

WISCONSIN DEPARTMENT OF HEALTH SERVICES
Division of Health Care Access and Accountability
1 West Wilson Street
Madison, WI 53703

To: BadgerCare Plus Eligibility Handbook Users

From: Vicki Jessup, Policy Section Chief
Bureau of Enrollment Policy and Systems

RE: **BadgerCare Plus Release 10-05**

Release Date: 12/16/10

EFFECTIVE DATE

The following policy additions or changes are effective 12/16/10 unless otherwise noted. **Yellow text** denotes new text. Text with a strike through it denotes deleted text.

All The Family Planning Waiver (FPW) was renamed “Family Planning Only Services (FPOS)” throughout the handbook.

All “EDS” and “Electronic Data Systems” was changed to “HP Enterprise Services” throughout the handbook.

Program Coverage (Chapters 38-47) > 40 Family Planning Only Services > 40.1 Family Planning Only Services Program The income limit for Family Planning Only Services (FPOS) increased to 300% of the FPL and there is no longer an upper age limit.

Old Text:

~~BC+ Family Planning Waiver program (FPW) provides limited benefits for family planning services for women and men with income at or below 200% of the Federal Poverty Level (FPL) and who are:~~

New Text:

BC+ **Family Planning Only Services program (FPOS)** provides limited benefits for family planning services for women and men with income at or below **300%** of the Federal Poverty Level (FPL) and who are:

Program Coverage (Chapters 38-47) > 40 Family Planning Only Services (FPOS) > BC+ 40.2 FPOS

Old Text:

~~FPW temporary enrollment through a presumptive eligibility determination provides family planning services beginning on the day that a qualified provider determines that the individual has income at or below 200% of the FPL, and is:~~

- ~~1. 15 years of age or older and under age 45, and~~
- ~~2. A Wisconsin resident, and~~
- ~~3. A citizen of the U.S., and~~
- ~~4. Not enrolled in BC+ without a premium or receiving other full benefit Medicaid.~~

The qualified provider should refer non-citizens to the Income Maintenance Agency (IM) for a BC+ eligibility determination.

FPW PE extends from the date that an individual is determined eligible by the

and is found eligible. Her FPOS is backdated to May 1, 2011.

**Program Coverage
(Chapters 38-47) > 40
Family Planning Only
Services (FPOS) > BC+
40.2 FPOS> 40.2.2
Qualified Providers**

Old Text (from 40.2.1):

If the member applies for ongoing FPW by the end of the second month following the month in which s/he was determined eligible for FPW PE, the ongoing FPW period begins the first of the month in which the member applied and is found eligible. The FPW temporary enrollment period ends the day before the members ongoing FPW period begins.

New Text (in new 40.2.2):

If the member applies for ongoing FPOS by the end of the month following the month in which s/he was determined eligible for FPOS TE, the ongoing FPOS period begins the first of the month in which the member applied and is found eligible. The FPOS temporary enrollment period ends the day before the members ongoing FPOS period begins.

**Program Coverage
(Chapters 38-47) > 40
Family Planning Only
Services (FPOS) > BC+
40.2 FPOS> 40.2.3 IM
Agency**

An introduction was added to 40.2 and the sections were renumbered.

Old Text (from 40.2.2):

If an individual applies for ongoing FPW at the IM agency on or before the last day of the FPW temporary enrollment period:

1. Verify the member is ~~presumptively eligible~~ by checking the temporary FPW ID card or checking ForwardHealth interChange for a medical status code of PF.
2. Consider the application filed if the member's name, address and signature are on the application.
3. If you are unable to finish processing the application, by the end of the FPW temporary enrollment period, submit an F-10110 to extend the FPW temporary enrollment for an additional calendar month.

New Text (in new 40.2.3):

If an individual applies for ongoing FPOS at the IM agency on or before the last day of the FPOS temporary enrollment period:

1. Verify the member is **Temporarily Eligible** by checking ForwardHealth interChange for a medical status code of PF.
2. Consider the application filed if the member's name, address and signature are on the application.
3. If you are unable to finish processing the application, by the end of the FPOS temporary enrollment period, submit an **F-10110** to extend the FPOS temporary enrollment for an additional calendar month.

**Program Coverage
(Chapters 38-47) > 40
Family Planning Only
Services (FPOS) > BC+
40.3 FPOS**

Old Text:

Eligibility for FPW begins on the first of the month of *application* , if all non-financial (40.4) and financial (40.5) eligibility requirements are met. ~~There is no option for a three-month backdate period for FPW.~~

New Text:

Eligibility for FPOS begins on the first of the month of *application* , if all non-financial (40.4) and financial (40.5) eligibility requirements are met. **FPOS may be backdated up to three months from the month of application**

**Program Coverage
(Chapters 38-47) > 40
Family Planning Only**

This subsection was renamed.

Old Text:

Services (FPOS) > BC+
40.6 FPOS> 40.6.2
Children 18 Years of
Age

40.6.2 Minors

New Text:

40.6.2 Children 18 Years of Age

Program Coverage
(Chapters 38-47) > 43
BadgerCare Plus Core
Plan > 43.4 BC+ Core
Plan Application> 43.4.1
How to Apply

The ESC fax number was changed to 888-409-1982.

New Text

Fax number: (888) 409-1982 (toll free)

Program Coverage
(Chapters 38-47) > 43
BadgerCare Plus Core
Plan > 43.4 BC+ Core
Plan Application> 43.4.2
Application Processing
Fee> 43.4.2.1 Waiver of
Application Fee

New Text

43.4.2.1 Waiver of Application Fee

The application processing fee is waived for applicants who meet the federal Housing and Urban Development (HUD) definition of homeless:

A homeless individual lacks a fixed, regular, and adequate nighttime residence; and s/he has a primary nighttime residence that is:

- A publicly supervised or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelter and transitional housing for the mentally ill);
- An institution that provides a temporary residence for individuals intended to be institutionalized or an inpatient facility for mental health and/or substance abuse; **or**
- A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

The application processing fee is waived for applicants who are eligible for Indian Health Services.

Program Coverage
(Chapters 38-47) > 45
BC+ Basic Plan > 45.2
Badgercare Plus Basic
Eligibility Criteria>
45.2.1.1 Processing
Core Plan Waitlist
Bypass Cases

The ESC fax number was changed to 888-409-1982.

New Text

Fax number: (888) 409-1982 (toll free)