# STATE OF WISCONSIN Department of Health Services Division of Medicaid Services



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Date: January 31, 2024 DMS Operations Memo 24-02

To: Income Maintenance Supervisors

Income Maintenance Lead Workers

Income Maintenance Staff

Affected Programs:	
	☐ Caretaker Supplement
FoodShare	☐ FoodShare Employment
	and Training
⊠ SeniorCare	

From: Jonelle Brom, Director

Bureau of Eligibility Operations & Training

Division of Medicaid Services Department of Health Services

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## 2024 Federal Poverty Level Changes for ForwardHealth Programs

#### **CROSS REFERENCE**

- BadgerCare Plus Eligibility Handbook, <u>Section 48.1 BadgerCare Plus Premium Tables</u> and <u>Section 50.1 Federal Poverty Level Table</u>
- Medicaid Eligibility Handbook, <u>Section 39.5 Federal Poverty Level Table</u>, and <u>Section 39.11</u>
   <u>SeniorCare Income Limits and Participation Levels</u>

#### **EFFECTIVE DATE**

Refer to the specific effective dates listed with the individual tables below.

#### **PURPOSE**

This operations memo provides income maintenance (IM) agencies with information about how to implement the 2024 Federal Poverty Level (FPL) income guidelines for the BadgerCare Plus, Medicaid and SeniorCare programs, as well as the updated tables, effective dates, and cross references for these programs.

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#### **BACKGROUND**

The U.S. Department of Health and Human Services published its annual update of the Poverty Income Guidelines, also called the Federal Poverty Level Guidelines, on January 12, 2024. These guidelines are available at the following website: <a href="https://aspe.hhs.gov/poverty-guidelines">https://aspe.hhs.gov/poverty-guidelines</a>.

Income limits and other amounts used in eligibility determinations for BadgerCare Plus, certain categories of Medicaid, and SeniorCare are based on the FPL. The increase in the FPL will result in changes to the BadgerCare Plus, Medicaid, and SeniorCare income limits as specified in this memo. However, the increase in the FPL will not result in changes to BadgerCare Plus premium amounts, other than increasing the 5% premium caps for children.

This year's increase in FPL will not change the 5% copay limit for BadgerCare Plus, Medicaid for the Elderly Blind or Disabled (EBD Medicaid), and SSI Medicaid members.

#### **POLICY**

Income limits and other amounts based on the FPL will be effective on the date provided with each individual table. The BadgerCare Plus Eligibility Handbook and Medicaid Eligibility Handbook will be updated in future handbook releases to reflect these changes.

The annual FPL mass change will automatically redetermine eligibility using the new FPL income guidelines. The mass change will occur during the weekend of February 3, 2024. The eligibility redetermination will affect the March 2024 benefit month. Any cases that could not be automatically updated during the mass change will have their eligibility redetermined for March and ongoing benefits after the mass change.

The new FPL income guidelines will be used for applications or when a person is added to a case and eligibility is determined in CARES Worker Web (CWW) on or after February 1, 2024. For ongoing cases, the new FPL limits will also be used when eligibility is determined retroactively for the months of February and March of 2024.

When ongoing cases are updated in CWW with the new income limits, the earliest affected benefit month will be March 2024. Workers who become aware of cases that could have benefited from the higher limits in February or March should redetermine eligibility with the 2024 FPL limits listed in the tables below.

#### **BADGERCARE PLUS AND PREMIUMS**

The updated BadgerCare Plus income limits (based on the 2024 FPL guidelines) are effective on February 1, 2024. Some BadgerCare Plus cases failing eligibility for February 2024 will become eligible due to the increase in the income limits.

Premiums are currently suspended because of temporary policies during the COVID-19 pandemic. As a result of the updated income limits, when premiums resume, a portion of the BadgerCare Plus families who previously paid premiums for children will no longer owe premiums or will owe lower premiums.

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The 2024 5% premium caps for BadgerCare Plus children will be effective February 1, 2024. Again, premiums are currently suspended, but when premiums resume, the 2024 5% premium caps will be in effect.

# MEDICARE SAVINGS PROGRAMS, MEDICAID PURCHASE PLAN, AND MEDICALLY NEEDY INCOME LIMIT

For Medicare Savings Programs categories and Medicaid Purchase Plan (MAPP), the new income limits based on the 2024 FPL guidelines are effective February 1, 2024. The medically needy income limit for Supplemental Security Income (SSI)-Related Medicaid is also effective February 1, 2024.

A few Specified Low-Income Medicare Beneficiaries may become eligible as Qualified Medicare Beneficiaries (QMB) due to the increase in the income limits.

A few Specified Low-Income Medicare Beneficiary Plus (SLMB+) members may become eligible as Specified Low-Income Medicare Beneficiaries due to the increase in the income limits. Individuals who are open under the Specified Low-Income Medicare Beneficiary assistance group will have their eligibility redetermined using the new FPLs automatically as part of the annual FPL mass change.

A few individuals who applied in January and were denied SLMB+ benefits may become eligible as a Specified Low-Income Beneficiary due to the increased income limits.

A few individuals who applied in January and were denied SLMB+ benefits may become eligible for SLMB+ due to the increased income limits.

# SPOUSAL IMPOVERISHMENT COMMUNITY SPOUSE INCOME ALLOWANCE AND SPOUSAL IMPOVERISHMENT FAMILY MEMBER INCOME ALLOWANCE

Changes to the spousal impoverishment community spouse income allowance minimum allocation, shelter base amount, and spousal impoverishment family member income allowance are effective July 1, 2024. A separate operations memo will be issued in late spring 2024 with information about the changed amounts and the mass change that will affect July benefits.

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### **NEW INCOME LIMITS**

The following tables show the new income limits for BadgerCare Plus and specific categories of Medicaid.

## QUALIFIED MEDICARE BENEFICIARY (QMB)

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, Section 39.5 Federal Poverty Level Table

<b>Group Size</b>	2023 Limit (100%)	<b>2024</b> Limit (100%)
1	\$1,215.00	\$1,255.00
2	\$1,643.33	\$1,703.33

## QUALIFIED DISABLED AND WORKING INDIVIDUAL (QDWI)

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, Section 39.5 Federal Poverty Level Table

<b>Group Size</b>	2023 Limit (200%)	<b>2024</b> Limit (200%)
1	\$2,430.00	\$2,510.00
2	\$3,286.66	\$3,406.66

## SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, Section 39.5 Federal Poverty Level Table

<b>Group Size</b>	2023 Limit (120%)	<b>2024</b> Limit (120%)
1	\$1,458.00	\$1,506.00
2	\$1,972.00	\$2,044.00

## SPECIFIED LOW-INCOME MEDICARE BENEFICIARY PLUS (SLMB+)

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, Section 39.5 Federal Poverty Level Table

<b>Group Size</b>	2023 Limit (135%)	<b>2024</b> Limit (135%)
1	\$1,640.25	\$1,694.25
2	\$2,218.50	\$2,299.50

## MEDICAID PURCHASE PLAN (MAPP)

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, Section 39.5 Federal Poverty Level Table

Income limits for MAPP are based on 250% of the FPL for applicants and members. Individuals above 100% of the FPL may need to pay a premium in order to participate in the MAPP program. However, premiums are currently suspended.

Group Size	2023 Limit (250%)	<b>2024</b> Limit (250%)	2023 MAPP Premium Payment Threshold (100%)	2024 MAPP Premium Payment Threshold (100%)
1	\$3,037.50	\$3,137.50	\$1,215.00	\$1,255.00
2	\$4,108.33	\$4,258.33	\$1,643.33	\$1,703.33
3	\$5,179.18	\$5,379.18	\$2,071.67	\$2,151.67
4	\$6,250.00	\$6,500.00	\$2,500.00	\$2,600.00
5	\$7,320.83	\$7,620.83	\$2,928.33	\$3,048.33
6	\$8,391.68	\$8,741.68	\$3,356.67	\$3,496.67
7	\$9,462.50	\$9,862.50	\$3,785.00	\$3,945.00
8	\$10,533.33	\$10,983.33	\$4,213.33	\$4,393.33
9	\$11,604.18	\$12,104.18	\$4,641.67	\$4,841.67
10	\$12,675.00	\$13,225.00	\$5,070.00	\$5,290.00
For each additional person	\$1,070.83	\$1,120.83	\$428.33	\$448.33

## MEDICALLY NEEDY INCOME LIMIT FOR SSI-RELATED MEDICAID

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, <u>Section 39.4.1 Elderly, Blind, or Disabled Assets</u> and Income Table

<b>Group Size</b>	2023 Limit (100%)	<b>2024</b> Limit (100%)
1	\$1,215.00	\$1,255.00
2	\$1,643.33	\$1,703.33

# FAMILY PLANNING ONLY SERVICES AND FAMILY PLANNING ONLY SERVICES PRESUMPTIVE ELIGIBILITY

• Effective Date: February 1, 2024

• Cross Reference: BadgerCare Plus Eligibility Handbook, Section 50.1 Federal Poverty Level Table

	2023 Limit	<b>2024</b> Limit
	Family Planning Only	Family Planning Only
Group Size	Services (FPOS) and FPOS	Services (FPOS) and FPOS
	Presumptive Eligibility	Presumptive Eligibility
	(306%)	(306%)
1	\$3,717.90	\$3,840.30

### BADGERCARE PLUS INCOME LIMITS

• Effective Date: February 1, 2024

• Cross Reference: BadgerCare Plus Eligibility Handbook, <u>Section 7.1 Health Insurance Conditions of Eligibility</u>, <u>Section 16.1.2 Income Under MAGI Rules</u>, <u>Section 19.1 BadgerCare Plus Premiums</u>, and <u>Section 25.8.1 Backdated Eligibility</u>)

Group Size	<b>2024</b> Limit Adults (100%)	2024 Limit Children Over Age 5 (156%)	<b>2024</b> Limit Children Ages 1 to 5 (191%)	2024 Children's Premium Payment Threshold (201%)	2024 Limit for Pregnant Women and Children (306%)
1	\$1,255.00	\$1,957.80	\$2,397.05	\$2,522.55	\$3,840.30
2	\$1,703.33	\$2,657.19	\$3,253.36	\$3,423.69	\$5,212.19
3	\$2,151.67	\$3,356.61	\$4,109.69	\$4,324.86	\$6,584.11
4	\$2,600.00	\$4,056.00	\$4,966.00	\$5,226.00	\$7,956.00
5	\$3,048.33	\$4,755.39	\$5,822.31	\$6,127.14	\$9,327.89
6	\$3,496.67	\$5,454.81	\$6,678.64	\$7,028.31	\$10,699.81
7	\$3,945.00	\$6,154.20	\$7,534.95	\$7,929.45	\$12,071.70
8	\$4,393.33	\$6,853.59	\$8,391.26	\$8,830.59	\$13,443.59
9	\$4,841.67	\$7,553.01	\$9,247.59	\$9,731.76	\$14,815.51
10	\$5,290.00	\$8,252.40	\$10,103.90	\$10,632.90	\$16,187.40
For each additional person	\$448.33	\$699.39	\$856.31	\$901.14	\$1,371.89

## **SENIORCARE**

• Effective Date: February 1, 2024

• Cross Reference: Medicaid Eligibility Handbook, <u>Section 39.11 SeniorCare Income Limits and Participation Levels</u>

## Level 1 Annual Income No Greater Than 160% of the Federal Poverty Level

<b>Group Size</b>	2023 (160%)	<b>2024</b> (160%)
1	\$23,328.00	\$24,096.00
2	\$31,552.00	\$32,704.00

# Level 2a Annual Income Above 160% but No Greater Than 200% of the Federal Poverty Level

<b>Group Size</b>	2023 160%–200%	<b>2024</b> 160%–200%
1	\$23,329 to \$29,160	\$24,097 to \$30,120
2	\$31,553 to \$39,440	\$32,705 to \$40,880

# Level 2b Annual Income Above 200% but No Greater Than 240% of the Federal Poverty Level

<b>Group Size</b>	2023 200%–240%	<b>2024</b> 200%–240%
1	\$29,161 to \$34,992	\$30,121 to \$36,144
2	\$39,441 to \$47,328	\$40,881 to \$49,056

## Level 3 Annual Income Above 240% of the Federal Poverty Level

<b>Group Size</b>	2023 > 240%	<b>2024</b> > 240%			
1	\$34,993 or greater	\$36,145 or greater			
2	\$47,329 or greater	\$49,057 or greater			

#### BADGERCARE PLUS PREMIUMS

# **Ongoing Cases**

The increase in the premium caps for children is effective March 1, 2024; however, premiums are currently suspended.

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## **New Applications**

The increase in the premium caps for children newly eligible for BadgerCare Plus will be effective February 1, 2024, for those confirmed on or after February 1, 2024. However, premiums are currently suspended.

## 5% Premium Caps for Children

• Effective Date: February 1, 2024

• Cross Reference: BadgerCare Plus Eligibility Handbook, <u>Section 48.1.3 Five Percent Premium</u> Caps for Children

Note: Premiums for families with incomes below 300% are rounded down to the nearest dollar.

Grou p Size	201– 211%	211– 221%	221– 231%	231– 241%	241– 251%	251- 261%	261– 271%	271– 281%	281– 291%	291– 301%	301% - 306%
1	\$126	\$132	\$138	\$144	\$151	\$157	\$163	\$170	\$176	\$182	\$188
2	\$171	\$179	\$188	\$196	\$205	\$213	\$222	\$230	\$239	\$247	\$256
3	\$216	\$227	\$237	\$248	\$259	\$270	\$280	\$291	\$302	\$313	\$323
4	\$261	\$274	\$287	\$300	\$313	\$326	\$339	\$352	\$365	\$378	\$391
5	\$306	\$321	\$336	\$352	\$367	\$382	\$397	\$413	\$428	\$443	\$458
6	\$351	\$368	\$386	\$403	\$421	\$438	\$456	\$473	\$491	\$508	\$526
7	\$396	\$416	\$435	\$455	\$475	\$495	\$514	\$534	\$554	\$573	\$593
8	\$441	\$463	\$485	\$507	\$529	\$551	\$573	\$595	\$617	\$639	\$661
9	\$486	\$510	\$535	\$559	\$583	\$607	\$631	\$656	\$680	\$704	\$728
10	\$531	\$558	\$584	\$610	\$637	\$663	\$690	\$716	\$743	\$769	\$796
11	\$576	\$605	\$634	\$662	\$691	\$720	\$748	\$777	\$806	\$834	\$863
12	\$621	\$652	\$683	\$714	\$745	\$776	\$807	\$838	\$869	\$900	\$931
13	\$666	\$699	\$733	\$766	\$799	\$832	\$865	\$899	\$932	\$965	\$998
14	\$711	\$747	\$782	\$818	\$853	\$888	\$924	\$959	\$995	\$1,030	\$1,066

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# **CONTACTS**

BEOT CARES Problem Resolution Team

DHS/DMS/BEEP/NAH DHS/DMS/BEOT/JN