

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

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To: BadgerCare Plus Eligibility Handbook Users

From: Debbie Waite, Deputy Bureau Director  
Bureau of Enrollment Policy and Systems

RE: **BadgerCare Plus Release 12-01**

Release Date: 03/21/12

**EFFECTIVE DATE**

The following policy additions or changes are effective 03/21/12 unless otherwise noted. **Yellow text** denotes new text. Text with a strike through it denotes deleted text.

**Non-Financial Requirements (Chapters 2-15) > 9 Verification > 9.2 Application**

**Old Text:**

Eligibility should not be denied for failure to provide the required verification until the later of:

- 44~~th~~ day after requesting verification, or
- 34~~st~~ day after the application filing date.

**New Text:**

Eligibility should not be denied for failure to provide the required verification until the later of:

- 10<sup>th</sup> day after requesting verification, or
- 30<sup>th</sup> day after the application filing date.

**Non-Financial Requirements (Chapters 2-15) > 9 Verification > 9.9 Mandatory Verification Item**

**New Text:**

The following items must be verified for BC+:

1. ~~SSN~~ (9.9.1)
2. Citizenship and Identity ([Chapter 4.2](#))
3. Immigrant Status ([9.9.2](#))
4. Pregnancy, if eligibility is based on the pregnancy ([9.9.3](#))
5. Medical Expenses (for deductibles only) ([9.9.4](#))
6. Documentation for Power of Attorney and Guardianship ([9.9.5](#))
7. Migrant worker's (eligibility in another state) ([12.3](#))
8. Income
9. Health Insurance Access (Chapter 7)
10. Health Insurance Coverage (Chapter 7)
11. Family Re-unification plan for Child Welfare Parents ([Chapter 10](#))
12. The placement status of a YEOHC ([Chapter 11](#)) on his/her 18th birthday
13. Tribal membership or Native American descent, to receive a premium exemption

**Financial Requirements (Chapters 16-24) > 16 Income > 16.4 Earned Income > 16.4.1 Specially Treated Wages**

**Old Text:**

~~Count the living allowance or stipend as earned income. Disregard any child care allowance to the extent it was used to meet child care expenses to participate in AmeriCorps. Disregard any basic health insurance policy, child care services, auxiliary aid and services to people with disabilities and the national service educational award of \$4,725 for each year of completed service.~~

**New Text:**

Disregard any benefit whether cash or in-kind, including but not limited to living allowance payments, stipends, food and shelter, clothing allowance, and educational awards or payments in lieu of educational awards. Disregard any child care allowance to the extent it was used to meet child care expenses to participate in AmeriCorps. Disregard any basic health insurance policy, child care services, auxiliary aid, and services to people with disabilities and the national service.

**Financial Requirements  
(Chapters 16-24) > 19  
Premiums > 19.10  
Premium Changes>  
19.10.2 Increased  
premium amount>  
19.10.2.1 Person adds:**

**Old Text:**

If the person add will cause an increase in the premium, CARES will not allow eligibility confirmation if the notice requirement cannot be met. Certify eligibility for new members by completing and returning the F-10110 (formerly DES 3070) for the days that cannot be confirmed in CARES.

- Mail:  
ForwardHealth iChange  
P.O. Box 7636  
Madison, WI 53707-7636  
Fax: (608) 221-8815
- E-mail: [veds3070@wisconsin.gov](mailto:veds3070@wisconsin.gov)
- Fax: (608) 221-8815

**New Text:**

If the person add will cause an increase in the premium, CARES will not allow eligibility confirmation if the notice requirement cannot be met. Certify eligibility for new members by completing and returning the F-10110 (formerly DES 3070) for the days that cannot be confirmed in CARES.

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**Program Coverage  
(Chapters 38-47) > 45 BC+  
Basic Plan > 45.3  
BadgerCare Plus Basic  
Enrollment Process>  
45.3.1 Introduction and  
Premiums**

Effective 11/01/11:

**Old Text:**

New enrollment in the BC+ Basic program has ended effective March 19, 2011. See 45.1.2 Enrollment Ending. ~~Effective August 5th 2011 (For September benefits), the premium was increased to \$250 from \$200.~~

~~The Enrollment Services Center (ESC) will be responsible for the administration of the Basic Plan. There is no application for the Basic Plan. Anyone who applies for the Core Plan and is put on the Waitlist will receive instructions on how to enroll in the Basic Plan with an initial premium payment slip (See Notification to Waitlist Members). Once the \$250 initial premium is paid, s/he will be enrolled in the Basic Plan. Initial premium payments can be made by credit card, debit card, electronic check, personal check, cashier check, certified check or money order via:~~

- ~~1. Using ACCESS to pay online with a credit card, debit card or electronic check;~~
- ~~2. Calling the ESC to pay online with a credit card, debit card or electronic~~

- check; or
3. ~~Mailing their \$250 premium payment with the payment slip to the address on the payment slip. (Please note: credit card or debit card information can also be provided on the payment slip. These payments will be made by the ESC fiscal staff using the ePayment Administrative Site.)~~

There is no other application process for the Basic Plan. No paper applications designed as applications for other BadgerCare Plus or Medicaid programs will be accepted and processed as a Basic Plan application. There is no signature required to enroll in the Basic Plan. An **SSN** is required before a Basic Plan enrollment request can be processed. If an individual on the Waitlist makes the initial premium payment online, s/he will not be able to complete the process without entering an SSN if one was not provided when the individual applied for the Core Plan.

**New Text:**

New enrollment in the BC+ Basic program ended effective March 19, 2011. See [45.1.2 Enrollment Ending](#).

There is no other application process for the Basic Plan. No paper applications designed as applications for other BadgerCare Plus or Medicaid programs will be accepted and processed as a Basic Plan application. There is no signature required to enroll in the Basic Plan. An **SSN** is required before a Basic Plan enrollment request can be processed. If an individual on the Waitlist makes the initial premium payment online, s/he will not be able to complete the process without entering an SSN if one was not provided when the individual applied for the Core Plan.

**Program Coverage  
(Chapters 38-47) > 45 BC+  
Basic Plan > 45.3  
BadgerCare Plus Basic  
Enrollment Process>  
45.3.2 Ongoing Coverage**

Effective 11/01/11:

**Old Text:**

~~In order to stay enrolled in the Basic Plan, members must submit a \$250 monthly premium payment by the 5th of each month for the next month's coverage. The premium increased from \$200 to \$250 effective with the premium due August 5th for September benefits in 2011. A payment slip will be mailed to the member on or around the 20th of the month before their next premium payment is due. The member can make their ongoing premium payment using the same methods as making their initial premium payment. If using ACCESS, the member will be able to pay from the 20th of the current month to the 10th of the next month. The payment must be received before the 15th in order to remain eligible for the next month.~~

**New Text:**

In order to stay enrolled in the Basic Plan, members must submit a **\$325** monthly premium payment by the 5th of each month for the next month's coverage. A payment slip will be mailed to the member on or around the 20th of the month before their next premium payment is due. The member can make their ongoing premium payment by credit card, debit card, electronic check, personal check, cashier check, certified check or money order. See [45.7 BadgerCare Plus Basic Premium Payments](#).

**Tables (Chapters 48-52) >  
48 Premiums > 48.1  
Premiums> 48.1.3  
Premiums for groups with  
Self Employment Income**

Effective 02/01/12:

**Old Text:**

Family Size	Above 200% to 210%	210% to 220%	220% to 230%	230% to 240%	240% to 250%	250% to 260%	260% to 270%	270% to 280%	280% to 290%	290% to 300%	300%
1	<del>\$90</del>	<del>\$96</del>	<del>\$99</del>	<del>\$104</del>	<del>\$108</del>	<del>\$113</del>	<del>\$117</del>	<del>\$122</del>	<del>\$127</del>	<del>\$131</del>	<del>\$136.13</del>
2	<del>\$122</del>	<del>\$128</del>	<del>\$134</del>	<del>\$140</del>	<del>\$147</del>	<del>\$153</del>	<del>\$159</del>	<del>\$165</del>	<del>\$171</del>	<del>\$177</del>	<del>\$183.08</del>
3	<del>\$154</del>	<del>\$162</del>	<del>\$169</del>	<del>\$177</del>	<del>\$185</del>	<del>\$193</del>	<del>\$200</del>	<del>\$208</del>	<del>\$216</del>	<del>\$223</del>	<del>\$231.63</del>
4	<del>\$186</del>	<del>\$195</del>	<del>\$204</del>	<del>\$214</del>	<del>\$223</del>	<del>\$232</del>	<del>\$242</del>	<del>\$251</del>	<del>\$260</del>	<del>\$270</del>	<del>\$279.38</del>
5	<del>\$218</del>	<del>\$228</del>	<del>\$239</del>	<del>\$250</del>	<del>\$261</del>	<del>\$272</del>	<del>\$283</del>	<del>\$294</del>	<del>\$305</del>	<del>\$316</del>	<del>\$327.13</del>
6	<del>\$249</del>	<del>\$262</del>	<del>\$274</del>	<del>\$287</del>	<del>\$299</del>	<del>\$312</del>	<del>\$324</del>	<del>\$337</del>	<del>\$349</del>	<del>\$362</del>	<del>\$374.08</del>
7	<del>\$281</del>	<del>\$295</del>	<del>\$309</del>	<del>\$324</del>	<del>\$338</del>	<del>\$352</del>	<del>\$366</del>	<del>\$380</del>	<del>\$394</del>	<del>\$408</del>	<del>\$422.63</del>
8	<del>\$313</del>	<del>\$329</del>	<del>\$344</del>	<del>\$360</del>	<del>\$376</del>	<del>\$391</del>	<del>\$407</del>	<del>\$423</del>	<del>\$439</del>	<del>\$454</del>	<del>\$470.38</del>
9	<del>\$345</del>	<del>\$362</del>	<del>\$379</del>	<del>\$397</del>	<del>\$414</del>	<del>\$431</del>	<del>\$449</del>	<del>\$466</del>	<del>\$483</del>	<del>\$500</del>	<del>\$518.13</del>
10	<del>\$377</del>	<del>\$396</del>	<del>\$414</del>	<del>\$433</del>	<del>\$452</del>	<del>\$471</del>	<del>\$490</del>	<del>\$509</del>	<del>\$528</del>	<del>\$547</del>	<del>\$568.88</del>

**New Text:**

**Self-Employed Premiums**

Group Size	200-210%	210-220%	220-230%	230-240%	240-250%	250-260%	260-270%	270-280%	280-290%	290-300%	300%
1	\$93	\$97	\$102	\$107	\$111	\$116	\$121	\$125	\$130	\$134	\$139.63
2	\$126	\$132	\$138	\$144	\$151	\$157	\$163	\$170	\$176	\$182	\$189.13
3	\$159	\$167	\$174	\$182	\$190	\$198	\$206	\$214	\$222	\$230	\$238.63
4	\$192	\$201	\$211	\$220	\$230	\$240	\$249	\$259	\$268	\$278	\$288.13
5	\$225	\$236	\$247	\$258	\$270	\$281	\$292	\$303	\$315	\$326	\$337.63
6	\$258	\$270	\$283	\$296	\$309	\$322	\$335	\$348	\$361	\$374	\$387.13
7	\$291	\$305	\$320	\$334	\$349	\$363	\$378	\$392	\$407	\$422	\$436.63
8	\$324	\$340	\$356	\$372	\$388	\$405	\$421	\$437	\$453	\$469	\$486.13
9	\$357	\$374	\$392	\$410	\$428	\$446	\$464	\$482	\$499	\$517	\$535.63
10	\$390	\$409	\$429	\$448	\$468	\$487	\$507	\$526	\$546	\$565	\$585.13