



**DEPARTMENT OF CHILDREN
AND FAMILIES**
Secretary Eloise Anderson
201 East Washington Avenue, Room G200
P.O. Box 8916
Madison, WI 53708-8916
Telephone: 608-266-8684
Fax: 608-261-6972
www.dcf.wisconsin.gov

DEPARTMENT OF HEALTH SERVICES
Secretary Kitty Rhoades
1 West Wilson Street
P.O. Box 7850
Madison, WI 53707-7850
Telephone: (608) 266-9622
FAX: (608) 266-7882
www.dhs.wisconsin.gov

**State of Wisconsin
Governor Scott Walker**

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

FROM: Shawn Smith, Bureau Director
Bureau of Enrollment Policy & Systems
Division of Health Care Access and Accountability

DHS OPERATIONS MEMO		
No:	DHS 14-24	
DATE:	JUNE 05, 2014	
FS	<input type="checkbox"/>	MA
SC	<input type="checkbox"/>	CTS
		BC+
		FSET
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SUBJECT: Systems Updates to Support Changes in Extensions Policies

CROSS REFERENCE: Operations Memo [14-03](#)
BC+ Eligibility Handbook [Chapter 18](#)

EFFECTIVE DATE: June 30, 2014

PURPOSE:

This memo describes CARES updates to support recent changes in Extensions policies, including the length of earned income Extensions and new policies regarding Restrictive Reenrollment Periods (RRPs) for adults.

BACKGROUND:

As described in Operations Memos [14-03](#), recent changes to BadgerCare Plus included a change in the length of BC+ Extensions so that all Extensions started in 2014 would be set for four months. Recent federal legislation extended the previous policy of setting 12-month earned income and four-month child or spousal support extensions through March 31, 2015.

In addition, as part of BC+ changes for 2014, Wisconsin requested a federal waiver to collect premiums from adults in Extensions. Under the terms of this waiver, adults in Extensions who fail to pay a required premium are subject to the following Restrictive Re-enrollment Period (RRP) policy:

- Effective April 1, 2014, RRP for adults who fail to pay a premium will be for three months.
- After the three-month RRP is served, the arrears will be forgiven and the adult may re-enroll.
- Adults will not automatically be re-opened at the end of the RRP. They must request to be re-enrolled.
- Adults will also have the option to re-enroll within the three-month period as long as they pay all premiums due and request to re-enroll prior to the end of the RRP.
- As with current policy, members whose income decreases to an amount that would not require a premium will be removed from the RRP and automatically re-enrolled in BC+. The members will not have to request to be re-enrolled in this circumstance.

If the member requests to re-enroll during the RRP, he or she must pay all owed premiums and eligibility will be reinstated back to the beginning of the RRP. The member may not choose which months during the RRP to have eligibility reinstated.

After the RRP has been served, eligibility can be reinstated as of any month after the end of the RRP until the end of the Extension. For example, if an RRP ends June 30th for an Extension that runs through December, a member could request in November to be reinstated starting July 1st. However, members must pay owed premiums for any months of coverage and the months of eligibility must be consecutive. So using the same example, the member could not request to be reinstated for July, September, October and November, but not August.

➤ **Note:** The RRP policies described above apply to all adults in extensions who are subject to RRP, including those for whom an RRP started prior to April 1, 2014. If the member has served at least three months in an RRP as of April 1, 2014, the RRP may be ended and the member may reenroll at their request. If a 12 month RRP has been set by CARES, workers must override the end date of the RRP to the last day of the third month of the RRP, but only if the member has made a request to re-enroll.

CARES:

12-MONTH EXTENSIONS:

Effective June 30, 2014, CARES will set 12-month earned income Extensions. Any earned income Extension set between February 1 and June 30, 2014 that was originally set as a four-month extension has been updated systematically to a 12-month extension.

RESTRICTIVE RE-ENROLLMENT PERIODS FOR ADULTS:

Effective for RRP starting in August 2014 or later, CARES will set three-month RRP.

If an adult requests to re-enroll during the RRP, workers should follow the current process for collecting all owed premiums and lifting the RRP.

If an adult requests to enroll after the end of the RRP, the worker must enter the re-request and the re-request date on the “BadgerCare Plus Restrictive Re-enrollment Period Information” (BC+RRP) page. This page has been updated with new fields to record this information.

Effective June 30, 2014, the CWW BC+ RRP page will display four new fields:

1. **Individual Type (Adult or Child).** Because children do not have to request to re-enroll at the end of the RRP, this indicator distinguishes whether the RRP is for an adult or a child.

If the RRP is for a child, the BC+ Re-Request field, Re-Request Reason and Re-request Date fields will all be defaulted to spaces and disabled. If the RRP is for an adult, the BC+ Re-request date field will be enabled.

2. **BC+ Re-request.** This field tracks whether the adult has requested to re-enroll after the RRP.

If the RRP has not been lifted or deleted, and the field is marked as “No”, CARES will continue to fail the adult for any category of BC+ that requires a premium.

- When an RRP is initially imposed for an adult, the BC+ Re-request will be defaulted to a “No”. The Re-request date and reason will be disabled.
- If the adult requests to re-enroll after the end of an RRP, the worker must update the response to a “Yes”.
- If the adult becomes eligible for BC+ or MA without a premium obligation, the field will be changed systematically to a “Yes”.

If an RRP is lifted or deleted, including situations in which member has paid owed premiums and re-enrolled during the RRP, CARES will not fail the individual based on the entries in this field.

3. **Re-request reason.** This field captures the reason for the re-request. Workers may enter either of the following values:

- Client re-request
- Worker override

The system will automatically set the reason to “Eligibility with no premium” if the adult becomes eligible for health care without a premium,

4. **Re-request date.** This field captures the date the member requested their benefits be reinstated.

As described in more detail above, eligibility can be reinstated as of any month after the end of the RRP until the end of the Extension, but members must pay back premiums for any months of coverage. Coverage must be for consecutive months. The re-request date cannot be a future date.

For example, if a member's RRP ends in February but they do not re-request until May and want their benefits to start in May, the re-request date entered should be the date they are requesting in May. If they want their benefits to start in April, the re-request date entered should be April 1st.

BadgerCare Plus Restrictive Re-enrollment Period Information Cancel Reset

Effective Period

Delete Reason: Last Updated: 03/18/2014

Additional Information

Individual: RRP Sequence: 1
 Individual Type: Adult
 Restrictive Re-enrollment Begin Date: 04/01/2014 Restrictive Re-enrollment End Date: 06/30/2014
 Override Restrictive Re-enrollment End Date: Override Reason:

Re-request Information

BadgerCare Plus Re-request: No Re-request Date:
 Re-request Reason:

Case Comments

Case Comments (Relevant to the restrictive re-enrollment period):

Current Size = 0 characters (200 characters max.)

Cancel

MED STAT CODE CHANGES

To improve fiscal reporting, there will be minor changes to the Medical Status codes for adults in extensions. In addition, a new code is needed for interChange to accept premiums for extension adults with incomes between 100% and 133% FPL. Two codes will be ended and replaced with 4 new ones. The changes will be made to CARES effective June 30, 2014. Existing extension cases will then be run through a mass change to convert codes for most adults in extensions.

The codes that will be ending are:

- X6 Earnings Extension - 12 Mo (Adults) > 100 - 133% FPL, or tribal/disabled
- X7 Child/Spousal Support Extension - 4 Mo (Adults) > 100 - 133% FPL, or tribal/disabled

The new codes will be:

- JM Earnings Extension, Disabled Adult, > 100% FPL,
- JJ Child/Spousal Support Extension, Disabled Adult, > 100% FPL,
- JC Earnings Extension, Non-Disabled Adult, > 100%, ≤ 133% FPL
- JL Child/Spousal Support Extension, Non-Disabled Adult, > 100%, ≤ 133% FPL

The two codes that will be remaining are:

- 9R Earnings Extension, Non-Disabled Adult, > 133% FPL
- 9S Child/Spousal Support Extension, Non-Disabled Adult, > 133%

Note: The assignment of extension Medical Status codes for Tribal members will be based on income and disability status, not tribal status. Tribal members, children and grandchildren of Tribal members, and individuals eligible to receive Indian Health Services will continue to remain exempt from paying a premium even if they are in a premium-paying code.

CONTACTS:

BEPS CARES Information & Problem Resolution Center

*Program Categories – FS – FoodShare, MA – Medicaid, BC+ – BadgerCare Plus, SC – SeniorCare, CTS – Caretaker Supplement, FSET – FoodShare Employment and Training.

DHS/DHCAA/BEPS/AA