

Express Enrollment Training

For Partners, Providers, and Qualified Hospitals

Division of Medicaid Services Bureau of Enrollment Policy and Systems November 8, 2018



This presentation meets the Express Enrollment training requirement for qualified hospitals, providers, and partners that are approved by ForwardHealth to complete Express Enrollment applications.



Agenda

- Express Enrollment Basics
 - o What is Express Enrollment?
 - o Who Can Provide Express Enrollment?
 - o Who is Eligible for Temporary Enrollment?
 - o How Long is Temporary Enrollment?
 - Important Reminders



Agenda

- ACCESS for Partners and Providers (APP)
 - Getting Started
 - Setting up a User Account in APP
 - Starting in APP
 - Before Starting an Express Enrollment Application
 - Express Enrollment Application
 - Temporary ForwardHealth Identification Card
- Applying for Ongoing Benefits
- Resources



Express Enrollment Basics



What is Express Enrollment?

- In Wisconsin, it is a streamlined eligibility determination for temporary enrollment in BadgerCare Plus or Family Planning Only Services.
 - It is based on preliminary household and financial information provided by the applicant.
 - It allows eligible applicants immediate health care coverage for a short period of time until an application for ongoing coverage is completed and processed.



What is Express Enrollment?

- Express Enrollment (EE): The process of making a presumptive eligibility determination to temporarily enroll an individual in BadgerCare Plus or Family Planning Only Services.
- Presumptive eligibility (PE): The determination of whether or not an applicant is eligible to temporarily enroll in BadgerCare Plus or Family Planning Only Services.
- **Temporary enrollment:** Short-term eligibility for BadgerCare Plus or Family Planning Only Services.



Who Can Provide

Express Enrollment?

- Qualified hospitals, providers, and partners that are:

 Approved by ForwardHealth.
 Have received Express Enrollment training.
- Refer to the <u>ACCESS Handbook, section 12.3</u>
 <u>Becoming an Express Enrollment User</u> for details about getting approved by ForwardHealth to complete Express Enrollment applications.



Who Can Provide Express Enrollment?

	Can make PE determinations for:			
Qualified	Children	Pregnant	Family Planning	Adults, Parents, and
Entities:	Children	women	Only Services	Caretakers
Qualified Hospitals*	X	x	X	X
Providers	X	x	X	
Partners	X			

*Only qualified hospital staff can make PE determinations at qualified hospital locations. Thirdparty contractors are **not** allowed to make PE determinations for a qualified hospital, though they can assist an applicant with completing the application for ongoing coverage.

Note: Former foster care youth will fall under an applicable population above, but income will not be counted.

Eligibility for Temporary Enrollment in BadgerCare Plus: Children

Children must meet the following criteria:

• Be age 18 or younger.

Note: Children younger than age 18 must apply with a parent or guardian signing the application unless the child is living independently.

 Be a U.S. citizen or lawfully present in the U.S.
 Note: For more information, refer to the <u>BadgerCare Plus</u> <u>Handbook, section 4.3 Immigrants</u>.

Eligibility for Temporary Enrollment in BadgerCare Plus: Children

- Have household income that is at or below the federal poverty level (FPL) for the child's age:
 - Younger than age 1: 306% of the FPL
 - Ages 1 through 5: 191% of the FPL
 - Ages 6 through 18: 156% of the FPL

For FPL charts, refer to the <u>BadgerCare Plus Handbook, section 50.1 Federal</u> <u>Poverty Level Table</u>

Eligibility for Temporary Enrollment in BadgerCare Plus: Pregnant Women

Pregnant women must meet the following criteria:

- Be a U.S. citizen or lawfully present in the U.S.
 Note: For more information, refer to the <u>BadgerCare Plus Handbook</u>, <u>section 4.3 Immigrants</u>.
- Have household income at or below 306% of the FPL.

Note: Individuals under age 19 who are pregnant will be tested against the pregnant women EE eligibility criteria and will be eligible for pregnant women EE covered services, even if it is a partner making the PE determination.

Eligibility for Temporary Enrollment in BadgerCare Plus: Adults

Adults must meet the following criteria:

- Be a parent, caretaker, or person age 19–64 with no minor dependents in the home.
- Have household income at or below 100% of the FPL.

Eligibility for Temporary Enrollment in BadgerCare Plus: Adults

- Meet one of the citizenship/immigration requirements:
 - o Is a U.S. citizen
 - $\circ~$ Has been lawfully residing in the U.S. for at least five years
 - Is lawfully residing in the U.S. and a refugee or seeking asylum
 - o Is from Cuba or Haiti and lawfully residing in the U.S.
 - Is lawfully residing in the U.S. under one of the eligible immigration statuses

Note: For more information, refer to the <u>BadgerCare Plus Handbook</u>, <u>section 4.3 Immigrants</u>.

Eligibility for Temporary Enrollment in Family Planning Only Services

An individual must meet the following criteria:

Have income that is at or below 306% of the FPL

Note: Regardless of living situation, individuals applying for Family Planning Only Services will always be a household size of one

Eligibility for Temporary Enrollment in Family Planning Only Services

- Meet one of the citizenship/immigration requirements:
 - o Is a U.S. Citizen
 - $\circ~$ Has been lawfully residing in the U.S. for at least five years
 - o Lawfully residing in the U.S. and a refugee or seeking asylum
 - o Is from Cuba or Haiti and lawfully residing in the U.S.
 - Is lawfully residing in the U.S. under one of the eligible immigration statuses
 - If under age 19, is lawfully present in the U.S.

Note: For more information, refer to the <u>BadgerCare Plus Handbook</u>, <u>section 4.3 Immigrants</u>.



Eligibility for Temporary Enrollment: Former Foster Care Youth

Former foster care youth must meet the following criteria:

- BadgerCare Plus or Family Planning Only Services
 Be age 18 through 25.
 - Have been receiving foster, subsidized guardianship, or court-ordered kinship care on the date that he or she turned 18.
 - Meet citizenship/immigration criteria for the population that applies to them.
 - o Have no income limit.



Eligibility for Temporary Enrollment: Inmates

- Certain public correctional institutions (for example, county jails)
 - Hospitals may temporarily enroll inmates in BadgerCare
 Plus as long as the inmate is expected to remain in the
 hospital for 24 hours or more.
 - Eligibility requirements are the same as other populations.

• State prisons

Note: Inmates are not eligible for temporary enrollment in BadgerCare Plus or Family Planning Only Services.



How Long is Temporary Enrollment?

Temporary enrollment in BadgerCare Plus or Family Planning Only Services:

- Begins on the date a person is found presumptively eligible by a qualified entity.
- Ends the month following the month in which the person was determined presumptively eligible.

Note: If a person applied for ongoing benefits, temporary coverage will end the date eligibility for ongoing benefits is determined, regardless of the result of the eligibility determination



How Long is Temporary Enrollment?

Automatic extensions

- If a person has applied for ongoing benefits and the income maintenance <u>agency</u> has not determined eligibility before the end of the temporary enrollment period, the temporary enrollment period will automatically be extended for two months.
 - **Note:** An extended temporary enrollment will end when an eligibility determination is made by the agency.



Important Reminders

 Applicants are only allowed to temporarily enroll in BadgerCare Plus or Family Planning Only Services once every 12 months.

Note: Pregnant women can enroll once per pregnancy.

• Temporary enrollment in BadgerCare Plus for pregnant women only covers ambulatory pregnancy-related care.

Note: An application for ongoing full-benefit coverage is required for inpatient services, including the delivery.



ACCESS for Partners and Providers (APP)



Getting Started

To begin an Express Enrollment application:

- 1. Go to <u>access.wi.gov</u>.
- Click on "Login" under either "Community Partners" or "Providers/Hospitals" based on your organization type.

Wisconsin Department of Health Services







Your Connection to Programs for Health, Nutrition and Child Care



Apply Am I Login for Benefits! Eligible? to Account > Nutrition, Health & > FoodShare > Check your benefits Child Care > Health Care > Report changes > Prescription Drug Plans Create an OR > Family Planning > Renew your benefits > Energy Assistance Account Waiver > Tax Credits > Manage health care > Child Care Community Partners Providers / Hospitals Employers 🔶 Login Login Wisconsin's health, nutrition Badgercare+ express enrollment for Providers: BadgerCare+ Express Obtain information about reporting and child care programs Children and registration for Enrollment for pregnant women, health insurance data children, and Family Planning Only Learn More Community Access Points Services Learn More Learn More Hospitals: BadgerCare+ Express Enrollment for adults, pregnant women, children, and Family Planning Only Services Learn More

Screenshot: ACCESS home page



Getting Started

 Enter your Wisconsin Account Management System (WAMS) ID. If you don't have a WAMS ID, you can create one by clicking on "Request a Wisconsin User ID and Password"

	WISCONSIN.GOV
WA WEB AC MANAGEMEN	User ID: Password: CESS SYSTEM Login
	Forgot your password? Is your account locked? Request a Wisconsin User ID and Password.
	You are about to access a State of Wisconsin computer system. This is a restricted computer system for authorized users only. All equipment, systems, services, and software connected to this system are intended only for official business use of the State of Wisconsin, and may contain U.S. Government information. All data contained on this system is owned by the State of Wisconsin reserves the right to audit, monitor, record and/or disclose all transactions and data sent over this system in a manner consistent with State and federal law. Use of this system by any user, authorized or unauthorized, constitutes consent to monitoring, recording, reading, copying, or capturing and disclosure of data and transactions by authorized personnel. Only software and/or hardware approved, scanned, and licensed for State of Wisconsin use is permitted on this system. Any illegal, unauthorized use or modification of the State of Wisconsin data, equipment, systems, services, or software by any person(s) is prohibited and may be subject to civil or criminal prosecution under state and/or federal laws.
	WAMS Home Wisconsin Portal Home Please don't bookmark this page.
Screenshot:	
page	



Setting Up a User Account in APP

- After logging into WAMS, the User Account Setup page will appear if you do not already have a user account in APP.
- Refer to the <u>ACCESS Handbook, section 12.3.2.3</u>
 <u>Setting Up a User Account in APP</u> for details about setting up a user account.





Starting in APP

The next slides apply to if you have an account set up in APP to complete Express Enrollment applications.



Starting in APP: Select a Location

- After you log in to APP, the Location Selection page appears if you are associated with more than one Express Enrollment location. You must select the appropriate location before continuing.*
- After choosing the location, you will be taken to the Express Enrollment Landing Page.

*If you are only associated with one location, the Location Selection page will not appear.

TRAINING Your	Connection to Programs for Health, Nutrition and Child	d Care
Location Selection		
le contra		
- Locations		
Please select your locat	tion.	
LOCATION NAME 1		
 LOCATION NAME 1 LOCATION NAME 2 	1	
 LOCATION NAME 1 LOCATION NAME 2 LOCATION NAME 3 	2	

Screenshot: Location Selection

page



Starting in APP: APP Landing Page

- The APP Landing Page will display appropriate options based on your security profile:
 - Type of APP user: security administrator or user.
 - Type of organization: partner, provider, or qualified hospital.
 - o Access to populations enabled by a security administrator.



Starting in APP: APP Landing Page

Depending on your security profile, combinations of the following options may appear:

- Submit Express Enrollment for BadgerCare Plus.
- Submit Express Enrollment for Family Planning Only Services.
- Search for Express Enrollment Applications.
- Search for ACCESS Applications.
- Search for users from my organization (this will allow you to access their privileges).
- Update my User Account.



Starting in APP: APP Landing Page

- You will only be able to search for Express Enrollment applications that you started or submitted based on the location you selected.
- For more information about searching for Express Enrollment applications you started or submitted, refer to the <u>ACCESS Handbook, section 12.4.2.2</u> <u>Search for Applications/Manage My Account</u>.





Before Starting an Express Enrollment Application

- To avoid unnecessary applications, check ForwardHealth to verify that an applicant does not currently have Medicaid, BadgerCare Plus, or Family Planning Only Services coverage.
- Multiple individuals in a household can be on the same Express Enrollment application for BadgerCare Plus even if they are from different population types.
- Only Express Enrollment applications can be completed in APP; they take around 15 minutes or less to complete.


Express Enrollment Application: Overview

- The application includes the following sections:
 - \circ Individual information
 - Contact information
 - o Income details
 - Provider signature
 - Client/applicant signature
 - o Results
- Fields with a red asterisk must be filled out.
- "Click here" links provide additional instructions or help text.



Express Enrollment Application: Getting Started

From the APP Landing Page:

- Select "Submit Express Enrollment Application" for either BadgerCare Plus or for Family Planning Only Services.
- Click the "Next" button to begin a new Express Enrollment application.



Express Enrollment Application: Individual Information Page

- The Individual Information page collects information about the individual(s) applying for Express Enrollment.
- If the individual doesn't know his or her Social Security number (SSN) or does not have one, select "SSN is not known."
- You can add individuals to the household by clicking the "Add" button at the bottom of the page.

Wisconsin Department of Health Services

	Currently working at: TEST CO	MMUNITY HOSPITAL			
	Individual Information	Type: Express Enrollment for I Updated on:	BadgerCare Plus	Primary Contact: Updated by:	_
	Contact Information				
		Individual 1			
	S Income Details	* First Name:	Middle Initial:	* Last Name:	
	-	Jane		TestSmith	Delete
	Provider Signature	* Date of Birth:		03/22/1970 Ex	mm/dd/yyyy
	Client Signature	* Gender:		Male 💿 Female	
	Results	* Identification Type:			
		Social Security Numb	ber (SSN):	651 - 05 - 150	31
		SSN is not known			
		* Is this individual currently Plus?	enrolled in Wisco	onsin Medicaid or Badge	rCare OVes ONo
		* Is this individual currently	pregnant?		
		* How many babies is she	expecting?	1	
Screenshot:		* Expected delivery date		12/08/2016 Ex	mm/dd/yyyy
Individual		* Is this individual a U.S. cit	izen or law fully p	resent in the U.S.?	Yes No No
Information page for a		* Has this individual been te during her current pregnan	emporarily enrolle ICY?	d in BadgerCare Plus	() Yes () No
pregnant		To add another individual,	, click the Add bui	tton.	Add
woman					Save & Exit Next

Wisconsin Department of Health Services



	-Individual 3-				
	* First Name: James	Middle Initial:	* Last Name: TestSmith	Delete	
	* Date of Birth:		04/22/1998 Ex: mm/dd/y	ууу	
	* Gender: Male Female				
	* Identification Type:				
	Social Security Number or	(SSN):	245 - 40 - 5645		
	SSN is not known				
	* Is this individual currently en Plus?	rolled in Wisco	nsin Medicaid or BadgerCare	© ^{Yes}	
	* Is this individual a U.S. citizer	n or law fully p	resent in the U.S.?	● ^{Yes} ^{No}	
	* Was this individual in foster of kinship care when he or she t	care, subsidize urned 18?	ed guardianship or court-ordered	● ^{Yes}	
Screenshot:	* Has this individual been temp in the past 12 months?	orarily enrolle	d in BadgerCare Plus		
Individual Information page for an	To add another individual, cli	ck the Add but	ton.	Add	
adult			Save &	Exit Next	



The Contact Information page collects contact information for the primary person for the application.



- A dropdown menu will list the names of the individuals on the application who are age 19 or older and will include an additional "Other Parent/Caretaker" option. Select one of these options as the primary contact person.
 - For a single adult or for Family Planning Only Services, there will not be a dropdown menu. The page will automatically list the individual as the primary contact.
 - If the application is for a minor living independently, you must indicate this so that the minor will be the primary contact person.



Mailing address

- If the mailing address is different than the home address, check the "Different than Home" box and enter the complete mailing address, including ZIP code.
- If no mailing address is entered, notices will be sent to the home address.



Homeless persons

- If the applicant is homeless, you still need to enter an address.
 - This can be the address where the applicant is currently staying (for example, with a friend, family member, shelter, or other organization).
 - If the applicant does not have any address, enter the address of the applicant's <u>agency</u> for the county where he or she resides.

	Currently working at: TEST CO	MMUNITY HOSPITAL		
	Contact Information	Type: Express Enrollin Updated on:	ent for BadgerCare Plus Primary Contact. Updated by:	
	Income Details	Primary Contact	Information y contact person for this application?	< click here to choose > < click here to choose >
	Provider Signature	-Home Address-		Mary TestSmith jacob TestSmith Other Parent/Caretaker
Screenshot: Contact	Results	Please tell us when information. • Address Line 1: Address Line 2: • City: • State: • ZIP Code:	e the applicants live. If the applicants an Wisconsin	e homeless, <u>click here</u> for more
Information		* County where ap	plicants live:	< click here to choose > 🔻
page showing options to choose from in dropdown list		Mailing Address	applicants live, if applicable:	< click here to choose > 🔻

	Currently working at: TEST CO	MMUNITY HOSPITAL		
		Contact Information	n	
		Type: Express Enrollm	ent for BadgerCare Plus Primary Contact	:
	<u> </u>	Updated on:	Updated by:	
	Contact Information			
	-	-Primary Contact	Information	
	Income Details	* Are all of the mind	ors on this application living independe	ently? Yes No
	Provider Signature	The primary contac	t person for this application is:	Jane TestSmith
	Client Signature	-Home Address-		
	Results	Please tell us wher information.	e the applicants live. If the applicants	are homeless, <u>click here</u> for more
		* Address Line 1:		
		Address Line 2:		
		* City:		
	. .	* State:	Wisconsin 🔻	
Screensno	t:	* ZIP Code:		
Contact				
Informatio	n	* County where ap	plicants live:	< click here to choose > 🔻
page for a				
minor livin	σ	Tribal lands where	applicants live, if applicable:	< click here to choose > 🔻
	'Б			
independe	entiv)



Express Enrollment Application: Income Details Page

- The Income Details page collects information about household size and income.
 - Household size may be different from the number of applicants applying for Express Enrollment.
 - Income information is needed for everyone in the household.



Express Enrollment Application: Income Details Page

- For household size, household members include:
 - Children under age 19. If a child is married, count his or her spouse.
 - The natural, adoptive, and stepparents living with the children under age 19.
 - o Spouses.
 - o Caretaker relatives.
- If a woman is pregnant, add the number of babies she is expecting.



Express Enrollment Application: Income Details Page

Family Planning Only Services

- Regardless of living situation, an application for Family Planning Only Services will always be a household size of one.
- Even if the individual applying is a minor or a tax dependent, he or she must report ONLY his or her own income on the Express Enrollment for Family Planning Only Services application.

Currently working at: TES	T COMMUNITY HOSPITAL
Individual Informat	Type: Express Enrollment for BadgerCare Plus Primary Contact: Jacob TestSmith Updated on: Updated by:
Contact Informati	ion
Income Details	Income Details If the individual applying is unsure of the exact amount for any of these questions, please ask for the best estimate. For more information about how to determine these amounts, please click here.
Client Signature Results	* How many individuals are in the household? To read more about household size, <u>click here</u> .
	* Enter the household's total monthly earned income: \$ 3000.00
	* Enter the household's total monthly <u>other income</u> . Do not include child support, Supplemental Security Income (SSI), workers compensation, or veterans benefits, money from another person, or student financial aid:
	Totals
Screenshot: Income	Total income: \$3930.00
Details page	Back Save & Exit Next



Express Enrollment Application: Provider Signature Page

- The Provider Signature page collects your electronic signature as the provider completing the Express Enrollment application.
- You must click on the link to the "Rights and Responsibilities" in the Provider Signature box and review the document with the primary contact person.
- Click the box to sign the document and then click "Next" to go to the Client Signature page.



Currently working at: TEST COMMUNITY HOSPITAL

	Provider Signature			
Individual Information	Type: Express Enrollment for BadgerCare Plus Primary Contact: Jim Test Smith			
Contact Information	Updated by:			
	Provider Signature			
Income Details	Please review the temporary enrollment "Rights and Responsibilities" with the primary contact person before checking the Provider Signature box on this page.			
Provider Signature				
	Authorization Box			
Client Signature	* I, <provider name="">, certify that the information entered in this BadgerCare Plus Express</provider>			
Results	whom I have informed of the rights and responsibilities under the BadgerCare Plus program. I also understand that I must print the notice at the end of this application and provide a copy to Jim A Test Smith.			

Screenshot: Provider Signature page





Express Enrollment Application: Client Signature Page

- The Client Signature page displays a summary of all the information entered on the Express Enrollment application. You must ask the primary contact person to review all of the information to make sure it is accurate.
- Express Enrollment applications must be signed:
 - By the primary contact person for the case (BadgerCare Plus).
 - By the individual applicant (Family Planning Only Services).



Express Enrollment Application: Client Signature Page

- Check the box to indicate that the primary contact person has reviewed the accuracy of the information.
- Have the **primary contact person** provide his or her electronic signature.

Note: You should **not** sign the application for the primary contact person.

• After the signature has been provided, click "Next" to go to the Results page.



-Summary of Income Details	
Household size:	3
Total monthly earned income:	\$ 2500.00
Total monthly other income:	\$ 0.00
Total income:	\$ 2500.00

	-Authorization Box for Primary	Contact Person		
	* I, Jim A Test Smith, certify th Enrollment application is true GeeMail Mcgee has informe Enrollment for BadgerCare F who wants to receive ongo must apply online, by mail, b	at the information entered in e, correct and complete, and d me of the rights and respon Plus program. I understand th ing BadgerCare Plus or other by fax, by phone, or by conta	this BadgerCare Plus Expres to the best of my knowledge hsibilities under the Express at anyone on this application Wisconsin Medicaid benefit cting the agency.	s
.	* First Name: Jlm	Middle Initial:	* Last Name: Test Smith	
Screenshot:			1	
Client				
page			Back Submit	



Express Enrollment Application: Results Page

After the application is signed by both you and the primary contact person, the Results page will show who is and is not eligible for temporary enrollment.



Express Enrollment Application: Results Page

- You must print the Application Summary and the Notice and give it to the applicant.
 - If the applicant is **not** eligible, the Notice will state the reason.
 - **Note:** Applicants not eligible for temporary enrollment through the Express Enrollment process may still be eligible for ongoing BadgerCare Plus or Family Planning Only Services coverage.
 - If the applicant is eligible, the Notice will include a temporary ForwardHealth identification (ID) card.
 - **Note:** The Application Summary and Notice are also available in Spanish.



Temporary ForwardHealth Identification Card

- The temporary ForwardHealth ID card is valid for 14 days after the start of the temporary enrollment period.
 - A permanent ForwardHealth ID card will be mailed to the eligible member within 3-5 business days, if the member has not already been issued a ForwardHealth ID card.
 - If the member has been issued a ForwardHealth ID card in the past, a new one will not be mailed.
 - The member can use his or her previously issued ForwardHealth card or contact Member Services at 1-800-362-3002 to request a new one.



Currently working at: TEST COMMUNITY HOSPITAL





Screenshot: Results page

Exit





ACCESS Your Connection to Health and Nutrition Benefits

Application Summary

Here is a summary of what you told us in your application.

Summary of Jane's Information

Name	Jane TestSmith
Date of Birth	06/04/1975
Gender	Female
Social Security Number	156-15-1561
Parent/Caretaker	Yes
U.S. citizen or qualifying immigrant	Yes
Already Receiving WI Medicaid or BadgerCare Plus	No
Previously enrolled through Express Enrollment in BadgerCare Plus or FPOS	No
Currenly pregnant	No

Summary of Jeremy's Information

	Name	Jeremy TestSmith
	Date of Birth	09/05/2013
Screenshot:	Gender	Male
Number	Social Security Number	514-54-5600
Application	itizen om V nre U	Ye
Summarv		

Wisconsin Department of Health Services



Screenshot: Example of Notice where applicant is eligible for temporary enrollment in BadgerCare Plus <NAME> <ADDRESS1> <ADDRESS2> <PHONE>

Date: <MM/DD/YYYY>

Status of Your Application for Express Enrollment in BadgerCare Plus

State of Wisconsin

Application # <number>

You applied for Express Enrollment in BadgerCare Plus on <date>. The individuals listed on the next page <u>are temporarily enrolled</u> in BadgerCare Plus. This enrollment will end on or before <date>.

To get ongoing BadgerCare Plus or other Wisconsin Medicaid benefits, you can apply in any of the following ways:

- Online at <u>access.wi.gov</u>
- By mail, by phone, or in person at: <agency.info>

If you are applying by phone or in person at the agency, it is a good idea to call the agency ahead of time to make an appointment.

Note: If you apply with the agency before the end of your temporary enrollment, and they find that you cannot enroll in ongoing BadgerCare Plus or other Wisconsin Medicaid benefits, your temporary enrollment will also end at that time.

Pregnant women who are encolled in BadgerCare Plus are only eligible for pregnancy-related outpatient care. To get inpatient benefits, including labor and delivery care, pregnant women must apply for ongoing BadgerCare Plus or Wisconsin Medicaid benefits.

When you apply for ongoing BadgerCare Plus or Wisconsin Medicaid benefits at access.wi.gov, information you have already given us <u>can be pre-filled</u> into the Apply for Benefits tool. To do that, you will need the following:

- Express Enrollment Application Number: <number>
- <Name> date of birth
- <Name> first name and last name

<Name> is listed as the primary contact person for this Express Enrollment application.

To learn more, see "Rights and Responsibilities."



To the Provider

The individuals listed on this card have been temporarily enrolled in BadgerCare Plus through Express Enrollment, in accordance with Wis. Stat. s. 49.471. This card is valid for the dates specified and entitles the listed individual to receive health care services including pharmacy services through BadgerCare Plus from any certified BadgerCare Plus provider. Pregnant women may only receive pregnancy-related outpatient care. For additional information, call Provider Services at 800-947-9627 or see the ForwardHealth Online Provider Handbook.

NOTE:

It is important to provide services when this card is presented. Providers who render services based on the enrollment dates on this card will receive payment for those services, as long as other reimbursement requirements are met. All policies regarding covered services apply during the temporary enrollment period, including the prohibition against billing members. Refer to the ForwardHealth Online Provider Handbook for further information regarding this temporary identification card. Providers are encouraged to keep a photocopy of this card. If the name on this card is followed by the words "Pending Assignment," the Member ID will be assigned within one business day. The card is still valid.



Temporary Card Valid From: MM/DD/YYYY - MM/DD/YYYY

For services provided after the dates above, a ForwardHealth card should be presented or eligibility verified through ForwardHealth.

Screenshot: Example of Temporary ForwardHealth ID Card for BadgerCare Plus



Express Enrollment Application Practice

- 1. Go to <u>https://trn.access.wisconsin.gov</u>.
- 2. Click on "Login" under "Providers/Hospitals."
- 3. Enter the following credentials:
 - o User ID: sambecket3333
 - o Password: Enter123!

Important

- Do not submit practice Express Enrollment applications on the actual ACCESS website.
- Do not submit actual Express Enrollment applications on the practice website.



Next Steps

- Temporary enrollment is short-term.
- An Express Enrollment applicant should complete an application for ongoing coverage as soon as possible.
- Information on the Express Enrollment Notice can be used to pre-populate some information on the application for ongoing coverage.

Note: To complete the application for ongoing benefits with the applicant, you must log out of ACCESS.



Applying for Ongoing Benefits



Applying for Ongoing Benefits

- After an applicant is temporarily enrolled, you should assist him or her in person to apply for ongoing BadgerCare Plus or Family Planning Only Services via <u>access.wi.gov</u>.
- In ACCESS, choose "Apply for Benefits" (AFB) and start a new application.
- Enter the information from the Express Enrollment Notice to pre-populate some of the information on the AFB application.

Note: AFB applications cannot be completed in APP.

	SYSTEMS Yo	Hello, TEST Español
		Your tracking number: 9701239792
	(B) Start	Using ACCESS
	People	Before you get started, we'd like to know more about how you're using ACCESS. I am using ACCESS to apply on my own. I am using ACCESS to apply for another person.
	Other Benefits	I am using ACCESS at a community agency.
	Liquid Assets	Link your Express Enrollment Information
Screenshot:	Other Assets	Please enter the primary contact person's information below to pre-fill your application using your Express Enrollment information.
Starting an AFB	S Job Income	* EE application #: V I don't know * Social Security Number:
application	3 Other Income	* Date of Birth: Ex: mm/dd/yyyy
showing	Housing Bills	* First Name: * Last Name:
how to link	~	
the Express	Other Bills	Back Next



Linking the Express Enrollment Application

- Click the checkboxes for the individuals to import into the application for ongoing benefits.
- The Express Enrollment application number expires after 90 days.
- Applicants have a total of six attempts to link the Express Enrollment application with the AFB application.
- Applicants may link one Express Enrollment application to only one AFB application.



Linking the Express Enrollment Application

For more details about linking, refer to the <u>ACCESS</u> <u>Handbook, Chapter 12.5 Applying for Ongoing Benefits</u>



Applying for Ongoing Benefits

- An AFB application can be used to apply for other programs in addition to BadgerCare Plus or Family Planning Only Services (for example, Medicaid, FoodShare, and Child Care).
- If an applicant's ongoing benefits has recently ended, he or she should complete a renewal instead of an Express Enrollment application.
- Assist the applicant with contacting his or her <u>agency</u> to complete a renewal rather than completing a new application.



Additional Resources


Getting Help in ACCESS

In ACCESS, you can get more information by clicking on the "Help" button in the upper right corner of your screen. This will provide more details about content on the page.





Express Enrollment Resources

- ACCESS Handbook (Chapter 12) <u>www.emhandbooks.wisconsin.gov/ah/ah.htm</u>
- Express Enrollment webpage <u>dhs.wisconsin.gov/forwardhealth/express-enrollment.htm</u>
- ForwardHealth Portal Helpdesk 866-908-1363
- ForwardHealth Provider Online Handbook
 <u>https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/</u> <u>Display.aspx</u>



Thank you