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TO: **Income Maintenance Supervisors**
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Income Maintenance Staff
W-2 Agencies
Workforce Development Boards
Job Center Leads and Managers
Training Staff
Child Care Coordinators

FROM: Vicki Jessup, Policy Section Chief
Bureau of Enrollment Policy & Systems
Division of Health Care Access and Accountability

BEPS/DFS OPERATIONS MEMO					
No: 10-53		Amended			
DATE: 07/09/2010					
FS	<input type="checkbox"/>	MA	<input type="checkbox"/>	BC+	<input type="checkbox"/>
SC	<input type="checkbox"/>	CTS	<input type="checkbox"/>	FSET	<input type="checkbox"/>
BC+ Basic	<input checked="" type="checkbox"/>	BC+ CORE	<input checked="" type="checkbox"/>		
CC	<input type="checkbox"/>	W-2	<input type="checkbox"/>	EA	<input type="checkbox"/>
CF	<input type="checkbox"/>	JAL	<input type="checkbox"/>	JC	<input type="checkbox"/>
RAP	<input type="checkbox"/>	WIA	<input type="checkbox"/>	Other	<input type="checkbox"/> *
EP					

SUBJECT: Core Plan Waitlist Bypass for Basic Members Diagnosed with Cancer

CROSS REFERENCE:

EFFECTIVE DATE: July 1, 2010

PURPOSE:

This memo announces a change in the way the Core Plan waitlist is managed for individuals who have enrolled in the Basic Plan and have been diagnosed with cancer (excluding non-melanoma skin cancers).

BACKGROUND:

Due to funding limitations, an enrollment cap was implemented for the Core Plan on October 9, 2009. BadgerCare Plus Basic is a member-funded, temporary and limited health care benefit plan administered by the State of Wisconsin and available only to individuals who are on the waitlist for the BadgerCare Plus Core Plan. The BadgerCare Plus Basic Plan is Wisconsin's effort to provide a temporary bridge to health care for those on the Core Plan waitlist.

Basic enrollment began June 1, 2010. Basic members remain on the waitlist for Core and are invited to apply for Core if funding became available. Previously, if Core Plan funding became

available, individuals on the waitlist would be invited on a first come, first serve basis. There were not any exceptions.

POLICY:

Any person who is enrolled in the BadgerCare Plus Basic Plan and is confirmed by a physician to have a diagnosis of any cancer type, excluding non-melanoma skin cancers, will not be subject to the Core Plan enrollment cap. These individuals are eligible to be removed from the waitlist and apply for the Core Plan. If the member is eligible for the Core Plan, s/he will be enrolled on the next first or fifteen of the month. The member must be currently enrolled in the Basic Plan before s/he can be approved to bypass the waitlist and apply for the Core Plan.

EXAMPLE 1: Joe is on the Core Plan Waitlist. On July 7th he submitted his \$130 premium payment to enroll in the Basic Plan. His enrollment will begin on August 1st. On July 10th his physician submitted the Core Plan Medical Bypass form to the ESC. Since Joe's Basic Plan enrollment will not begin until August 1st he is not allowed to apply for Core Plan before August 1st. Joe applies for the Core Plan on August 4th and is determined eligible, so his Core Plan enrollment begins August 15th.

EXAMPLE 2: Mary is on the Core Plan Waitlist and submitted her \$130 premium to enroll in the Basic Plan on June 6th. She was enrolled in the Basic Plan beginning July 1st. On July 8th, her physician submitted the Core Plan Medical Bypass form to the ESC. Mary applied for the Core Plan and was determined eligible on July 10th. Her Core Plan enrollment date will be July 15th.

Basic members who bypass the Core Plan waitlist are not required to pay the Core Plan processing fee. If it is determined that the member does not meet the Core Plan enrollment criteria, including providing all required verification, enrollment for the Core Plan is denied and enrollment in the Basic Plan is terminated.

PROCESS:

Wisconsin Basic Plan providers will be notified to fax the completed Core Plan Medical Bypass form (F-00292) for newly diagnosed members to the Enrollment Services Center (ESC).

Note: Any applications received in local IM or tribal agencies should be faxed to the ESC at **1-888-409-1982** immediately upon receipt to prevent any delay in eligibility determination or treatment for the applicant.

Upon receipt of the completed form, the ESC will check for completeness and accuracy as follows.

1. Confirm in interChange that member is currently enrolled in the BadgerCare Plus Basic Plan. If the member is enrolled in any other health care plan except Family Planning Waiver (FPW), Well Woman Program (WWP) or TB MA, or if the member is inactive in BC+ Basic and has no other BC+ or Medicaid Plan coverage, send written notification (NOTICE OF DENIAL) to the member explaining why they are not eligible to enroll in the BadgerCare Plus Core Plan.
2. Ensure all required information is present and that the diagnosis is cancer. Allow all cancer diagnoses excluding non-melanoma skin cancers (just "melanoma" is acceptable). Do not allow conditions that appear not to be cancer (e.g. multiple sclerosis, epilepsy).

3. Review physician's signature and credentials. Only Doctors of Medicine (MD) and osteopaths (DO) are acceptable.
4. Review the date of physician's signature to ensure the physician's confirmation of the cancer diagnosis was made while the member was enrolled in the Basic Plan.

If a waitlist bypass is approved, the ESC will attempt to contact the member to complete the Core Plan application process by phone. If member cannot be reached by phone within two business days, send the F-00287 to notify the member s/he can bypass the waitlist and to contact the ESC by phone to complete the Core Plan application..

Process the application following the normal procedures, including the HNA, and obtain all required verification. A processing fee is not required.

During the application process, determine if the member meets eligibility criteria for Medicaid or the BadgerCare Plus Standard or Benchmark Plans. Eligibility for any of these programs would preclude enrollment into Core.

If it is determined that the member meets all eligibility criteria for the Core Plan, s/he will be enrolled in the Core Plan on the next first or fifteenth of the month. If it is determined that the member does not meet all eligibility criteria for the Core Plan, Core Plan eligibility will be denied and enrollment in the Basic plan will be terminated at the end of the current month. Any Basic Plan premiums paid for future months should be refunded.

A copy of the completed waitlist bypass form should be shared with the DHS Nurse Consultant by fax at: (608) 250-6563.

ATTACHMENTS:

Waitlist Bypass Form (F-00292)

Core Plan Waitlist Bypass – Request for Contact (F-00287)

Notice of Denial – BadgerCare Plus Core Plan Waitlist Bypass (F-00288)

CONTACTS:

BEPS CARES Information & Problem Resolution Center

*Program Categories – FS – FoodShare, MA – Medicaid, BC+ – BadgerCare Plus, SC – Senior Care, CTS – Caretaker Supplement, CC – Child Care, W-2 – Wisconsin Works, FSET – FoodShare Employment and Training, BC+ Core – BadgerCare Plus Core, CF – Children First, EA – Emergency Assistance, JAL – Job Access Loan, JC - Job Center Programs, RAP – Refugee Assistance Program, WIA – Workforce Investment Act, Other EP – Other Employment Programs.

DHS/DHCAA/BEPS/