



# Overview of October 2015 **ACCESS** Changes

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# Agenda

- Overview of October 2015 ACCESS changes
- Updates and enhancements to ACCESS application questions
- Real-time eligibility
- New Add a Program option



# Overview of October 2015 ACCESS Changes

- ACCESS will be updated with new features that can help to expedite application processing.
- For a small number of applicants, it could mean they are able to get an immediate eligibility determination.



# Overview of October 2015 ACCESS Changes

- The MyACCESS feature will be enhanced to allow existing members to apply for additional programs through a streamlined process called Add a Program.



# Updates and Enhancements to ACCESS Application Questions

- Updates to existing functionality
  - Mandatory questions
  - Backdating requests
  - Acknowledgement of good cause
  - Filing date
- Enhancements in ACCESS
  - Address validation
  - Federal Employer Identification Number (FEIN)
  - Real-time eligibility results page
  - Temporary card for real-time eligibility approvals



# Update: Mandatory Questions

- More questions will now be mandatory in the ACCESS application. Not all of these questions are new; what is new is that they are no longer optional.
- Mandatory questions ensure that online applications have all required information for efficient processing, which can help with faster determinations for applicants.



# Update: Mandatory Questions

- Like questions that are currently mandatory in ACCESS, these questions must be answered before navigating to the next page.
- “Do not know” may no longer be an option.



# Update: Mandatory Questions (continued)

New mandatory questions in ACCESS Apply for Benefits address:

- Household relationships:
  - Who the primary caretaker is for each child
  - For fathers, whether paternity has been established
- Demographics
  - Citizenship
  - Whether or not the applicant resides in and intends to reside in Wisconsin



# Update: Mandatory Questions (continued)

- Employment
  - Is the job temporary?
  - Position type
  - Type of wage (hourly versus salary)
  - Frequency and amount of paychecks
  - Pre-tax deductions
  - Date of final paycheck (if employment was reported as ended)
- Self-employment
  - Self-employment type
  - Start date



# Update: Mandatory Questions (continued)

- School enrollment
  - Enrollment status
  - Type of school
  - Expected graduation date (for high school)
- Educational aid
  - When did the current term begin?
  - When will the current term end?
  - Type of aid
  - Amount of aid



# Update: Mandatory Questions (continued)

- Unearned income – frequency of unearned income
- Deductions
  - Frequency of the deduction
  - Amount of the deduction
  - Incurred months (for calendar year tax deductions only)
- Health insurance
  - Premium frequency (if policy holder pays a premium)
  - Health insurance coverage information (if policy holder pays a premium)
  - Whether the insurance covers services from a doctor



# Update: Mandatory Questions (continued)

- If the applicant is unable to answer a mandatory question or does not finish the application, he or she can do one of the following:
  - Select Save & Exit to finish at a later time.
  - Sign and submit the application.
- If the applicant signs and submits the application with missing information, the application will be sent to the income maintenance (IM) agency for processing and the applicant may be required to provide additional information.



# Update: Backdating Requests

- The questions about backdated coverage have moved to a new page in the application.
- An applicant may be able to receive an immediate determination for backdated coverage as long as he or she has not had a change in circumstances since the months for which he or she is requesting backdated coverage.

**Note:** A change in circumstances means a change in any of the following: income, expenses, household composition, pregnancy status, tax filing status, or marital status.



### Backdated Coverage

If you had medical or family planning services in the past 3 months that were not covered by insurance, you may be able to get benefits for those months. [Click here](#) to read more about this.

Did you have any medical or family planning services in the past 3 months that were not covered by insurance?  Yes  No

Check the box for each past month you want to ask for BadgerCare Plus benefits.

June  July  August

Check the box for each past month you want to ask for Family Planning Only Services (FPOS) benefits.

June  July  August





Print



Help



Your tracking number: **8701368087**

Complete

Start

People

Other Benefits

Liquid Assets

Other Assets

Job Income

Other Income

Housing Bills

Other Bills

Health Insurance

Submit

### Recent Changes

You are applying for health care and/or Family Planning Only Services, and you have also asked for coverage for March and April.

Has your household had any changes since March? This could be changes in income, expenses, tax dependents, marriage, divorce, or who is living in your home.  Yes  No

### Before You Submit the Application

There are a few things missing from your application. You do not have to answer all of the questions before you submit your application, but in most cases, you will have to answer them in order to get benefits.

The more complete your application is, the faster it can be processed.

Section	Completed	Go Back
Job Income	No	<a href="#">Go Back</a>
Housing Bills	No	<a href="#">Go Back</a>
Health Coverage	No	<a href="#">Go Back</a>



Back

Save & Exit

Next





# Update: Acknowledgement of Good Cause

- For applications that include absent parents and/or unmarried pregnant women, a section has been added to the Signature page in ACCESS to obtain the applicant's acknowledgement that he or she has read the notice explaining his or her right to claim good cause for failing to cooperate with the child support agency.
- The applicant is required to acknowledge this information by checking the box before signing the application.



# Update: Filing Date

- The rules for setting a filing date for health care have been adjusted to accommodate the new enhancements.
- Currently, the filing date for health care applications is the date the IM agency receives the application.
- This means that if the application is submitted after 4:30 p.m. or on a weekend or holiday, the filing date will be the next business day.



## Update: Filing Date (continued)

- After October 24, 2015, the filing date for health care applications is the **date the online application is submitted**, regardless of the time or whether it is a weekend or holiday.



# Update: Filing Date (continued)

- For example:
  - **Today:** Anna applies for health care benefits through ACCESS and submits her application at 9 p.m. on Friday, November 30. Her filing date is the next business day, which is Monday, December 3. Benefits would begin as of December 1.
  - **After October 24:** Anna applies for health care benefits through ACCESS and submits her application at 9 p.m. on Friday, November 30. Her filing date is November 30 and benefits would begin as of November 1.



## Update: Filing Date (continued)

- For non-health-care applications, the filing date will be when the IM agency receives the application.
- This means that if the application is submitted after 4:30 p.m. or on a weekend or holiday, the filing date will be the next business day.



## Update: Filing Date (continued)

- The applicant has 30 days from the **filing date** to send in any necessary verifications.
- The IM agency has 30 days from the **date it receives an application** to process it.



# Enhancement: Address Validation

- When the applicant enters a residential and/or mailing address, the address will be validated with the United States Postal Office (USPS).
- If there are any discrepancies, the applicant will be able to choose whether to keep the address as he or she entered it or select the validated address returned by the USPS.



# Enhancement: Homeless Address Validation

- Homeless individuals who provide a mailing address will have their mailing address validated.
- For homeless individuals who do not provide a residential or mailing address, ACCESS will display the IM agency address and provide instructions for picking up mail at that address.



 **Start**

 **People**

 Other Benefits

 Liquid Assets

 Other Assets

 Job Income

 Other Income

 Housing Bills

 Other Bills

### Your Address

The address we got from the Post Office is different from the address you gave us. Please choose which address we should use.

If you need to change the address you gave us, click the Back button.

### Home Address

\* Please choose which home address we should use for you:

Use the home address the Post Office suggested.

433 E WASHINGTON AVE  
MADISON  
WI 53703-2805

**County:** Dane

Use the home address I gave.

433 E. Washington Av  
Madison  
WI 53703

**County:** Milwaukee



# Enhancement: FEIN

- Applicants with job income will be asked to provide a FEIN.
- If an applicant reports a job and appears to be below the income limit for BadgerCare Plus and/or Family Planning Only Services, a FEIN is required in order to get an approval with real-time eligibility.
- If no job income is reported, a FEIN is not required.
- Providing a FEIN is not mandatory.



# Enhancement: FEIN (continued)

There are several ways for an applicant to find a FEIN:

- On a W-2 Wage and Tax Statement, or on other tax documents
- By asking his or her employer, human resources, or accounting staff
- On last year's tax return (usually near the employer's name and address)
- By calling the IRS at 800-829-1040. The applicant will need the company's name, address, and other information related to that job.



## Enhancement: FEIN (continued)

- Partners can help applicants by encouraging them to find their FEIN, as it may help them get a faster answer about their health care application.
- Partners assisting with applications in person can help applicants by asking them to bring in their W-2s or other tax information to find the FEIN, or by helping them call their employer or HR office to ask for it directly.



# Real-Time Eligibility

- Overview of real-time eligibility
- How real-time eligibility works
- Who can get real-time eligibility?
- Applications needing follow-up
- Identity proofing
- Important reminders
- Questions



# Overview of Real-Time Eligibility

- Real-time eligibility is required by provisions of the Patient Protection and Affordable Care Act of 2010.
- For those who meet the requirements, real-time eligibility can help applicants get faster access to needed health care coverage.



# Overview of Real-Time Eligibility (continued)

- Real-time eligibility determinations will begin with a short pilot in the Milwaukee area on October 24, 2015, and we plan to expand to the rest of the state by November 9, 2015.
- All other ACCESS updates will go into effect on October 24, 2015.



# Overview of Real-Time Eligibility (continued)

- Through real-time eligibility, certain individuals or households applying for health care coverage online through ACCESS may be able to immediately find out if they are eligible for BadgerCare Plus and/or Family Planning Only Services.
- We anticipate approximately 10 percent of ACCESS applications will meet the requirements for real-time eligibility.



# Overview of Real-Time Eligibility (continued)

- The applicant's information is verified using online data exchanges.
- The applicant can receive an eligibility determination less than 3 minutes after submitting his or her health care application.
- The applicant will immediately be able to view the results and, if eligible, print a temporary ForwardHealth identification card.
- The applicant's official notice of decision will be issued electronically or by mail the next business day.



# Overview of Real-Time Eligibility (continued)

- Unlike an Express Enrollment application, which provides temporary enrollment, a real-time eligibility determination is a definitive response to an ACCESS application based on information verified through online data exchanges.
- Hospitals should still expect to do Express Enrollment applications, as most Express Enrollment applicants do not come in with the required information to get real-time eligibility.



# How Real-Time Eligibility Works

- Based on the applicant's answers to a few preliminary questions, ACCESS makes an initial assessment of the application's potential for real-time eligibility processing.
- If an application is potentially eligible for real-time eligibility, a new page will appear describing some of the information required to get a faster determination.



# How Real-Time Eligibility Works (continued)

To get an answer right away, the applicant will need to:

- Complete the entire application before signing and submitting.
- Provide Social Security numbers for everyone whom ACCESS asks about.
- Provide complete information about immigration status for anyone who is not a U.S. citizen.
- Provide the FEIN for any jobs listed on the application. A FEIN is needed to utilize the data exchanges to verify the applicant's job income.



# Real-Time Eligibility Results Page

For BadgerCare Plus and/or Family Planning Only Services applications that are eligible for a real-time eligibility determination, ACCESS will display the eligibility determination, whether it is an approval or denial, on the new Your Benefit Results page.



# Your Benefit Results Page (continued)

- For an approved application, the following will appear:
  - Members who were approved
  - Benefits that were approved
  - Benefit start date
- For a denied application, the following will appear:
  - Members who were denied
  - Benefits that were denied
  - Reason for denial



# Your Benefit Results Page (continued)

- **Note:** The Your Benefit Results page is not the applicant's official notice of decision.



## Your Benefit Results

Thank you for submitting your application. We have determined your eligibility and your results are shown below.

For additional legal information regarding your eligibility results, click the [Help](#) button at the top of your screen.

If you have any questions or concerns, contact your local agency.

## BadgerCare Plus Results



John

- ✓ From December 1, 2014 to December 31, 2014, John is covered under the BadgerCare Plus Standard Plan.
- ✗ From January 1, 2015 to January 31, 2015, John is not covered under the BadgerCare Plus Standard Plan because of the following:
  - The income we counted for your household is over the program limit.
- ✓ From February 1, 2015 to February 28, 2015, John is covered under the BadgerCare Plus Standard Plan.
- ✗ From March 1, 2015 to March 31, 2015, John is not covered under the BadgerCare Plus Standard Plan because of the following:
  - The income we counted for your household is over the program limit.
- ✓ Starting April 1, 2015, John is covered under the BadgerCare Plus Standard Plan.



# Temporary Card for Real-Time Eligibility

- ACCESS will generate a PDF of a temporary printable ForwardHealth card for each eligible member.
- Each card includes the member's ForwardHealth ID number and the dates the card is valid.
  - The dates indicate the timeframe for which the temporary card is valid and may be accepted by providers.
  - The member's eligibility will continue beyond the expiration date of the card.
  - The card includes instructions for providers for members who do not yet appear in the ForwardHealth Portal.



# Temporary Card for Real-Time Eligibility (continued)

- Applicants who receive a real-time eligibility determination on their health care applications can go to a provider for services immediately after viewing and printing their results and temporary card.



# Temporary Card for Real-Time Eligibility (continued)

- Providers will not be able to see new members in the ForwardHealth Portal right away.
  - Providers may not see new members in the portal until the date that is listed on each temporary card.
  - This may be up to 72 hours after the member applied for health care.
- Providers are expected to provide services to members who present their temporary card during this time period.



### To the Provider

The individual listed on this card has been enrolled in BadgerCare Plus. This card entitles the listed individual(s) to receive health care services, including pharmacy services, through BadgerCare Plus from any enrolled BadgerCare Plus / Medicaid provider. For additional information, call Provider Services at (800) 947-9627 or see the 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 for these individuals, including the prohibition against billing members. Refer to the online Provider Handbook for further information regarding this temporary ID 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.

WISCONSIN DEPARTMENT OF  
HEALTH SERVICES

### TEMPORARY IDENTIFICATION CARD FOR BADGERCARE PLUS



Name	Program	ID Number
Anna Smith	BadgerCare Plus	0000000011

DOB: 09/01/1984

This card is valid from **September 01, 2015 to September 30, 2015.**

This individual's eligibility may not appear in the ForwardHealth Portal before 8 a.m. on **09/08/2015**. If this card is presented prior to this date, the provider should honor the individuals coverage and provide services based on good faith policies outlined in the Provider Handbook.

For services provided as of 8 a.m. on 09/08/2015, eligibility should be verified through the ForwardHealth Portal prior to providing services.



# Temporary Card for Real-Time Eligibility (continued)

- A plastic ForwardHealth card will automatically be mailed to each new member in 3–5 days **unless** that member has been issued a ForwardHealth card in the past.
  - If the member has been issued a ForwardHealth card in the past, he or she should find and use that card.
  - If the member does not have the card issued in the past, he or she will need to contact Member Services at 1-800-362-3002 to request a replacement.



# Applications Needing Follow-Up

- Some real-time eligibility applications will pass real-time eligibility screening but may need IM agency follow-up. This means the applicant will not get his or her answer right away.
- Real-time eligibility applications in need of IM agency follow-up are subject to the same processing standards as other applications.



# Applications Needing Follow-Up (continued)

- An application may pass real-time eligibility screening but may still need IM agency follow-up if:
  - There is a FoodShare or Child Care request on the application.
  - Someone on the application may qualify for Medicaid for the elderly, blind, or disabled.
  - BadgerCare Plus or Family Planning Only Services could not be confirmed because (among other reasons):
    - Verification is needed.
    - A premium is required.
    - A system error occurred.



# Applications Needing Follow-Up (continued)

- **Note:** A real-time eligibility determination may be provided for health care on an application even if the application includes a request for FoodShare or Child Care.



# Enhancement: Identity Proofing

- When the applicant signs and submits the application for processing, the application will be automatically prescreened to see if it can get a real-time eligibility determination.
  - If an application is not eligible for a real-time eligibility determination, it will be processed normally.
  - If an application is eligible for a real-time eligibility determination, the primary applicant will need to answer a few questions to confirm his or her identity, per federal requirements.



# Enhancement: Identity Proofing (continued)

- A page will appear with several multiple choice questions from Experian. These questions may ask the applicant to confirm previous addresses, schools, family members, and other non-financial, personally identifiable information.
- The applicant may skip these questions but will not see his or her real-time eligibility results at the end of the application.



# Enhancement: Identity Proofing (continued)

- For security reasons, the applicant will get only two attempts to successfully answer identity-proofing questions, and up to 10 minutes per attempt.
- After a second unsuccessful attempt, the applicant will not be able to see his or her results right away. A formal notice of decision will still be processed and mailed the next day. The applicant will be able to login to his or her MyACCESS account after that time to view the notice of decision.



Your tracking number: XXXXXXXXXX

### Confirm Your Identity

Your application has been submitted.

We may be able to give you an answer right away about health care benefits and/or Family Planning Only Services. First, we need to confirm your identity by asking some questions. You do not have to answer them, but you must answer them in order to get an answer about these benefits right away.

For security reasons, you have a time limit of 10 minutes to answer the questions on this page.

Do you want to answer a few questions to confirm your identity?  Yes  No

### Questions to Confirm Your Identity

\* What model car do you drive?

- Ford
- Chevy
- Honda
- Toyota
- None of the above

\* What is the year of your vehicle?

- 2003
- 2005
- 2009
- 2013
- None of the above

\* What is the name of the city where you previously lived?

- Richmond
- Little Rock
- Spokane
- Seattle
- None of the above

Skip



Next





# Important Reminders

- An application is not guaranteed a real-time eligibility determination even if all requested information is given.
- We estimate that only about 10 percent of applicants can expect to get a real-time eligibility determination.



# Important Reminders

- If an applicant is able to get a real-time eligibility determination but does not pass identity proofing, the applicant will still receive a faster answer about his or her application.
  - The notice of decision will be sent on the next business day.
  - The member may log in to his or her MyACCESS account to view results after the notice has been processed and sent.



# Important Reminders (continued)

- **Help text:** Updated help text is available to explain what is being asked and why. Click the Help icon for more information on a particular question.





# ACCESS Changes: Best Practices

- When assisting homeless individuals, try to provide a mailing address where the applicant checks mail.
- When possible, provide all Social Security numbers and/or alien registration numbers for all applicants.
- When possible, try to assist applicants in getting an employer's FEIN, either using previous years' W-2s or by helping them contact an representative of the employer.



# ACCESS Changes: Best Practices

- Assist applicants in giving their best answer for all mandatory ACCESS application questions; this will ensure quicker processing.



# Questions About Real-Time Eligibility?



# Add a Program

- Add a Program overview
- Right to apply
- Who can use Add a Program?
- Available programs
- FoodShare and Child Care
- Additional resources



# Add a Program Overview

- Beginning on October 24, 2015, enhancements to the ACCESS Apply for Benefits application will offer a streamlined process that will make it easier and faster for an existing member to request an additional program.



# Add a Program Overview (continued)

- When an applicant starts a new application in ACCESS, the system asks the applicant a screening question to identify whether he or she is already receiving benefits.
- If the applicant is already receiving benefits, then the system asks the applicant log in to his or her MyACCESS account or to create a new MyACCESS account.
- The applicant must authenticate the MyACCESS account if he or she has not done so already.



# Add a Program Overview (continued)

Authenticating an existing MyACCESS account:

- Before an applicant can view ongoing benefit details, complete a change report, or use the new Add a Program feature in ACCESS, he or she must authenticate the MyACCESS account.



## Add a Program Overview (continued)

- After clicking “Create an Account” or “Login to Account,” an applicant must submit his or her Social Security number; date of birth; and case, ForwardHealth, or Quest Card number. This action will link the applicant’s ACCESS account login with his or her actual case and eligibility information.



# Add a Program Overview (continued)

- Once the applicant is logged in to the authenticated MyACCESS account, he or she will be directed to the Add a Program version of Apply for Benefits.
- If the applicant does not have an authenticated account or is not receiving benefits, he or she will be directed to the regular ACCESS Apply for Benefits application.



# Add a Program Overview (continued)

- Add a Program closely resembles ACCESS Renew My Benefits and will automatically fill in information about the member based on what is available from the program(s) the member is currently receiving.
- The member will be given a chance to review and update any information on the application before submitting.



## Apply For Benefits Overview

Welcome! Please tell us what you would like to do. Then click the Next button at the bottom of the page.

- Start a new application for FoodShare, Health Care, Family Planning Only Services and/or Child Care.
- Keep working on an application that you have started online.

\* Are you already enrolled in any benefits right now?

By benefits we mean:

- FoodShare
- BadgerCare Plus
- Wisconsin Medicaid
- Family Planning Only Services, OR
- Wisconsin Shares Child Care.

- Yes
- No

ACCESS will work best with Internet Explorer version 8 and 9. You may experience problems if you are using other browsers such as Firefox, Safari, or Chrome.

If you have questions or need help with your application, please call Member Services at 1-800-362-3002





## Apply For Benefits Overview

Welcome! Please tell us what you would like to do. Then click the Next button at the bottom of the page.

- Start a new application for FoodShare, Health Care, Family Planning Only Services and/or Child Care.
- Keep working on an application that you have started online.

### \* Are you already enrolled in any benefits right now?

By benefits we mean:

- FoodShare
- BadgerCare Plus
- Wisconsin Medicaid
- Family Planning Only Services, OR
- Wisconsin Shares Child Care.

- Yes
- No

\* You may be able to apply without having to give us information we already have on file for you. To do this, you will need to log in to your MyACCESS account. Do you already have a MyACCESS account?

- Yes, I want to log in to my existing account.
- No, I want to create a new account.

ACCESS will work best with Internet Explorer version 8, 9 and 11. You may experience problems if you are using other browsers such as Firefox, Safari, or Chrome.

If you have questions or need help with your application, please call Member Services at 1-800-362-3002





### Which Benefits Would You Like to Apply For?

Check the box for each benefit you would like to apply for, then click the "Next" button at the bottom of the page.

- Health Care.** This includes benefits through BadgerCare Plus and/or Medicaid.
- Family Planning Only Services.** This program provides confidential, no-cost family planning services and supplies.
- Child Care.** This program provides help with paying for child care for children under 13 years old (up to 19 if special needs).

### Your Benefits

You cannot check the box to apply for the benefits listed below. This is because your household is already enrolled in these programs. In some cases, a worker is processing your case and will contact you soon with more information.

Click the Go to MyACCESS button for more details about your benefits or to get contact information for your agency.

This information is current as of Tuesday May 5, 2015.

Benefits	Status
Food Share 	In May 2015, your household is receiving Food Share.

Go to MyACCESS 

Next 



People



Other Benefits



Job Income



Other Income



Bills



Submit

## Household Members

Answer all the questions below. If we already have information about your household on file, you can see it by clicking on the Show Information link.

## Basic Information

This is the mailing address we have on file for you:

PO BOX 411  
W3236 WOLF RIVER DRIVE  
MILWAUKEE, Wisconsin 532010411

Preferred contact method: None

\* Has there been a change in your home address, your mailing address, or how to contact you?

Yes  No

Click the Show Information link to see what we have on file.

[Show Information](#)



### Changes in Your Home

These are the people who are currently in your household.



Bryan



Anna



Baby

\* Has anyone moved into or out of your household?

Yes  No

### People in Your Household

\* Has there been a change in personal information for anyone in your home? For example: have you gotten married or divorced, do you plan to move out of Wisconsin, or has there been a change in your citizenship/immigration status?

Yes  No

Click the Show Information link to see what we have on file.

[Show Information](#)

### Pregnancy

\* Is anyone now pregnant or do you want to report a change in a pregnancy you already reported?

Yes  No

### Disability

\* Has anyone become disabled, blind, or unable to work because of an illness or injury?

Yes  No

[Go to MyACCESS](#)

[Next](#)



# Right to Apply

- To preserve an applicant's right to apply without creating an authenticated account, the regular Apply for Benefits application is still available for applicants to use to apply for other programs.
- There are links to the Apply for Benefits Welcome page on the MyACCESS Account Set Up page and the Add a Program Landing page.



# Who Can Use Add a Program?

- Add a Program is available only to members with full-view MyACCESS status. This includes the primary person on a case and the primary person's spouse.
- Members who have what is known as target-view status cannot apply for additional programs using Add a Program and will be redirected to the regular Apply for Benefits application.



# Who Can Use Add a Program?

- Target viewers include:
  - Case members ages 18 or older who are not the primary person or primary person's spouse, such as a non-marital partner; or
  - The adult child of the primary person or primary person's spouse.



# Available Programs

- Add a Program can be used to streamline the ACCESS application for any of the following programs:
  - Child Care
  - FoodShare
  - Family Planning Only Services
  - Health Care
- Members cannot use Add a Program to apply for a program they are currently enrolled in or a program they are open for in a future month.



## Available Programs (continued)

- Members who are on a case where the only open program is Wisconsin Works (W-2) or SeniorCare will not be able to use the Add a Program feature and will instead be directed to the regular Apply for Benefits application.



# FoodShare and Child Care

- Due to the interview requirement for FoodShare and Child Care applications, requests for FoodShare only and/or Child Care only will follow a more streamlined flow.
- Members can report changes to contact information and enter information to determine whether they are eligible for FoodShare Priority Service (when FoodShare is requested).



# Additional Resources for Real-Time Eligibility and Add a Program

- Fact sheets
  - Add a Program
  - MyACCESS Account
- ACCESS Handbook
- Community partners webpage:  
<https://www.dhs.wisconsin.gov/forwardhealth/partners.htm>



# Questions About ACCESS Add a Program?