.

In this situation, members are not liable for overpayments because the initial determination was based on income that was reasonably compatible with a data exchange.

Members with eligibility determinations that were based on income that was reasonably compatible are subject to regular change reporting rules and can be subject to benefit recovery if they fail to report income that exceeds their reporting threshold.

Note: For simplicity, the examples below include households with earned income as the only source of income. It is important to remember that reasonable compatibility is based on the individual's total countable income, not just his or her earned income amount.

16.2 INCOME TYPES NOT COUNTED

14. Payments to Native Americans

- a. Distributions from Alaska Native Corporations and Settlement Trusts, including:
 - Menominee Indian Bond interest payments.
 - All judgment payments to tribes through the Indian Claims Commission or Court of Claims.
 - Payments under the Alaskan Native Claims Settlement Act.
 - Payments under the Maine Indian Claims Settlement Fund.
 - Payments under PL 93-124 to the Sisseton-Wahpeton Sioux Tribe, except under non-MAGI rules, individual shares over \$2,000.
 - Payments under PL 93-134 to the Maricopa Ak-Chin Indian Community, Navajo Tribe, Coast Indian Community of the Resighini Rancheria, Stillaguamish Tribe, Pueblo of Taos Tribe, Walker River Paiute Tribe, and White Earth Band of the Minnesota Chippewa Tribe, except under non-MAGI rules, individual shares over \$2,000.
 - Payments under PL 94-114 to the Bad River Band and Lac Courte Oreilles Band of Chippewa Indians and the Stockbridge Munsee Indian Community of Mohicans.
 - Payments under PL 96-318 to the Delaware Tribe of Kansas and of Idaho.
 - Payments under PL 96-420 to the Houlton Band of Muliseet Indians, the Passamoquoddy, and Penobscot.
 - For EBD Medicaid cases, under PL 98-64, disregard all Indian judgment funds held in trust by the Secretary of the Interior for an Indian tribe and distributed on an individual basis to members of the tribe. Also disregard interest and investment income from these funds.
 - Payments under PL 99-346, Saginaw Chippewa Indian Tribe of Michigan.
 - Payments under PL 99-377 to the Mille Lacs, Leech Lake, and White Earth, Minnesota reservations.
 - Payments under PL 101-41, Puyallup Tribe of Indians Settlement Act of 1989.
 - Payments under the Distribution of Judgment Funds Act of 1987 to the Cow Creek Band, Umpqua Tribe.
 - Payments under the Distribution of Indian Judgment to the Crow Creek and Lower Brule Sioux except individual shares over \$2,000. Payments under the settlement of the Cobell v. Salazar class-action trust case.
- b. Other Exempt Tribal Payments
Disregard non-gaming tribal income from the following sources:
 - Distributions and payments from rents, leases, rights of way, royalties, usage rights, or natural resource extraction and harvest from:
 - Rights of ownership or possession in any lands held in trust, subject to federal restrictions, located within the most recent

boundaries of a prior federal reservation, or otherwise under the supervision of the Secretary of the Interior; or

- Federally-protected rights regarding off-reservation hunting, fishing, gathering, or usage of natural resources
- Distributions resulting from real property ownership interests related to natural resources and improvements:
 - Located on or near a reservation or within the most recent boundaries of a prior
 - federal reservation; or
 - Resulting from the exercise of federally-protected rights relating to such real property ownership interests

~~c. Payments to tribal members from gaming revenue: All of the income from Tribal Per Capita payments from gaming revenue are counted income.~~

~~d.c.~~ Tribal general welfare payment received under the Tribal General Welfare Exclusion Act. (Note: This exemption applies only to MAGI budgeting rules.)

16.3 INCOME DEDUCTIONS

16.3.3 Tax Deductions

Monthly expenses related to tax deductions from page one of the IRS [Schedule 1 \(Form 1040\)](#) are allowed as income deductions for the current year, even if the individual does not plan on filing taxes. If the expense is not incurred on a monthly basis, it will be prorated and counted as a monthly expense.

Most of these deductions are not common, and they do not include itemized tax deductions, like charitable contributions or mortgage interest.

A net loss carryover from previous periods, known as an *NOL* on IRS tax forms, is allowed as an income deduction. [An NOL should be considered as an ongoing tax deduction, but should be reviewed each tax year.](#) If claimed, it would be found on Line 21 of the IRS [Schedule 1 \(Form 1040\)](#).

16.4 EARNED INCOME

16.4.3.3 Self-Employed Income Sources

All self-employment income is earned income, except royalty income and some rental income.

Self-employment income is income that is reported to the IRS as farm or other self-employment income or as rental or royalty income. When income is not reported to the IRS, the worker must judge whether or not it is self-employment income.

Self-employment income sources are:

- **Business.** Income from operating a business.
- **Capital Gains.** Business income from selling securities and other property is counted. Personal capital gains and ordinary gains or losses are counted as unearned income. See Section 16.5 Other Income for more information.
- **Royalties.** Royalty income is unearned income received for granting the use of property owned or controlled. Examples are patents, copyrighted materials, or a natural resource. The right to income is often expressed as a percentage of receipts from using the property or as an amount per unit produced.
- **Rental.** Rental income is rent received from properties owned or controlled. Rental income is either earned or unearned. It is earned only if the owner actively manages the property on an average of 20 or more hours per week. It is unearned when the owner reports it to the IRS as other than self-employment income. Use "net" rental income in the eligibility determination. "Net" rental income means gross rental receipts minus business expenses.
 - When a Medicaid group member reports rental income to the IRS as self-employment income, see 3A Reported to IRS as Self-Employment Income.
 - If he or she does not report it as self-employment income, add "net rent" to any other unearned income. ~~on the appropriate worksheet.~~ Determine "net rent" as detailed in 3B Rental Income Not Reported as Self-Employment Income.

3A Reported to IRS as Self-Employment Income

When the owner is not an occupant, net rental income is the rent payment received minus the interest portion of the mortgage payment and other verified operational costs.

When a *life estate* holder moves off the property and the property is rented, net rental income is the rent payment received minus taxes, insurance, and

operational costs. The operational costs are the same as the costs the holder was liable for when living on the property.

When the owner lives in one of the units of a multiple unit dwelling and does not file taxes for the rental income, compute net rental income as follows:

1. Add the annual interest portion of the mortgage payment and other operational costs common to the entire operation.
2. Divide the result in step 1 by the total number of units to get the proportionate share.
3. Multiply the amount in step 2 (the proportionate share) by the number of rental units.
4. Add the proportionate share to any operational costs paid that are unique to any rental unit. This equals total expenses.
5. Subtract total expenses from the total rent payments to get net rent.

Example 2: George owns a four-unit apartment building and lives in unit one. His annual interest paid on his mortgage for the most recent tax year is \$9,765. His operational expenses, including taxes on the house, from the most recent taxes is \$12,359. This totals \$22,124. This amount divided by four units equals a proportionate share of \$5,531.

\$5,531 multiplied by three rental units equals \$16,593. This represents his total budgetable annual expenses. His total annual rental income equals \$28,800 (\$800 per unit per month).

\$28,800
<u>-\$16,593</u>
\$12,207

$\$12,207 / 12 = \mathbf{\$1,017.25}$ net monthly rental income

3B Rental Income Not Reported as Self-Employment Income

When a BadgerCare Plus group member reports rental income to the IRS as self-employment income, see 3A [Reported to IRS as Self Employment Income](#).

If he or she does not report it as self-employment income, add "net rent" to any other unearned income, ~~on the appropriate worksheet~~. Determine "net rent" as follows:

1. When the owner is not an occupant, "net rent" is the rent payment received minus the interest portion of the mortgage payment and other verifiable operational costs. Operational costs include ordinary and necessary expenses such as insurance, taxes, advertising for tenants,

and repairs. Repairs include such expenses as repainting, fixing gutters or floors, plastering, and replacing broken windows.

Capital expenditures are not deductible from gross rent. A capital expenditure is an expense for an addition or increase in the value of the property. It would include improvements such as finishing a basement; adding a room; putting up a fence; putting in new plumbing, wiring, or cabinets; or paving a driveway.

If an institutionalized person has excess operational costs above the monthly rental income, carry the excess costs over into later months until they are offset completely by rental income. The carryover should only be done until the end of the year in which the expenses were incurred.

When a life estate holder moves off the property and the property is rented, count the net rental income the holder is entitled to receive. Net rental income is the gross rental income minus taxes, insurance, and other operational costs. The operational costs are the same as the costs the holder was liable for when living on the property.

2. When he or she receives income from a duplex, triplex, etc. and lives in one of the units, determine "net rent" as follows:

- a. Add the annual interest portion of the mortgage payment and other annual verifiable operational costs common to the entire operation.
- b. Divide the result in "a" by the total number of units to get the proportionate share.
- c. Multiply the amount in "b" (the proportionate share) by the number of rental units.

Note: Rental units mean the total number of units minus the unit the owner lives in.

- d. Add the proportionate share, "c," to any operational costs paid by the member that are unique to any rental unit. The result is the total member expense.
- e. Subtract the total member expense, "d," from the total annual rent payments to get annual net rental income. Budget this amount.

16.4.3.4 Calculating BadgerCare Plus Self-Employment Income

16.4.3.4.1 IRS Tax Forms and Worksheets

IM workers do not fill out any IRS tax forms on an applicant's or member's behalf. It is the responsibility of the applicant or member to complete IRS tax forms. IRS tax forms must be signed by the applicant or member.

Workers should consult IRS tax forms only if all of the following conditions are met:

- The business was in operation at least one full month during the previous tax year.
- The business has been in operation six or more months at the time of the *application*.
- The person does not claim a change in circumstances since the previous year.

If all three conditions are not met or if IRS tax forms were not filed and are not available, use anticipated earnings (Section 16.4.3.4.4 Anticipated Earnings).

~~16.4.3.4.2 Worksheets~~

If you decide to use IRS tax forms, use them together with the [chart in Process Help, Section 16.2 Self-Employment Income or the self-employment income worksheets](#), which identify ~~which net~~ income and [expenses need to be entered onto the Self-Employment page](#) ~~depreciation~~ by line on the IRS tax forms.

For each operation, select the worksheet you need [\(if applicable\)](#); and, using the provided tax forms and/or schedule, complete the worksheet [\(if applicable\) and enter the income and expenses onto the Self-Employment page](#).

1. Sole Proprietor

[There is no worksheet for Sole Proprietor. See Process Help, Section 16.2.2.3.2 Entering Information for a Sole Proprietorship to identify which lines need to be entered in CWW for each of the following IRS tax forms:](#)

- IRS Form 4797—Capital & Ordinary Gains ~~(F-01983)~~
- IRS Schedule C or C-EZ (Form 1040)—Profit or Loss From Business ~~(F-01984)~~
- ~~IRS Schedule D (Form 1040)—Personal Capital Gains or Losses (F-01985)~~
- IRS Schedule E (Form 1040)—Rental and Royalty Income ~~(F-01986)~~
- IRS Schedule F (Form 1040)—Farm Income ~~(F-01987)~~

2. Partnership (F-16036)

- IRS Form 1065—Partnership Income
- IRS Schedule K-1 (Form 1065)—Partner's Share of Income

~~3. Corporation (F-16034)~~

~~IRS Form 1120—Corporation Income~~

4. Subchapter S Corporation (F-16035)

- IRS Form 1120S—Small Business Corporation Income
- IRS Schedule K-1 (Form 1120S—Shareholder's Share of Income)

CWW will calculate~~If not already calculated on the worksheet, divide IM income by the number of months that the business was in operation during the previous tax year. The sole proprietor and partnership worksheets already account for this.~~

~~The result is~~ monthly countable income for each self-employment business, which will be added~~IM income. Add this~~ to the fiscal test group's other earned and unearned income. If monthly IM income is a loss, ~~subtract~~ the loss will be subtracted from the non-self-employment income.

When a household has more than one self-employment operation, the losses of one may be used to offset the profits of another. Losses from self-employment can be used to offset other income types. In situations where an individual is planning to file a joint tax return with his or her spouse, losses from self-employment may offset the spouse's income.

Each self-employment operation (Sole Proprietor, Partnership, ~~Corporation, S Corporation~~) requires its own Self-Employment page in CWW. ~~However, if an individual owns multiple businesses within one self-employment operation—for example, a sole proprietor operation with eight different rental buildings—combine the results of each worksheet (each rental building) into one monthly IM income amount before adding that total to any other income listed in the case (e.g., wages or Social Security).~~

Remember that while a salary or wage paid to a test group member is an allowable business expense, you must count it as earned income to the payee. Similarly, dividends or other types of passive income (as defined by the IRS) must be counted as unearned income.

~~Even though IRS Schedule D (Form 1040) – Personal Capital Gains and Losses is associated with sole proprietorships, it is not considered self-employment income. If someone reports personal capital gains or losses, it is counted as unearned income (see Section 16.5 Other Income).~~

16.4.3.4.23 Depreciation, Depletion, and Disallowed Expenses

16.4.3.4.34 Anticipated Earnings

16.4.3.4.34.1 Reporting Anticipated Earnings

The Self-Employment Income Report form, F-00107, (also called a SEIRF) and the Self-Employment Income Report: Farm Business form, F-00219, simplify reporting income and expenses when earnings must be anticipated. Self-Employment Income Report forms can be used to report income for any type of business with any form of organization. However, some people, especially farm operators, may find it easier to complete the applicable IRS Form 1040 schedule when income and expense items are more complex.

For anticipated earnings to be determined, the applicant or member must complete a Self-Employment Income Report form for the months of operation since the significant change in circumstances occurred, not to exceed 12 months. (Note: The beginning of a business is a significant change in circumstances.) When requesting verification, the SEIRF will be prepopulated with the individual's and business' information, and will identify each individual month for which income and expenses are needed. However, ~~he~~He or she may complete a separate Self-Employment Income Report form for each month or combine the months on one Self-Employment Income Report form.

When a new self-employment business is reported or when a significant change in circumstance occurs, recalculate self-employment income as follows:

- When **six or more months** of actual self-employment information is available (but tax information is not available), calculate monthly average self-employment income using all the months' (at least six months, but not more than 12 months) income.

Example 3: James applies for BadgerCare Plus on November 1, 2017. He reports that he was self-employed starting in April 2017. The agency asks James to complete Self-Employment Income Report forms for April, May, June, July, August, September, and October so that his prospective self-employment income can be determined for his BadgerCare Plus certification period (November 2017–October 2018).

- When **two or more full months but less than six months** of actual self-employment information is available, calculate a monthly self-employment net income average using all of the actual income information. Because at least three months of income is needed, if the business has only been in operation two months, calculate the monthly self-employment net income average using the actual income information for two months, and an estimate of net income for the next month.

Example 4: Bonnie applies for Child Care and BadgerCare Plus on April 5, 2016. She reports that she was self-employed starting in January 2016. The agency asks Bonnie to complete a Self-Employment Income Report form for January, February, and March so that her prospective self-employment income can be determined for her Child Care and BadgerCare Plus certification period (April 2016–March 2017).

- When **at least one full month but less than two full months** of actual self-employment income information is available, calculate a monthly net income average using the actual net income received in any partial month of operation, the one full month of operation, and an estimate of net income for the next month.

Example 5: Ricardo applies for FoodShare and BadgerCare Plus on February 5. He was self-employed starting December 15. The agency asks Ricardo to complete a Self-Employment Income Report form for December, January, and February so that his prospective self-employment income can be calculated. The completed Self-Employment Income Report form includes Ricardo's actual income and expenses for December and January, and his expected income and expenses for February. The worker divides the total by three to determine an anticipated monthly average income amount. This amount would be used until Ricardo reports a significant change in self-employment or until Ricardo renews his benefits.

- When there is **less than one full month** of actual income information available, calculate a monthly net self-employment income average using the actual net income received in the partial month (since the significant change in circumstance occurred) and estimated income and expenses for the next two months.

Example 6: Jenny is a BadgerCare Plus member who has been self-employed as a hairdresser since 2012. Jenny's BadgerCare Plus certification period is December 2015 to November 2016. The worker used Jenny's 2014 tax return to establish a monthly income amount.

In March 2016, Jenny reports that she has been unable to work since breaking her arm on February 17. She is not sure when she will be able to return to work, but it will not be until at least May.

Jenny completes a Self-Employment Income Report form for February 17–February 28 (actual income since the significant change in circumstance occurred), and for March and April using a best estimate of income. The worker uses these three months (February, March, and April) to determine a prospective self-employment income estimate for the remainder of the certification period (through November 2016).

Use the average until the member's next renewal, until the person completes an IRS tax form, or until a significant change in circumstances is reported between renewals.

-

16.4.3.4.4 Backdated Months

Self-employment income is averaged over the number of months the business has been in operation in a tax year or anticipated based on an average of SEIRFs. It is not based on exact income for a single month, as that does not take into consideration seasonal work and fluctuating income for the business. If an individual had applied in a backdated month, eligibility would not be determined on the basis of one month of self-employment income; instead, eligibility would be based on an average of at least three months of income.

When a self-employed applicant or member requests backdated benefits for health care, workers must do the following:

1. Average self-employment income for the application month forward (to determine ongoing eligibility).
2. Determine eligibility for the backdated months as if the applicant or member had applied in the earliest backdated month requested:
 - If income is reported via federal taxes, the tax filing year has not changed, and no significant change in circumstances has occurred, the same averaged income and expenses from the tax forms can be used for ongoing and backdated eligibility.
 - In all other scenarios, workers must consider SEIRFs and the average to be counted if that earliest month was the application month. If estimates would have been used, but the month has passed, actual information should be provided on the SEIRFs.
3. Consider any significant changes that occurred during the backdated months that would require a new average to be calculated for the second and/or third month. If there has not been a significant change or a change in the tax filing year during the backdated months, the average calculated for the earliest month can be used throughout the backdated months.

-

Example 7: Maggie applied for BadgerCare Plus in June and requested

backdated eligibility to March. She has been self-employed as a seamstress since February of the same year. She does not file taxes.

- For the application month of June, SEIRFs would be used for all available months – February, March, April, and May to budget average income for the month of June and ongoing.

- If she had applied in March, her income would have been averaged based on actual income for the months of February, March, and April, so SEIRFs for February, March, and April would be used for determining her eligibility for BadgerCare Plus for the backdated months of March, April, and May.

- **Example 8:** Glenn applied for BadgerCare Plus in September and requested backdated eligibility to June. He has been self-employed as a farmer, but reported having a true significant change in circumstances in May.

- For the application month of September, SEIRFs would be used for all months since the significant change – May, June, July, and August to budget average income for the month of September and ongoing.

- If he had applied in June, his income would have been average based on actual income for the months of May, June, and July, so SEIRFs for May, June, and July would be used for determining his eligibility for BadgerCare Plus for the backdated months of June, July, and August.

- **Example 9:** Hershel applied for BadgerCare Plus and FoodShare for himself in April and requested backdated eligibility to January. He owns a bakery and filed taxes. However, he reports that his previous year's taxes no longer reflect his earnings due to a true significant change that occurred in March.

- For the application month of April, SEIRFs would be used for all months since the significant change occurred in March, so Hershel's actual income for March and estimated income for April and May would be used to budget average income for the month of April and ongoing.

- If he had applied in January, taxes would be used as verification of his income, so his taxes can be used for determining his eligibility for BadgerCare Plus for the backdated months of January and February.

- However, because of the significant change in March, an average of March, April, and May SEIRFs would be used for determining his eligibility for BadgerCare Plus for the backdated month of March.

16.4.4 Verification

Self-employment income information is not available through data exchanges and therefore must be verified (see Section 9.10 Questionable Items).

Completed and signed IRS tax forms (see Section 16.4.3.2.1 IRS Tax Forms) are sufficient verification of farm and self-employment income. If tax forms are not available or cannot be used because of a significant change in circumstances, a completed and signed Self-Employment Income Report form(s) is also sufficient verification.

Note: It is not necessary to collect copies of supportive verification, such as receipts from sales and purchases. However, verification can be requested when the information given is in question (see Section 9.10 Questionable Items). If requesting verification, workers must document the reason for the request in case comments.

If a Program Add request is made on a case with self-employment income, use the existing SEIRF information, instead of re-verifying it, if all of the following are true:

- A recent determination was made.
- SEIRFs were used.
- No significant change has been reported by the individual.
- The business has not filed taxes in the meantime.

16.5 OTHER INCOME

21. Tribal Per Capita Payments from Gaming Revenue

All of the income from Tribal Per Capita payments from gaming revenue is counted income.

18.4 INCOME CHANGES DURING THE EXTENSION

During an extension, a group or individual's income may decrease to an amount at or below 100% FPL for the group size and then increase again to exceed the 100% FPL. When the income decreases, the individual will be removed from the extension and placed in regular BadgerCare Plus. The remaining months of the extension will continue to run in the background. Verification of the income decrease to at or below 100% FPL is required in order to make the individual eligible in regular BadgerCare Plus. If income verification is not provided, the individual will remain in the extension for the remaining months.

If the individual's countable income again increases above the 100% FPL, he or she would be eligible under the previous extension for any remaining months. If the individual is eligible for a new extension when the income again increases, because he or she meets all of the criteria above, choose the extension which gives the longest coverage, and cancel the other.

Example 1: A BadgerCare Plus group with a 12-month extension from January through December has a decrease in income in February that puts them back below 100% FPL. The group provides pay stubs to verify the decrease in income. The extension continues to run while the group is on regular BadgerCare Plus. In October the group's countable income again increases to above 100% FPL, this time due to an increase in spousal support income. They are now eligible for a four-month spousal support extension, which would run from November through February. Since the four-month extension would be longer than the current extension, apply the new four-month extension.

19.7 REFUNDS

Contact the BadgerCare Plus Unit at 1-888-907-4455 to issue a refund if the premium was paid and is for a month in which the one of the following situations occurs:

1. The individual or Individual/family was ineligible for BadgerCare Plus.
2. ~~A~~ The group's countable income decreased and they no longer owe a premium, if the income change is/was reported that results in no premium or a timely.
3. ~~A~~ lower premium amount. If the change is reported within 10 days of when is due to a change in circumstances which was in effect for the entire month as long as the change was reported within ten days of the date it occurred, the. ~~The~~ lower or \$0 premium amount due is effective during the first day of the month in which the change occurred. If the change is not/was reported within 10 days of when the change occurred. A refund for the lower or \$0 premium amount is effective during the month in which it was reported. The fiscal agent difference will refund any excess premium that was paid. See Section 27.2 Nonfinancial Change Reporting Requirements and Section 27.3 Income Change Reporting Requirements for information on change reporting be issued.

Note: When determining if a change was reported within 10 days of when the change occurred, the worker should use the reported date of change from the member. If the worker has information that makes the reported date of change questionable, the worker can request verification of the date of change.

Example: ~~A child without any income is added to the BadgerCare Plus group. Based on the group's income compared to the new group size, a premium is no longer owed. The fiscal agent will refund the premium that has already been paid.~~

Example 1: David and Jenny are married and have a child, Megan. Their household income is 285% of the FPL. Megan is enrolled in BadgerCare Plus with a \$68 monthly premium. In June, David had a decrease in work hours. At the end of June, David and Jenny found that this reduction in work hours resulted in the household income decreasing to 235% of the FPL in the month of June. David reports this income change to the agency on July 7. Since this change was reported within 10 days of the household monthly income changing, the lower premium is effective the month in which the change occurs (June). Starting in June, Megan's monthly premium is \$15. David had already paid \$68 each for Megan's June and July premiums, so the IM worker must contact the fiscal agent to refund the total difference of \$106 for June and July.

Example 2: Morgan and Taylor are married and have a child, Kelly. Their household income is 285% of the FPL. Kelly is enrolled in BadgerCare Plus with a \$68 monthly premium. In June, Morgan has a decrease in work hours. At the end of June, Morgan and Taylor found that this reduction in work hours resulted in the household income

decreasing to 235% of the FPL in the month of June. Morgan reports this income change to the agency on July 18. Since this change was reported more than 10 days after the household monthly income changed, the lower premium amount is effective during the month in which it was reported (July). Starting in July, Kelly's monthly premium is \$15. Morgan already paid \$68 for Kelly's July premium, so the IM worker must contact the fiscal agent to refund the difference of \$53 for July.

Example 3: Aaron has a child, Emily. Their household income for a group of 2 is 285% of the FPL. Emily is enrolled in BadgerCare Plus with a \$68 monthly premium. On September 4, Aaron marries Kathy. Aaron contacts his agency on September 13 to report his marriage to Kathy and adding her to his household. Their household income for a group of 3 is 225% of the FPL. Starting in September, Emily's monthly premium is \$10. Aaron had already paid \$68 for Emily's September premium, so the IM worker must contact the fiscal agent to refund the difference of \$58 for September.

Note: Premium payments may not be made in advance.

19.9 LATE PAYMENTS

The case will remain open for the benefit month even if no payment is received by the due date. It will close at the end of the benefit month if no payment is received by *adverse action* in the benefit month.

If the member pays between adverse action of the benefit month and the last day of the benefit month, eligibility can be restored.

Example: Adverse action is September 16th. Jim's September premium was due September 10th. Jim has not paid his September premium by September 16th. He pays on September 26th. The case closed effective September 30th. Eligibility for October will be restored. He is not required to pay the October premium until October 10th.

Note: An individual's BadgerCare Plus eligibility can be reinstated during an RRP if the individual pays the owed premiums before the end of the RRP. For information about payments made during the RRP, see Section 19.11 BadgerCare Plus Restrictive Re-enrollment Period.

19.10 PREMIUM CHANGES

19.10.1 Decreased Premium Amount

~~If the~~~~When a~~ change is reported within 10 days of when the change occurred, the~~that~~~~results in a~~ lower or \$0 premium amount,~~it~~ is effective during the month in which the change occurred. If the change is not reported within 10 days of when the change occurred, the lower or \$0 premium amount is effective during~~of~~ the month in which it was reported,~~whichever is later~~. The *fiscal agent* will refund any excess premium that was paid.

19.11 BADGERCARE PLUS RESTRICTIVE RE-ENROLLMENT PERIOD

19.11.2 Reinstatement

RRPs are set for three months.

The child can become eligible for BadgerCare Plus again at any time during the three-month RRP if all owed premiums are paid by the last day of the RRP. The child's eligibility will be restored back to the beginning of the RRP. If the person serves the full three-month penalty period, he or she may be eligible to re-enroll for the remainder of the BadgerCare Plus certification again (without paying any owed premiums) on the first of the following month after the RRP ends, if he or she continues to meet the program eligibility criteria.

Example 3: Kayla, age 10, had a premium of \$10 and failed to pay her May premium. Her BadgerCare Plus benefits ended May 31 and she was put into a three month RRP from June 1 to August 31. Eligibility can be re-determined in September OR Kayla could re-enroll prior to September 1, but only if she pays all owed premiums by August 31.

19.11.4 De-requesting BadgerCare Plus

If a member de-requests BadgerCare Plus prior to adverse action, the member's BadgerCare Plus enrollment ends at the end of that month.

Example 5: Ben, age 9, is open for BadgerCare Plus. Due to an increase in his parent's income, Ben will owe a premium starting in October. On September 9, his parent contacts the IM agency to de-request BadgerCare for Ben. The IM agency processes this de-request and ends Ben's BadgerCare Plus as of September 30. Ben will not enter an RRP due to not paying the October premium since he is not enrolled in BadgerCare Plus in October.

If a member de-requests BadgerCare Plus after adverse action, the member's BadgerCare Plus enrollment ends the end of the following month in order to provide timely negative notice. If a premium is owed for the month and is not paid, the member will enter into an RRP.

Example 6: Susan, age 14, is open for BadgerCare Plus. Due to an increase in her parent's income, Susan will owe a premium starting in October. On September 25,

her parent contacts the IM agency to de-request BadgerCare for Susan. The IM agency processes this de-request and ends Susan's BadgerCare Plus as of October 31. If Susan's premium for October is not paid, she will enter into an RRP starting November 1. She will not be able to re-enroll in BadgerCare Plus prior to February 1 unless she pays her owed premiums.

25.8 BEGIN DATES

25.8.1 Backdated Eligibility

All pregnant women, except those eligible under the BadgerCare Plus Prenatal program, may have their eligibility backdated to the first of the month, up to three calendar months prior to the month of application.

All former foster care youth that meet the criteria in Chapter 11 Foster Care Medicaid may have their eligibility backdated to the first of the month, up to three calendar months prior to the month of application.

Children determined eligible for BadgerCare Plus are eligible for the following periods of backdated eligibility:

- Infants less than 1 year old may have their eligibility backdated up to the first of the month, three calendar months prior to the month of application for any of the months in which their family income was at or below 306% FPL,
- Children ages 1 through 5 may have their eligibility backdated up to the first of the month, three calendar months prior to the month of application for any of the months in which their family income was at or below 191% FPL, and
- Children ages 6 through 18 may have their eligibility backdated up to the first of the month, three calendar months prior to the month of application for any of the months in which their family income was at or below 156% FPL.

All non-pregnant, non-disabled parents and caretakers may have their eligibility backdated up to the first of the month, three calendar months prior to the month of application for any of the months in which their family income was at or below 100% FPL.

Childless adults with assistance group income under 100% FPL are eligible for backdating.

[See Section 16.4.3.4.5 Backdated Months for information on counting self-employment income for backdated months.](#)

When backdating BadgerCare Plus, do not go back further than the first of the month, three months prior to the application month. Certify the person for any backdate month in which he or she would have been eligible had he or she applied in that month. In the case of children, certify the person for any backdate month in which he or she would have been eligible had he or she applied in that month and in which their assistance group income was at or below the appropriate FPL level for their age group.

When determining backdated eligibility, use actual nonfinancial information (e.g., household composition) and actual income in the backdated months. When determining

backdated eligibility under gap filling rules for months in a past calendar year, use actual income. When determining backdated eligibility under gap filling rules for months in the current calendar year, assess expected annual income using the same process for non-backdated months.

A backdate request can be made at any time, except in the case where the member is already enrolled and backdating the member's eligibility would result in a deductible for the backdated period.

Note: Applicants are not eligible for backdated health care benefits while pending for citizenship and/or identity. Applicants who are otherwise eligible must be certified for health care benefits for the 95 day good-faith period within the normal application processing timeframe. Once verification is provided, the applicant's eligibility must then be determined for backdated health care benefits if they have been requested. See Section 4.2 Documenting Citizenship and Identity for more information.

If a member has incurred a bill from a BadgerCare Plus certified provider during a backdate period, instruct the member to contact the provider to inform them to bill BadgerCare Plus. The member may be eligible to receive a refund, up to the amount already paid to the provider.

Example 1: Mary, who is pregnant with an August due date, applied for BadgerCare Plus on April 6, and was found eligible. At the time of application, Mary did not request a backdate.

In September, Mary is billed for a doctor's appointment she had at the end of February. Mary can ask to have her eligibility backdated through February. She meets all nonfinancial and financial eligibility criteria in the months of February and March. Her worker certifies her for BadgerCare Plus for both months.

Example 2: Crystal applied for and was determined eligible for BadgerCare Plus effective February 1, 2018. She contacts her IM agency in April 2018 to see if she is eligible for coverage back to December 1, 2017. Crystal had previously reported no income for the month of January 2018. The worker finds no information contrary to what Crystal reported. She is determined eligible for backdated benefits for the month of January 2018.

However, Crystal reported that she received unemployment benefits in 2017 and had a seasonal job from November 1, 2017, through December 31, 2017, with her last paycheck received on December 31, 2017. Crystal reports she earned \$2,000 from the seasonal job and received a lump sum payment of \$500 for December. Based on her monthly income (\$2,500), she is not eligible for BadgerCare Plus for December 2017.

The worker checks Crystal's annual income for 2017 to see if she may be eligible based on annual income. A SWICA match shows that she earned a total of \$3,995 during the fourth quarter of 2017. The unemployment compensation query shows that Crystal received a total of \$3,200 in unemployment benefits during 2017. Her annual income for 2017 is \$7,695 (\$3,995 from wages earned, \$3,200 from unemployment benefits, and a \$500 lump sum payment). Her annual income for 2017 is below 100% of the FPL. Crystal is eligible for backdated benefits under gap filling rules for the month of December 2017.

26.1 RENEWALS

26.1.1 Renewals Introduction

A renewal is the process during which all eligibility factors subject to change are reexamined and it is determined if eligibility continues. The group's continued eligibility depends on its timely completion of a renewal and verification of required information. Each renewal results in a determination to continue or discontinue eligibility.

28.4 OVERPAYMENT CALCULATION

28.4.3 Liability

Except for minors, collect overpayments from the BadgerCare Plus member, even if the member has authorized a representative to complete the application or renewal for him or her. Legally married spouses living in the household at the time the overpayment occurred are jointly liable for overpayments.

Other household members who were not enrolled in BadgerCare Plus on the same case during the time the overpayment occurred are not jointly liable for overpayments.

Example 3: Josie is Danielle's authorized representative, and Josie applied on behalf of Danielle for BadgerCare Plus in December. It was later found that Josie did not report some of Danielle's income when she applied, which would have resulted in Danielle being ineligible for BadgerCare Plus. Danielle's BadgerCare Plus case closed March 31. Danielle was determined to be ineligible for BadgerCare Plus from December–March. Recover from Danielle any benefits that were provided to her from December–March. Even though Josie failed to report the information as the authorized representative, Josie is not liable.

Example 4: Alice and Jonas are married, filing taxes separately, and eligible for BadgerCare Plus as childless adults. An IM worker discovers that Alice did not report a new job that would have made her ineligible for BadgerCare Plus. Both Alice and Jonas are jointly liable for Alice's overpayment because they were married and living in the household during the time benefits were overpaid for Alice.

Example 5: Kevin and Linda are married, filing taxes jointly, and claiming their two children, ages 20 and 22, who live with them, Grace and Paul, as tax dependents. Kevin and Linda are enrolled in BadgerCare Plus as childless adults. Grace is enrolled in BadgerCare Plus as a childless adult on her own case. Paul is not enrolled in BadgerCare Plus. An IM worker discovers that Kevin and Linda earned more income than reported and it would have made them ineligible for BadgerCare Plus. Kevin and Linda are liable for the overpayment. Grace and Paul are not liable for the overpayment for Kevin and Linda's BadgerCare Plus enrollment..

If a minor received BadgerCare Plus in error, make the claim against the minor's parent(s) or legally responsible relative if the parent or legally responsible relative was living with the minor at the time of the overpayment.

Example 65: Susan applied for BadgerCare Plus for herself and her minor son, Billy, in January. Susan lives with Billy. Susan did not report some of her income when she applied, which would have resulted in her and Billy being ineligible for BadgerCare Plus. When the IM agency finds out about the income, Susan and Billy's BadgerCare Plus case closes April 30. They were determined to be ineligible for BadgerCare Plus from January-April. Recover from Susan any benefits that were provided to her and Billy from January-April. Susan is liable for Billy's overpayment because she is his parent and was living with him at the time of the overpayment.

40.1 FAMILY PLANNING ONLY SERVICES PROGRAM

The Family Planning Only Services Program provides limited benefits for family planning services for women and men with income at or below 306 percent of the *FPL* and who are:

1. Of child bearing or reproductive age, and
2. Not enrolled in BadgerCare Plus or receiving other full-benefit Medicaid.

For more information about income disregards under MAGI rules, see Section 16.1.2 Income Under Modified Adjusted Gross Income Rules.

Individuals who are eligible for the Family Planning Only Services Program may be eligible to receive more than one limited benefit program. These include:

- Tuberculosis-related ([Chapter 43 Tuberculosis-Related Medicaid](#) **MEH 25.7**)
- Qualified Medicare Beneficiary ([Medicaid Eligibility Handbook, Section](#) **MEH 32.2**)
- Specified Low-Income Medicare Beneficiary ([Medicaid Eligibility Handbook, Section](#) **MEH 32.3**).

In certain circumstances, women enrolled in the Family Planning Only Services Program may be eligible for the Wisconsin Well Woman Medicaid plan (see [Medicaid Eligibility Handbook](#) **MEH** chapter 36).

~~43.1 RESERVED~~

43.1 NONFINANCIAL REQUIREMENTS

Adults who are infected with tuberculosis (TB) and who are not otherwise eligible for full benefit BadgerCare Plus or Medicaid may be eligible for Tuberculosis (TB)-related Medicaid, a special category of Medicaid.

"Infected with TB" means that a physician has examined them and found that one or more of the following diagnoses apply to them:

- They are infected with latent or active TB.
- They have a positive TB skin test.
- They have a negative TB skin test but a positive sputum culture for the TB organism.
- They have a negative test for TB, but a physician certifies that they require TB-related drug therapy, surgical therapy, or both.
- A physician certifies that they require testing to confirm the presence or absence of TB.

A member's statement that he or she has one or more of the above conditions should be accepted unless the information provided is questionable (see Section 9.10 Questionable Items). If questionable, accept any of the following as verification:

- A physician's or registered nurse's written confirmation that the person has one or more of the above conditions.
- Wisconsin Tuberculosis Record (Form DPH 4756). This card identifies the person and the physician's diagnosis and has the name and telephone number of the treatment provider.

To be eligible for TB-Related Medicaid, a person must also meet the following criteria:

- Be a Wisconsin resident (see Chapter 3 Residence)
- Be a U.S. citizen or qualified immigrant (see Chapter 4 Citizenship and Immigration Status)
- Provide documentation of citizenship and identity or of immigration status (see Section 4.1 U.S. Citizens and Nationals)
- Cooperate with establishing medical support and TPL (see Chapter 5 Medical Support and Third Party Liability)
- Sign over to the state his or her rights to payments from a third party for medical expenses (see Section 5.2 Medical Support/Child Support Agency Cooperation)
- Meet BadgerCare Plus SSN requirements (see Chapter 6 Social Security Number Requirements)

- Cooperate with verification requests when information is mandatory or deemed questionable (see Chapter 9 Verification)

43.2 FINANCIAL TESTS

There is no asset test for Tuberculosis (TB)-Related Medicaid.

- The income limit for one adult is \$1,627. For a married couple, the limit is \$2,399. A person's income is determined using MAGI budgeting rules (see Section 2.3 Modified Adjusted Gross Income Test Group, Section 2.8 Modified Adjusted Gross Income Counting Rules, and Chapter 16 Income).

- For children infected with TB, income must be budgeted using MAGI rules, the same way it is for children applying for BadgerCare Plus (see Section 2.3 Modified Adjusted Gross Income Test Group). If the child is determined ineligible for BadgerCare Plus, the countable MAGI income for the child will be applied against the TB-related Medicaid individual monthly income limit of \$1,627. This income limit applies to each child no matter how many persons are in the assistance group.

- **Example 1:** Mary and her spouse George are both applying for TB-related Medicaid. Test Mary and George as one MAGI Test Group. Test their MAGI income against the income limit for a married couple.

- **Example 2:** Greg is a 20-year-old with TB and is applying for BadgerCare Plus. Greg lives with his dad, Barry, and is Barry's tax dependent. Under MAGI budgeting rules, Barry and Greg are one MAGI Test Group and we must count Barry's MAGI income (which includes Greg's income if he is required to file taxes). The monthly MAGI income for Barry and Greg is \$1,500, which is 106% of the FPL for a group of 2. This makes Greg ineligible for BC+ as a childless adult. However, that same MAGI income amount is less than the \$1,627 TB income limit for an unmarried individual, which makes Greg eligible for TB-Related Medicaid.

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43.3 TUBERCULOSIS-RELATED SERVICES

People who become eligible for Tuberculosis (TB)-related Medicaid are only eligible for the following Medicaid services:

- Prescribed drugs.
- Physicians' services.
- Laboratory and X-ray services, including services to diagnose and confirm the presence of infection.
- Clinic services and federally qualified health care (FQHC) services.
- Targeted case management services.
- Services, other than room and board, designed to encourage completion of regimens of prescribed drugs by outpatients.
- Services that are necessary as a result of the side effects of prescribed drugs for TB treatment.

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43.4 IMMIGRANTS

Tuberculosis (TB)-related services may be covered for individuals who do not meet citizenship requirements under Emergency Services (see Section 4.3 Immigrants and Section 39.1 Emergency Services Income Limits).

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43.5 PROCESSING

See Process Help Section 9.2 TBMA (Tuberculosis) Manual Application Processing.

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