



**State of Wisconsin
Governor Scott Walker**

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

**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 15-19

DATE: 6/05/2015

FS	<input type="checkbox"/>	MA	<input checked="" type="checkbox"/>	BC+	<input type="checkbox"/>
SC	<input type="checkbox"/>	CTS	<input type="checkbox"/>	FSET	<input type="checkbox"/>

SUBJECT: Disability Determinations for the Include, Respect, I Self-Direct (IRIS) Program

CROSS REFERENCE: MEH 29, 30, 31, 37, 38; Operations Memo 09-51 and [10-48](#)

EFFECTIVE DATE: IMMEDIATELY

PURPOSE:

This memorandum communicates a policy change relating to enrolling certain Medicaid members in the Include, Respect, I Self-Direct (IRIS) program who have not been determined to be disabled by the Disability Determination Bureau (DDB).

BACKGROUND:

Individuals under age 65, who are eligible for certain categories of full-benefit Medicaid that do not require a disability determination (e.g., BadgerCare Plus Standard Plan, Well Woman Medicaid, Adoption Assistance Medicaid or Foster Care Medicaid etc.), are required to obtain a disability determination in order to be enrolled in the Home and Community Based Waivers under Group A eligibility rules.

Family Care policy once had the same requirement but changed in September 2009 (see Ops Memo [09-51](#)) to allow individuals eligible for these Medicaid programs to enroll without a disability determination. Program of All-Inclusive Care (PACE) and Partnership policy aligned with this requirement (see Ops Memo [10-48](#)). Since IRIS is a program operating alongside the

Family Care Waiver, the requirements for IRIS are now being aligned with Family Care managed care.

POLICY:

Effective immediately, individuals may be enrolled in IRIS without first obtaining a disability determination from DDB if they are under age 65 and are:

- a) Functionally eligible for a nursing home level of care *and*
- b) Eligible for one of the following Medicaid/BadgerCare categories:
 - BadgerCare Plus Standard Plan
 - Well Woman Medicaid
 - Medicaid through Adoption Assistance or
 - Foster Care Medicaid

Individuals must still be either age 65 or older or determined blind or disabled by DDB in order to be eligible for the Community Options Program (COP) and Community Integration Program (CIP) Home and Community-Based Waivers.

CARES:

CARES currently requires that individuals under age 65 be determined blind or disabled to be eligible for IRIS. Until CARES can be changed to support the new policy, code the individual as presumptively disabled and document in case comments the action you have taken and why, as long as (s)he qualifies for one of the Medicaid/BadgerCare categories listed above.

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/FM