

PUBLIC NOTICE
Department of Health Services
Medicaid Purchase Plan
Premium Changes

The State of Wisconsin reimburses providers for services provided to Medical Assistance recipients under the authority of Title XIX of the Social Security Act and ss. 49.43 to 49.47, Wisconsin Statutes. This program, administered by the State's Department of Health Services (the Department), is called Medical Assistance (MA) or Medicaid. In addition, Wisconsin has expanded this program to create the BadgerCare Plus programs under the authority of Title XIX and Title XXI of the Social Security Act and s. 49.471 of the Wisconsin Statutes. Federal statutes and regulations require that a state plan be developed that provides the methods and standards for reimbursement of covered services. A plan that describes the reimbursement system for the services (methods and standards for reimbursement) is in effect. The following changes to the Medicaid State Plan are being requested to implement s. 49.472(4) of the Wisconsin Statutes.

Change in Medicaid Purchase Plan (MAPP) Premiums

The Department is requesting that premiums be required of MAPP recipients in the following manner:

Individuals eligible for MAPP whose individual gross income exceeds 100% of the federal poverty level will be subject to the following premium policies.

Monthly Premium Calculation

1. Any verified impairment-related work expenses and monthly out-of-pocket medical or remedial expenses will be subtracted from an individual's gross income.
2. If the net amount after subtracting these expenses is at or below 100% of the federal poverty level, the premium amount will be \$25.
3. If the net amount is above 100% of the federal poverty level, the amount exceeding the federal poverty level will be multiplied by three percent (0.03). That amount will be added to \$25 and rounded down to the nearest whole dollar.

Premium Payment Requirements

For applicants, premiums must be paid in advance for initial eligibility to begin. Ongoing benefit months require payments by the 10th day of the benefit month.

Temporary Premium Waivers

Individuals who experience a temporary hardship that makes them unable to pay their premium may apply for a temporary premium waiver.

Non-Payment of Premiums

If an individual does not pay the monthly premium in the benefit month, their coverage will end. They may regain coverage at any time by re-enrolling in MAPP and paying their initial premium for the month of re-enrollment.

The changes will be effective August 1, 2024 for new applicants and existing members.

The change to Medicaid is projected to result in decreased annual expenditures of \$6,436,000 all funds (AF), composed of \$3,904,000 federal match (FED) and \$2,532,000 state funds/general purpose revenue (GPR).

Copies of Changes

Copies of the Medicaid state plan amendment may be obtained free of charge by calling or writing:

Mail:

ATTN: DHS SPA Coordinator
Bureau of Benefits Policy
Division of Medicaid Services
P.O. Box 309
Madison, WI 53701-0309

Fax:

(608) 266-1096
Attention: DHS SPA Coordinator

E-Mail:

DHSDMSSPAPublicFeedback@dhs.wisconsin.gov

Copies of the state plan change will be made available for review at the main office of any county department of social services or human services.

Written Comments

Written comments are welcome. Written comments on the proposed changes may be sent by FAX, e-mail, or regular mail to the Division of Medicaid Services. Regular mail can be sent to the above address. All written comments will be reviewed and considered.

The written comments will be available for public review between the hours of 7:45 a.m. and 4:30 p.m. daily in Room 350 of the State Office Building, 1 West Wilson Street, Madison, Wisconsin. Revisions may be made in the proposed change based on comments received.