# Wisconsin SSI Payment Levels

**Effective January 1, 1995**

**Category of Eligible Individuals**  | **A** | **B** | **C** | **D** | **E**
--- | --- | --- | --- | --- | ---
Aged  | 458.00 | 305.34 | 458.00 | 305.34 | 458.00
     | 83.78  | 83.78  | 130.43 | 135.05 | 179.77

Blind  | 458.00 | 305.34 | 458.00 | 305.34 | 458.00
     | 83.78  | 83.78  | 130.43 | 135.05 | 179.77

Disabled  | 458.00 | 305.34 | 458.00 | 305.34 | 458.00
     | 83.78  | 83.78  | 130.43 | 135.05 | 179.77

Aged and Blind  | 687.00 | 458.00 | 687.00 | 477.41
Aged Spouse    | 132.05 | 132.05 | 477.41

Blind and Disabled  | 687.00 | 458.00 | 687.00 | 477.41
Blind Spouse     | 132.05 | 132.05 | 477.41

Aged and Disabled  | 687.00 | 458.00 | 687.00 | 477.41
Aged Spouse      | 132.05 | 132.05 | 477.41

Blind and Disabled  | 687.00 | 458.00 | 687.00 | 477.41
Disabled Spouse   | 132.05 | 132.05 | 477.41

**Upper amount = Federal SSI amount**
**Lower amount = State supplement payment**

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Gerald Whitburn  
Secretary  
Wisconsin Department of Health and Social Services

Paul D. Barnes  
Regional Commissioner  
Social Security Administration

Approved 4/24/95  
Effective Date 1/1/95

TN: 95-005  
Supersedes  
TN: 94-012
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. General Conditions of Eligibility</strong></td>
<td></td>
</tr>
<tr>
<td>Each individual covered under the plan:</td>
<td></td>
</tr>
<tr>
<td>42 CFR Part 435, Subpart G</td>
<td>1. Is financially eligible (using the methods and standards described in Parts B and C of this Attachment) to receive services.</td>
</tr>
<tr>
<td>a. For the categorically needy:</td>
<td></td>
</tr>
<tr>
<td>(i) Except as specified under items A.2.a.(ii) and (iii) below, for AFDC-related individuals, meets the non-financial eligibility conditions of the AFDC program.</td>
<td></td>
</tr>
<tr>
<td>(ii) For SSI-related individuals, meets the non-financial criteria of the SSI program or more restrictive SSI-related categorically needy criteria.</td>
<td></td>
</tr>
<tr>
<td>1902(m) of the Act</td>
<td>(iv) For financially eligible aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act, meets the non-financial criteria of section 1902(m) of the Act.</td>
</tr>
</tbody>
</table>
### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

**State:** Wisconsin

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1905(p) of the Act</td>
<td>b. For the medically needy, meets the non-financial eligibility conditions of 42 CFR Part 435.</td>
</tr>
<tr>
<td>1905(s) of the Act</td>
<td>c. For financially eligible qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, meets the non-financial criteria of section 1905(p) of the Act.</td>
</tr>
<tr>
<td>1905(s) of the Act</td>
<td>d. For financially eligible qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, meets the non-financial criteria of section 1905(s).</td>
</tr>
</tbody>
</table>

TN No. 09-023  
Supersedes New  
Approval date: **MAR 09 2010**  
Effective date: **10/01/2009**
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

Citation(s) | Condition or Requirement
--- | ---
42 CFR 435.406 | 3. Is residing in the United States and--
 | a. Is a citizen or national of the United States.
 | b. Is a qualified alien (QA) as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) as amended, and the QA’s eligibility is required by section 402(b) of PRWORA as amended, and is not prohibited by section 403 of PRWORA as amended.
 | c. Is a qualified alien subject to the 5-year bar as described in section 403 of PRWORA, so that eligibility is limited to treatment of an emergency medical condition as defined in section 401 of PRWORA.
 | d. Is a non-qualified alien, so that eligibility is limited to treatment of an emergency medical condition as defined in section 401 of PRWORA.
 | e. Is a qualified alien (QA) whose eligibility is authorized under section 402(b) of PRWORA as amended, and is not prohibited by section 403 of PRWORA as amended.
 | X State covers all authorized QAs.
 | _ State does not cover authorized QAs.
 | f. State elects Children’s Health Insurance Program Reauthorization Act (CHIPRA) option to provide full Medicaid coverage to otherwise eligible pregnant women or children as specified below who are aliens lawfully residing in the United States, including the following:

DHS Note: See MMDL form S89 for current information.

ATTACHMENT 2.6-A
Page 2

Approval Date: MAR 09 2010
Effective Date: October 1, 2009

TN No: 09-023
Supersedes
TN No. 91-0031
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

<table>
<thead>
<tr>
<th>Citation(s)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>(1) A “qualified alien” otherwise subject to the 5-year waiting period per section 403 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.</td>
</tr>
<tr>
<td></td>
<td>(2) A citizen of a Compact of Free Association State (i.e., Federated States of Micronesia, Republic of the Marshall Islands, and the Republic of Palau) who has been admitted to the U.S. as a non-immigrant and is permitted by the Department of Homeland Security to reside permanently or indefinitely in the U.S.</td>
</tr>
<tr>
<td></td>
<td>(3) An individual described in 8 CFR section 103.12(a)(4) who does not have a permanent residence in the country of their nationality and is in a status that permits the individual to remain in the U.S. for an indefinite period of time, pending adjustment of status. These individuals include all of the following:</td>
</tr>
<tr>
<td></td>
<td>(a) An individual currently in temporary resident status as an amnesty beneficiary pursuant to section 210 or 245A of the Immigration and Nationality Act (INA).</td>
</tr>
<tr>
<td></td>
<td>(b) An individual currently under temporary protected status pursuant to section 244 of the INA.</td>
</tr>
<tr>
<td></td>
<td>(c) A family unity beneficiary pursuant to section 301 of Public Law 101-649 as amended by, as well as pursuant to, section 1504 of Public Law 106-554.</td>
</tr>
<tr>
<td></td>
<td>(d) An individual currently under deferred enforced departure pursuant to a decision made by the President.</td>
</tr>
<tr>
<td></td>
<td>(e) An individual who is the spouse or child of a U.S. citizen whose visa petition has been approved and who has a pending application for adjustment of status.</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL form S89 for current information.

ATTACHMENT 2.6-A
Page 2a

Supersedes
New

Approval Date: MAR 09 2010
Effective Date: October 1, 2009
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

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<tbody>
<tr>
<td></td>
<td>(4) An individual in non-immigrant classifications under the INA who is permitted to remain in the U.S. for an indefinite period, including all of the following as specified in section 101(a)(15) of the INA:</td>
</tr>
<tr>
<td></td>
<td>(a) A parent or child of an individual with special immigrant status under section 101(a)(27) of the INA, as permitted under section 101(a)(15)(N) of the INA.</td>
</tr>
<tr>
<td></td>
<td>(b) A fiancé of a citizen, as permitted under section 101(a)(15)(K) of the INA.</td>
</tr>
<tr>
<td></td>
<td>(c) A religious worker under section 101(a)(15)(R).</td>
</tr>
<tr>
<td></td>
<td>(d) An individual assisting the Department of Justice in a criminal investigation, as permitted under section 101(a)(15)(S) of the INA.</td>
</tr>
<tr>
<td></td>
<td>(e) A battered alien under section 101(a)(15)(U) (see also section 431 as amended by PRWORA).</td>
</tr>
<tr>
<td></td>
<td>(f) An individual with a petition pending for 3 years or more, as permitted under section 101(a)(15)(V) of the INA.</td>
</tr>
<tr>
<td>X</td>
<td>Elected for pregnant women.</td>
</tr>
<tr>
<td>X</td>
<td>Elected for children under age 21.</td>
</tr>
<tr>
<td>g. The State provides assurance that for an individual whom it enrolls in Medicaid under the CHIPRA section 214 option, it has verified, at the time of the individual’s initial eligibility determination and at the time of the eligibility redetermination, that the individual continues to be lawfully residing in the United States. The State must first attempt to verify this status using information provided at the time of initial application. If the State cannot do so from the information readily available, it must require the individual to provide documentation or further evidence to verify satisfactory immigration status in the same manner as it would for anyone else claiming satisfactory immigration status under section 1137(d) of the Act.</td>
<td></td>
</tr>
</tbody>
</table>

TN No: 09-023
Supersedes New

Approval Date: MAR 09 2010 Effective Date: October 1, 2009

DHS Note: See MMDL form S89 for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

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</thead>
<tbody>
<tr>
<td>42 CFR 435.403 1902(b) of the Act</td>
<td>4. Is a resident of the State, regardless of whether or not the individual maintains the residence permanently or maintains it at a fixed address.</td>
</tr>
</tbody>
</table>

☑ State has interstate residency agreement with the following States.

- Alabama 4/27/87
- Arkansas 5/21/82
- California 4/21/82
- Florida 4/14/82
- Georgia 4/19/82
- Idaho 5/20/82
- Kansas 7/12/82
- Kentucky 5/14/82
- Maryland 7/27/82
- Minnesota 12/14/82
- Mississippi 4/11/82
- New Mexico 4/6/82
- North Dakota 4/13/82
- Ohio 4/23/82
- Pennsylvania 5/20/82
- South Carolina 4/27/82
- South Dakota 4/6/82
- Texas 4/28/82
- Virginia 6/29/82
- West Virginia 4/20/82

☐ State has open agreement(s).

☐ Not applicable; no residency requirement.

☑ State has interstate compact on adoption and medical assistance with the following States.

- Arizona 11/2/92
- Arkansas 7/7/86
- Colorado 7/7/86
- Delaware 7/7/86
- Georgia 1/21/88
- Hawaii 12/23/87
- Kansas 7/7/86
- Kentucky 7/15/86
- Maine 7/7/86
- Massachusetts 2/12/88
- Minnesota 7/7/86
- Mississippi 5/31/89
- Missouri 7/7/86
- Nebraska 7/7/86
- Nevada 9/3/87
- New Hampshire 7/7/86
- New Mexico 7/10/86
- Oklahoma 7/10/86
- Rhode Island 9/13/89
- Utah 7/7/86
- Virginia 10/24/91
- West Virginia 11/19/86

DHS Note: See MMDL form S88 for current information.
Pursuant to the authority conferred upon me by the laws of my state, the undersigned hereby enters into the Interstate Compact on Adoption and Medical Assistance on behalf of the State of ARIZONA, and signifies that the agency which the undersigned represents has the authority to perform the actions required by the Compact and to provide or cause to be provided the services and benefits required by the Compact in the manner and to the extent necessary for compliance therewith.

Executed this 2nd day of November, 1992, on behalf of the State of ARIZONA by:

Signed: Leland W. Moss
Title: Manager, Field Support
Agency: Administration for Children, Youth and Families
Department of Economic Security

Signature: ____________________________
Title: ____________________________
Agency: ____________________________
<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>435.1008</td>
<td>5. a. Is not an inmate of a public institution. Public institutions do not include medical institutions, intermediate care facilities, or publicly operated community residences that serve no more than 16 residents, or certain child care institutions.</td>
</tr>
<tr>
<td>42 CFR 435.1008 1905(a) of the Act</td>
<td>b. Is not a patient under age 65 in an institution for mental diseases except as an inpatient under age 22 receiving active treatment in an accredited psychiatric facility or program. Not applicable with respect to individuals under age 22 in psychiatric facilities or programs. Such services are not provided under the plan.</td>
</tr>
<tr>
<td>433.145 435.604 1912 of the Act</td>
<td>6. Is required, as a condition of eligibility, to assign rights to medical support and to payments for medical care from any third party, to cooperate in obtaining such support and payments, and to cooperate in identifying and providing information to assist in pursuing any liable third party. The assignment of rights obtained from an applicant or recipient is effective only for services that are reimbursed by Medicaid. The requirements of 42 CFR 433.146 through 433.148 are met. Assignment of rights is automatic because of State law.</td>
</tr>
<tr>
<td>42 CFR 435.910</td>
<td>7. Is required, as a condition of eligibility, to furnish his/her social security account number (or numbers, if he/she has more than one number).</td>
</tr>
</tbody>
</table>

TN No. 21-0031 Superseded Approval Date 2-3-92 Effective Date 10/1/91

HCFA ID: 7985E
Citation | Condition or Requirement
---|---
1902(c)(2) | 8. Is not required to apply for AFDC benefits under title IV-A as a condition of applying for, or receiving, Medicaid if the individual is a pregnant woman, infant, or child that the State elects to cover under sections 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX) of the Act.

1902(e)(10)(A) and (B) of the Act | 9. Is not required, as an individual child or pregnant woman, to meet requirements under section 402(a)(43) of the Act to be in certain living arrangements. (Prior to terminating AFDC individuals who do not meet such requirements under a State's AFDC plan, the agency determines if they are otherwise eligible under the State's Medicaid plan.)
10. Is required to apply for enrollment in an employer-based cost-effective group health plan, if such plan is available to the individual. Enrollment is a condition of eligibility except for the individual who is unable to enroll on his/her own behalf (failure of a parent to enroll a child does not affect a child's eligibility).

TN No. 92-0023
Supersedes Approval Date 3/18/93 Effective Date 7-1-92
TN No. NEW
HCFA ID: 7985E
### Citation Condition or Requirement

#### B. Posteligibility Treatment of Institutionalized Individuals' Incomes

1. The following items are not considered in the posteligibility process:

<table>
<thead>
<tr>
<th>Citation</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1902(o) of the Act</td>
<td>a. SSI and SSP benefits paid under §1611(e)(1)(E) and (G) of the Act to individuals who receive care in a hospital, nursing home, SNF, or ICF.</td>
</tr>
<tr>
<td>Bondi v Sullivan (SSI)</td>
<td>b. Austrian Reparation Payments (pension (reparation) payments made under §500 - 506 of the Austrian General Social Insurance Act). Applies only if State follows SSI program rules with respect to the payments.</td>
</tr>
<tr>
<td>1902(r)(1) of the Act</td>
<td>c. German Reparations Payments (reparation payments made by the Federal Republic of Germany).</td>
</tr>
<tr>
<td>6(h)(2) of P. L. 101-426</td>
<td>f. Payments from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the In re Agent Orange product liability litigation. M.D.L. No. 381 (E.D.N.Y.)</td>
</tr>
<tr>
<td></td>
<td>h. VA pensions limited to $90 per month under 38 U.S.C. 5503.</td>
</tr>
</tbody>
</table>

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Supersedes TN No. 98-002

Approval Date 6/18/98

Effective Date 1/1/98
The following monthly amounts for personal needs are deducted from total monthly income in the application of an institutionalized individual's or couple's income to the cost of institutionalized care:

Personal Needs Allowance (PNA) of not less than $30 for individuals and $60 for couples for all institutionalized persons.

a. Aged, blind, disabled:
   Individuals $45
   Couples $90

For the following persons with greater need:

Supplement 12 to Attachment 2.6-A describes the greater need; describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

b. AFDC related:
   Children $45
   Adults $45

For the following persons with greater need:

Supplement 12 to Attachment 2.6-A describes the greater need; describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

c. Individual under age 21 covered in the plan as specified in Item B.7. of Attachment 2.2-A.
   $45
For the following persons with greater need:

Supplement 12 to Attachment 2.6-A describes the greater need; describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

1924 of the Act
3. In addition to the amounts under item 2, the following monthly amounts are deducted from the remaining income of an institutionalized individual with a community spouse:

a. The monthly income allowance for the community spouse, calculated using the formula in §1924(d)(2), is the amount by which the maintenance needs standard exceeds the community spouse's income. The maintenance needs standard cannot exceed the maximum prescribed in §1924(d)(3)(C). The maintenance needs standard consists of a poverty level component plus an excess shelter allowance.

The poverty level component is calculated using the applicable percentage (set out §1924(d)(3)(B) of the Act) of the official poverty level.

The poverty level component is calculated using a percentage greater than the applicable percentage, equal to 200% of the official poverty level (still subject to maximum maintenance needs standard).

The maintenance needs standard for all community spouses is set at the maximum permitted by §1924(d)(3)(C).

Except that, when applicable, the State will set the community spouse's monthly income allowance at the amount by which exceptional maintenance needs, established at a fair hearing, exceed the community spouse's income, or at the amount of any court-ordered support.
In determining any excess shelter allowance, utility expenses are calculated using:

- the standard utility allowance under §5(e) of the Food Stamp Act of 1977, or
- the actual unreimbursable amount of the community spouse’s utility expenses less any portion of such amount included in condominium or cooperative charges.

b. The monthly income allowance for other dependent family members living with the community spouse is:

- one-third of the amount by which the poverty level component (calculated under §1924(d)(3)(A)(i) of the Act, using the applicable percentage specified in §1924 (d)(3)(B) ) exceeds the dependent family member’s monthly income.

- a greater amount calculated as follows:

The following definition is used in lieu of the definition provided by the Secretary to determine the dependency of family members under §1924 (d)(1):

c. Amounts for health care expenses described below that are incurred by and for the institutionalized individual and are not subject to payments by a third party:

(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.

(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amounts are described in Supplement 3 to ATTACHMENT 2.6-A.)
4. In addition to any amounts deductible under the items above, the following monthly amounts are deducted from the remaining monthly income of an institutionalized individual or an institutionalized couple:

a. An amount for the maintenance needs of each member of a family living in the institutionalized individual’s home with no community spouse living in the home. The amount must be based on a reasonable assessment of need but must not exceed the higher of the:

- AFDC level; or
- Medically needy level:

(Check one)

- AFDC levels in Supplement 1
- Medically needy level in Supplement 1
- Other: $________

b. Amounts for health care expenses described below that have not been deducted under 3.c. above (i.e., for an institutionalized individual with a community spouse), are incurred by and for the institutionalized individual or institutionalized couple, and are not subject to the payment by a third party:

(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.

(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amount are described in Supplement 3 to ATTACHMENT 2.6-A.)

5. At the option of the State, as specified below, the following is deducted from any remaining monthly income of an institutionalized individual or an institutionalized couple:

- No.
- Yes (the applicable amount is shown on page 5a.)
State: Wisconsin

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
</table>
|          | Amount for maintenance of home is:  
|          | √ Amount for maintenance of home is the actual maintenance costs not to exceed $950.77.  
|          | □ Amount for maintenance of home is deductible when countable income is determined under § 1924(d)(1) of the Act only if the individuals' home and the community spouse's home are different.  
|          | □ Amount for maintenance of home is not deductible when countable income is determined under § 1924(d)(1) of the Act.  
|          | 7/12/19 |
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

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<tbody>
<tr>
<td>42 CFR 435.711 435.721, 435.831</td>
<td><strong>C. Financial Eligibility</strong></td>
</tr>
<tr>
<td></td>
<td>For individuals who are AFDC or SSI recipients, the income and resource levels and methods for determining countable income and resources of the AFDC and SSI program apply, unless the plan provides for more restrictive levels and methods than SSI for SSI recipients under section 1902(f) of the Act, or more liberal methods under section 1902(r)(2) of the Act, as specified below.</td>
</tr>
<tr>
<td></td>
<td>For individuals who are not AFDC or SSI recipients in a non-section 1902(f) State and those who are deemed to be cash assistance recipients, the financial eligibility requirements specified in this section C apply.</td>
</tr>
<tr>
<td>Citation</td>
<td>Condition or Requirement</td>
</tr>
<tr>
<td>-------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Supplement 2 to ATTACHMENT 2.6-A</td>
<td>specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups.</td>
</tr>
<tr>
<td>Supplement 7 to ATTACHMENT 2.6-A</td>
<td>specifies the income levels for categorically needy aged, blind and disabled persons who are covered under requirements more restrict than SSI.</td>
</tr>
<tr>
<td>Supplement 4 to ATTACHMENT 2.6-A</td>
<td>specifies the methods for determining income eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.</td>
</tr>
<tr>
<td>Supplement 5 to ATTACHMENT 2.6-A</td>
<td>specifies the methods for determining resource eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act.</td>
</tr>
<tr>
<td>Supplement 8a to ATTACHMENT 2.6-A</td>
<td>specifies the methods for determining income eligibility used by States that are more liberal than the methods of the cash assistance programs permitted under section 1902(r)(2) of the Act.</td>
</tr>
<tr>
<td>Supplement 8b to ATTACHMENT 2.6-A</td>
<td>specifies the methods for determining resource eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act.</td>
</tr>
<tr>
<td>Supplement 14 to ATTACHMENT 2.6-A</td>
<td>specifies income level used by states for determining eligibility of Tuberculosis infected individuals whose eligibility is determined under section 1902(z)(1) of the Act.</td>
</tr>
</tbody>
</table>

TN No. 95-031
Supersedes
TN No. 91-0031

Approval Date 11/31/95
Effective Date 7-20-95
## ELIGIBILITY CONDITIONS AND REQUIREMENTS

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<tbody>
<tr>
<td>1902(r)(2) of the Act</td>
<td>1. Methods of Determining Income</td>
</tr>
<tr>
<td>1902(e)(6) the Act</td>
<td></td>
</tr>
<tr>
<td>1902(e)(6) the Act</td>
<td></td>
</tr>
</tbody>
</table>

### 1. Methods of Determining Income

- **a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).**
  - (1) In determining countable income for AFDC-related individuals, the following methods are used:
    - (a) The methods under the State's approved AFDC plan only; or
    - (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
  - (2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.
  - (3) Agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.

### Approval and Effective Dates

- **TN No.** 92-0015
- **Supersedes** TN No. 91-0031
- **Approval Date** 7/29/92
- **Effective Date** 4/1/92
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

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<tbody>
<tr>
<td>42 CFR 435.721, 435.831, and 1902(m)(1)(B)(m)(4) and 1902(r)(2) of the Act</td>
<td><strong>b.</strong> Aged individuals. In determining countable income for aged individuals, including aged individuals with incomes up to the Federal poverty level described in section 1902(m)(1) of the Act, the following methods are used:</td>
</tr>
<tr>
<td></td>
<td>The methods of the SSI program only.</td>
</tr>
<tr>
<td></td>
<td>The methods of the SSI program and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
</tbody>
</table>

TN No. 92-0015 Supersedes TN No. 91-0031

Approval Date 7/29/92 Effective Date 4/1/92
For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A; and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

For institutional couples, the methods specified under section 1611(e)(5) of the Act.

For optional State supplement recipients under §435.230, income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A.

For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements--

SSI methods only.

SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.

Methods more restrictive and/or more liberal than SSI. More restrictive methods are described in Supplement 4 to ATTACHMENT 2.6-A and more liberal methods are described in Supplement 8a to ATTACHMENT 2.6-A.

In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses.
Citation | Condition or Requirement
--- | ---
42 CFR 435.721 and 435.831 | c. **Blind individuals.** In determining countable income for blind individuals, the following methods are used:
| | The methods of the SSI program only.
| | **X** SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A, and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

For institutional couples, the methods specified under section 1611(e)(5) of the Act.

For optional State supplement recipients under §435.230, income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A.

For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements--

| | SSI methods only.
| | **X** SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.
| | Methods more restrictive and/or more liberal than SSI. More restrictive methods are described in Supplement 4 to ATTACHMENT 2.6-A and more liberal methods are described in Supplement 8a to ATTACHMENT 2.6-A.

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**TN No. 91-7031**
**Supersedes**
**TN No. 89-0014**

**Approval Date** 2-2-92
**Effective Date** 10/1/91

HCFA ID: 7985E
<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>42 CFR 435.721, and 435.831</td>
<td>In determining relative responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.</td>
</tr>
<tr>
<td>1902(m)(1)(B), (m)(4), and 1902(r)(2) of the Act</td>
<td>d. Disabled individuals. In determining countable income of disabled individuals, including individuals with incomes up to the Federal poverty level described in section 1902(m) of the Act the following methods are used:</td>
</tr>
<tr>
<td></td>
<td>— The methods of the SSI program.</td>
</tr>
<tr>
<td></td>
<td>X SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>— For institutional couples: the methods specified under section 1611(e)(5) of the Act.</td>
</tr>
<tr>
<td></td>
<td>X For optional State supplement recipients under §435.230: income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>— For individuals other than optional State supplement recipients (except aged and disabled individuals described in section 1903(m)(1) of the Act): more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A; and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
</tbody>
</table>
Condition or Requirement

For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements:

SSI methods only.

SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.

Methods more restrictive and/or more liberal than SSI, except for aged and disabled individuals described in section 1902(m)(1) of the Act. More restrictive methods are described in Supplement 4 to ATTACHMENT 2.6-A and more liberal methods are specified in Supplement 8a to ATTACHMENT 2.6-A.

In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(1)(3)(E) and 1902(r)(2) of the Act</td>
<td>e. Poverty level pregnant women, infants, and children. For pregnant women and infants or children covered under the provisions of sections 1902(a)(10)(A)(i)(IV), (VI), and (VII), and 1902(a)(10)(A)(ii)(IX) of the Act—</td>
</tr>
<tr>
<td></td>
<td>(1) The following methods are used in determining countable income:</td>
</tr>
<tr>
<td></td>
<td>The methods of the State's approved AFDC plan.</td>
</tr>
<tr>
<td></td>
<td>The methods of the approved title IV-E plan.</td>
</tr>
<tr>
<td></td>
<td>The methods of the approved AFDC State plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S10, S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

Supersedes

TN No. 92-0015

Approval Date 7/29/92

Effective Date 4/1/92

TN No. 91-0031
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(e)(6) of the Act</td>
<td>In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.</td>
</tr>
<tr>
<td>1905(p)(1), 1902(m)(4), and 1902(r)(2) of the Act</td>
<td>(3) The agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.</td>
</tr>
<tr>
<td>1902(a)(10)(E)(i) of the Act</td>
<td>f. Qualified Medicare beneficiaries. In determining countable income for qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, the following methods are used:</td>
</tr>
<tr>
<td></td>
<td>The methods of the SSI program only.</td>
</tr>
<tr>
<td></td>
<td>X SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>For institutional couples, the methods specified under section 1611(e)(5) of the Act.</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.

<table>
<thead>
<tr>
<th>Condition or Requirement</th>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified disabled and working individuals.</td>
<td>1905(s) of the Act g. (1)</td>
</tr>
<tr>
<td>In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.</td>
<td></td>
</tr>
<tr>
<td>Specified low-income Medicare beneficiaries.</td>
<td>1905(p) of the Act (2)</td>
</tr>
<tr>
<td>In determining countable income for specified low-income Medicare beneficiaries covered under 1902(a)(10)(E)(iii) of the Act, the same method as in f. is used.</td>
<td></td>
</tr>
</tbody>
</table>
DHS Note: See MMDL form S10 for current information.

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(u) of the Act</td>
<td>(h) COBRA Continuation Beneficiaries</td>
</tr>
</tbody>
</table>

In determining countable income for COBRA continuation beneficiaries, the following disregards are applied:

- The disregards of the SSI program;
- The agency uses methodologies for treatment of income more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A.

NOTE: For COBRA continuation beneficiaries specified at 1902(u)(4), costs incurred from medical care or for any other type of remedial care shall not be taken into account in determining income, except as provided in section 1612(b)(4)(B)(ii).

NOT APPLICABLE

<table>
<thead>
<tr>
<th>TN No.</th>
<th>Approval Date</th>
<th>Effective Date</th>
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</thead>
<tbody>
<tr>
<td>91-0040</td>
<td>3-6-92</td>
<td>10/1/91</td>
</tr>
<tr>
<td>NEW</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
State/Territory: Wisconsin

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In determining countable income and resources for working disabled individuals who buy in to Medicaid, the following methodologies are applied:</td>
</tr>
<tr>
<td></td>
<td>____ The methodologies of the SSI program.</td>
</tr>
<tr>
<td></td>
<td>____ The agency uses methodologies for treatment of income and resources more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>X The agency uses more liberal income and/or resource methodologies than the SSI program. More liberal methodologies are described in Supplement 8a to Attachment 2.6-A. More liberal resource methodologies are described in Supplement 8b to Attachment 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>X The agency requires individuals to pay premiums or other cost-sharing charges. The premiums or other cost-sharing charges, and how they are applied, are described below.</td>
</tr>
</tbody>
</table>

TN No. 99-005  
Supersedes TN No. New  
Approval Date 9/2/94  
Effective Date 1/1/2000  
HCFA ID:
Premium structure under this section:
Individuals eligible for Medicaid under this section will be subject to the following premium structure.

A. Monthly premium: A monthly premium will be calculated based on the sum of the premium for earned income and the premium for unearned income. Premium amounts will be set within ranges to avoid burdensome administrative changes for small changes in earnings. The calculation of the earned and unearned income premiums are described below.

   Earned Income: The premium for earned income will be 3.0 - 3.5% of earned income.

   Unearned Income: 100% of total unearned income minus allowed deductions.

Deductions:
1. A maintenance allowance established which will not be less than the sum of $20, the federal supplemental security income payment level determined under 42 USC 1382 (b) and the state supplemental payment determined under s. 49.77 (2m) Wisconsin statutes.
2. Medical and remedial expenses.
3. Impairment-related work expenses.

Deductions in excess of the individual's total unearned income will be subtracted from the gross monthly earned income before applying the earned income premium calculation.
B. Additional Provisions:

1. Monthly premiums on earnings and unearned income calculated to be below $10.00 may be waived for all persons for administrative cost-efficiency.

2. For individuals under age 18 the deeming of parental income and assets will apply when determining entry premiums and monthly premiums.

3. Monthly premiums based on earned income will not be assessed upon individuals with a total gross income (both earned and unearned) less than 150% of the FPL.

4. Any allowed deductions in excess of unearned income will be deducted from earned income for calculation of the monthly premium.

5. The department may waive all or part of the premium for an applicant based on application of uniform, objective criteria which result in a department finding that: undue hardship would result which is injurious to the program's intent, cost-effectiveness of the program would be reduced, or the public interest would not be served.

A finding by the department of any of the following, for example, would qualify for a hardship waiver:

- The individual would in all likelihood need to quit paid employment above the SSI Substantial Gainful Activity Level in order to obtain the health and long-term care services needed to live.

- The individual is receiving publicly funded long-term care services in Wisconsin under s. 49.45, s. 46.27, s. 46.277, s. 46.278 of Wisconsin statutes whose monthly premium under this section would be significantly higher compared to obligations for post-eligibility treatment of income at the time of application.

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1 s. 49.45 refers to the Medicaid program, s. 46.27, s. 46.277, s. 46.278 refers to the home and community-based waivers
<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(k) of the Act</td>
<td><strong>2. Medicaid Qualifying Trusts</strong> In the case of a Medicaid qualifying trust described in section 1902(k)(2) of the Act, the amount from the trust that is deemed available to the individual who established the trust (or whose spouse established the trust) is the maximum amount that the trustee(s) is permitted under the trust to distribute to the individual. This amount is deemed available to the individual, whether or not the distribution is actually made. This provision does not apply to any trust or initial trust decree established before April 7, 1986, solely for the benefit of a mentally retarded individual who resides in an intermediate care facility for the mentally retarded. The agency does not count the funds in a trust as described above in any instance where the State determines that it would work an undue hardship. Supplement 10 of ATTACHMENT 2.6-A specifies what constitutes an undue hardship.</td>
</tr>
<tr>
<td>1902(a)(10) of the Act</td>
<td><strong>3. Medically needy income levels (MNILs) are based on family size.</strong> Supplement 1 to ATTACHMENT 2.6-A specifies the MNILs for all covered medically needy groups. If the agency chooses more restrictive levels under section 1902(f) of the Act, Supplement 1 so indicates.</td>
</tr>
</tbody>
</table>
Handling of Excess Income - Spend-down for the Medically Needy in All States and the Categorically Needy in 1902(f) States Only

a. Medically Needy

(1) Income in excess of the MNIL is considered as available for payment of medical care and services. The Medicaid agency measures available income for a period of 6 month(s) (not to exceed 6 months) to determine the amount of excess countable income applicable to the cost of medical care and services.

(2) If countable income exceeds the MNIL standard, the agency deducts the following incurred expenses in the following order:

(a) Health insurance premiums, deductibles and coinsurance charges.

(b) Expenses for necessary medical and remedial care not included in the plan.

(c) Expenses for necessary medical and remedial care included in the plan.

Reasonable limits on amounts of expenses deducted from income under a.(2)(a) and (b) above are listed below.

Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly-funded program (other than Medicaid) of a State or local government.
<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1903(f)(2) of the Act</td>
<td>X (3) If countable income exceeds the MNIL standard, the agency deducts spenddown payments made to the State by the individual.</td>
</tr>
<tr>
<td></td>
<td>(4) Individuals are provided the opportunity to elect or reject the pay-in spenddown option:</td>
</tr>
<tr>
<td></td>
<td>X monthly</td>
</tr>
<tr>
<td></td>
<td>___ quarterly</td>
</tr>
<tr>
<td></td>
<td>(5) Subject to 42 C.F.R. 435.602 and the provisions in Supplement 8a to Attachment 2.6-A of the State plan, the state will use MAGI-based income methodologies for purposes of determining medically needy eligibility for the following categories of individuals:</td>
</tr>
<tr>
<td></td>
<td>X Pregnant women</td>
</tr>
<tr>
<td></td>
<td>X Children</td>
</tr>
<tr>
<td></td>
<td>___ Parents and caretaker relatives</td>
</tr>
</tbody>
</table>

TN No. 14-021
Supersedes TN No. 05-005
Approval Date 03/19/15
Effective Date 10/01/14
Citation | Condition or Requirement
--- | ---
42 CFR 435.732 | **b. Categorically Needy - Section 1902 (f) States**
The agency applies the following policy under the provisions of section 1902(f) of the Act. The following amounts are deducted from income to determine the individual's countable income:

1. Any SSI benefit received.
2. Any State supplement received that is within the scope of an agreement described in sections 1616 or 1634 of the Act, or a State supplement within the scope of section 1902(a)(10)(A)(ii)(X1) of the Act.
3. Increases in OASDI that are deducted under §§435.134 and 435.135 for individuals specified in that section, in the manner elected by the State under that section.
4. Other deductions from income described in this plan at Attachment 2.6-A, Supplement 4.
5. Incurred expenses for necessary medical and remedial services recognized under State law.

1902(a)(17) of the Act, P.L. 100-203 | Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly funded program (other than Medicaid) of a State or local government.
<table>
<thead>
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</thead>
<tbody>
<tr>
<td>4.b. <strong>Categorically Needy - Section 1902(f) States</strong> Continued</td>
<td>(6) Spenddown payments made to the State by the individual. NOTE: FFP will be reduced to the extent a State is paid a spenddown payment by the individual.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>91-0040</td>
<td>3-6-72</td>
<td>10/1/91</td>
</tr>
</tbody>
</table>

Supersedes ____________________________

TN No. NEW —
5. Methods for Determining Resources

a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).

(1) In determining countable resources for AFDC-related individuals, the following methods are used:

(a) The methods under the State's approved AFDC plan; and

(b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.

(2) In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.

Approval Date 2/3/92 Effective Date 10/1/91
HCFA ID: 7985E
5. Methods for Determining Resources

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B), and (C), and 1902(r) of the Act</td>
<td>b. <strong>Aged individuals.</strong> For aged individuals covered under section 1902(a)(10)(A)(I)(X) of the Act, the agency used the following methods for treatment of resources:</td>
</tr>
<tr>
<td></td>
<td>____ The methods of the SSI program.</td>
</tr>
<tr>
<td></td>
<td>____ X SSI methods and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>____ Methods that are more restrictive (except for individuals described in section 1902(m)(1) of the Act) and/or more liberal than those of the SSI program. Supplement 5 to ATTACHMENT 2.6-A describes the more restrictive methods and Supplement 8b to ATTACHMENT 2.6-A specifies the more liberal methods.</td>
</tr>
<tr>
<td>Citation</td>
<td>Condition or Requirement</td>
</tr>
<tr>
<td>----------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B), and 1902(r) of the Act</td>
<td>In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses.</td>
</tr>
<tr>
<td></td>
<td>c. <strong>Blind individuals.</strong> For blind individuals the agency uses the following methods for treatment of resources:</td>
</tr>
<tr>
<td></td>
<td>- The methods of the SSI program.</td>
</tr>
<tr>
<td></td>
<td><strong>X</strong> SSI methods and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>Methods that are more restrictive and/or more liberal than those of the SSI program. Supplement 5 to ATTACHMENT 2.6-A describe the more restrictive methods and Supplement 8b to ATTACHMENT 2.6-A specify the more liberal methods.</td>
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In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.
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</thead>
<tbody>
<tr>
<td>1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B) and (C), and 1902(r)(2) of the Act</td>
<td>d. Disabled individuals, including individuals covered under section 1902(a)(10)(A)(I)(X) of the Act. The agency uses the following methods for the treatment of resources:</td>
</tr>
<tr>
<td></td>
<td>__ The methods of the SSI program.</td>
</tr>
<tr>
<td></td>
<td>X SSI methods and/or any more liberal methods described in Supplement Sa to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>__ Methods that are more restrictive (except for individuals described in section 1902(m)(1) of the Act) and/or more liberal that those under the SSI program. More restrictive methods are described in Supplement 5 to ATTACHMENT 2.6-A and more liberal methods are specified in Supplement Sb to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The agency uses the following methods in the treatment of resources.</td>
</tr>
<tr>
<td></td>
<td>__ The methods of the SSI program only.</td>
</tr>
<tr>
<td></td>
<td>__ The methods of the SSI program and/or any more liberal methods described in Supplement Sa or Supplement Sb to ATTACHMENT 2.6-A.</td>
</tr>
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</table>

TN No. 91-0031
Supersedes TN No. 87-0012
Approval Date 2-3-92
Effective Date 10/1/91
HCFA ID: 7985E
<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(1)(3) and 1902(r)(2) of the Act</td>
<td>Methods that are more liberal than those of SSI. The more liberal methods are specified in Supplement Sa or Supplement 8b to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>1902(1)(3)(C) of the Act</td>
<td>Not applicable. The agency does not consider resources in determining eligibility.</td>
</tr>
<tr>
<td>1902(r)(2) of the Act</td>
<td>In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.</td>
</tr>
<tr>
<td>Poverty level infants covered under section 1902(a)(10)(A)(1)(IV) of the Act.</td>
<td>The agency uses the following methods for the treatment of resources:</td>
</tr>
<tr>
<td></td>
<td>The methods of the State's approved AFDC plan.</td>
</tr>
<tr>
<td>1902(1)(3)(C) of the Act</td>
<td>Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), in accordance with section 1902(1)(3)(C) of the Act, as specified in Supplement Sa of ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>1902(r)(2) of the Act</td>
<td>Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in Supplement Sa or Supplement 8b to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>Not applicable. The agency does not consider resources in determining eligibility.</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(1)(3) and 1902(r)(2) of the Act</td>
<td>g. 1. Poverty level children covered under section 1902(a)(10)(A)(1)(VI) of the Act. The agency uses the following methods for the treatment of resources:</td>
</tr>
<tr>
<td>1902(1)(3)(C) of the Act</td>
<td>Methods more liberal than those in the State's approved AFDC plan, as described in Supplement 8b to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>1902(r)(2) of the Act</td>
<td>Not applicable. The agency does not consider resources in determining eligibility. In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.</td>
</tr>
</tbody>
</table>

TN No. 91-0031

Supersedes TN No. 91-0031

Approval Date 7/29/92

Effective Date 4/1/92
# State Plan Under Title XIX of the Social Security Act

**State:** Wisconsin

## Eligibility Conditions and Requirements

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(1)(3) and 1902(r)(2) of the Act</td>
<td>2. Poverty level children under section 1902(a)(10)(A)(VII)</td>
</tr>
<tr>
<td>1902(1)(3)(C) of the Act</td>
<td>Methods more liberal than those in the State's approved AFDC plan (but not more restrictive) as specified in Supplement Sa of ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>1902(r)(2) of the Act</td>
<td>Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in Supplement 8a to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td></td>
<td>X Not applicable. The agency does not consider resources in determining eligibility.</td>
</tr>
</tbody>
</table>

In determining relative responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.

---

**DHS Note:** See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
</table>
| 1905(p)(1) (C) and (D) and 1902(r)(2) of the Act | 5. h. For Qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act the agency uses the following methods for treatment of resources:  
- The methods of the SSI program only.  
- X The methods of the SSI program and/or more liberal methods as described in Supplement 3b to ATTACHMENT 2.6-A. |
| 1905(s) of the Act | i. For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the agency uses SSI program methods for the treatment of resources. |
| 1902(u) of the Act | j. For COBRA continuation beneficiaries, the agency uses the following methods for treatment of resources:  
- The methods of the SSI program only.  
- More restrictive methods applied under section 1902(f) of the Act as described in Supplement 5 to Attachment 2.6-A. |

TN No. 91-0040  
Supersedes Approval Date 3-6-92 Effective Date 10/1/91

TN No. 91-0031  
HCFA ID: 7985E
k. Specified low-income Medicare beneficiaries covered under section 1902(a)(10)(E)(iii) of the Act

The agency uses the same method as in 5.h. of Attachment 2.6-A.

6. Resource Standard - Categorically Needy

a. 1902(f) States (except as specified under items 6.c. and d. below) for aged, blind and disabled individuals:

- Same as SSI resource standards.
- More restrictive.

The resource standards for other individuals are the same as those in the related cash assistance program.

b. Non-1902(f) States (except as specified under items 6.c. and d. below)

The resource standards are the same as those in the related cash assistance program.

Supplement 8 to ATTACHMENT 2.6-A specifies for 1902(f) States the categorically needy resource levels for all covered categorically needy groups.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(1)(3)(A), (B) and (C) of the Act</td>
<td>c. For pregnant women and infants covered under the provisions of section 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX) of the Act, the agency applies a resource standard.</td>
</tr>
<tr>
<td></td>
<td>Yes. Supplement 2 to ATTACHMENT 2.6-A specifies the standard which, for pregnant women, is no more restrictive than the standard under the SSI program; and for infants is no more restrictive than the standard applied in the State's approved AFDC plan.</td>
</tr>
<tr>
<td></td>
<td>X No. The agency does not apply a resource standard to these individuals.</td>
</tr>
<tr>
<td>1902(1)(3)(A) and (C) of the Act</td>
<td>d. For children covered under the provisions of section 1902(a)(10)(A)(i)(VI) of the Act, the agency applies a resource standard.</td>
</tr>
<tr>
<td></td>
<td>Yes. Supplement 2 to ATTACHMENT 2.6-A specifies the standard which is no more restrictive than the standard applied in the State's approved AFDC plan.</td>
</tr>
<tr>
<td></td>
<td>X No. The agency does not apply a resource standard to these individuals.</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
e. For aged and disabled individuals described in section 1902(m)(1) of the Act who are covered under section 1902(a)(10)(A)(ii)(X) of the Act, the resource standard is:

- Same as SSI resource standards.
- Same as the medically needy resource standards, which are higher than the SSI resource standards (if the State covers the medically needy).

Supplement 2 to ATTACHMENT 2.6-A specifies the resource levels for these individuals.
C. **Financial Eligibility (Continued)**

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>a. Resource standards are based on family size.</td>
</tr>
<tr>
<td></td>
<td>b. A single standard is employed in determining resource eligibility for all groups.</td>
</tr>
<tr>
<td></td>
<td>c. In Section 1902(f) States, the resource standards are more restrictive than in 7.b. above for--</td>
</tr>
<tr>
<td></td>
<td>- Aged</td>
</tr>
<tr>
<td></td>
<td>- Blind</td>
</tr>
<tr>
<td></td>
<td>- Disabled</td>
</tr>
</tbody>
</table>

Supplement 2 to ATTACHMENT 2.6-A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7.c., Supplement 2 so indicate.

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1905(p)(1)(C) of the Act</td>
<td>8. Resource Standard - Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, and Qualifying Individuals</td>
</tr>
<tr>
<td></td>
<td>For qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act, specified low-income Medicare beneficiaries covered under Section 1902(a)(10)(E)(iii) of the Act, and Qualifying Individuals covered under Section 1902(a)(10)(E)(iv) of the Act, the resource standard is three times the SSI resource limit, adjusted annually since 2006 by the increase in the consumer price index.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1905(s) of the Act</td>
<td>9. Resource Standard - Qualified Disabled and Working Individuals</td>
</tr>
<tr>
<td></td>
<td>For qualified disabled and working individuals covered under Section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individual or a couple (in the case of an individual with a spouse) is twice the SSI resource standard.</td>
</tr>
<tr>
<td>Citation</td>
<td>Condition or Requirement</td>
</tr>
<tr>
<td>----------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>1902(u) of the Act</td>
<td>9.1 For COBRA continuation beneficiaries, the resource standard is:</td>
</tr>
<tr>
<td></td>
<td>— Twice the SSI resource standard for an individual.</td>
</tr>
<tr>
<td></td>
<td>— More restrictive standard as applied under section 1902(f) of the Act as described in Supplement 8 to Attachment 2.6-A.</td>
</tr>
</tbody>
</table>

NOT APPLICABLE

TN No. 91-0040
Supersedes
Approval Date: 3/6/92
Effective Date: 10/1/91

TN No. NEW

HCFA ID: 7985E
Citation | Condition or Requirement
---|---
**C. ** Financial Eligibility (Continued) | 10. Excess Resources
1902(u) of the Act | a. Categorically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, Specified Low-Income Medicare Beneficiaries, and Qualifying Individuals

Any excess resources make the individual ineligible.

b. Categorically Needy Only

This State has a section 1634 agreement with SSI.
Receipt of SSI is provided for individuals while disposing of excess resources.

c. Medically Needy

Any excess resources make the individual ineligible.
a. Groups Other Than Qualified Medicare Beneficiaries

(1) For the prospective period.

Coverage is available for the full month if the following individuals are eligible at any time during the month.

- Aged, blind, disabled.
- AFDC-related.

Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.

- Aged, blind, disabled.
- AFDC-related.

(2) For the retroactive period.

Coverage is available for three months before the date of application if the following individuals would have been eligible had they applied:

- Aged, blind, disabled.
- AFDC-related.

Coverage is available beginning the first day of the third month before the date of application if the following individuals would have been eligible at any time during that month, had they applied.

- Aged, blind, disabled.
- AFDC-related.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

ELIGIBILITY CONDITIONS AND REQUIREMENTS

<table>
<thead>
<tr>
<th>Citation(s)</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1920(b)(1) of the Act</td>
<td>For a presumptive eligibility for pregnant women only. Coverage is available for ambulatory prenatal care for the period that begins on the day a qualified provider determines that a woman meets any of the income eligibility levels specified in ATTACHMENT 2.6-A of this approved plan. If the woman files an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination of presumptive eligibility, the period ends on the day that the State agency makes the determination of eligibility based on that application. If the woman does not file an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination, the period ends on that last day.</td>
</tr>
<tr>
<td>1902(e)(8) and 1905(a) of the Act</td>
<td>For qualified Medicare beneficiaries defined in section 1905(p)(1) of the Act coverage is available beginning with the first day of the month after the month in which the individual is first determined to be a qualified Medicare beneficiary under section 1905(p)(1). The eligibility determination is valid for—</td>
</tr>
<tr>
<td></td>
<td>X 12 months</td>
</tr>
<tr>
<td></td>
<td>6 months</td>
</tr>
<tr>
<td></td>
<td>___ months (no less than 6 months and no more than 12 months)</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

Approval Date 7-27-92 Effective Date 7/1/92
## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

### State: Wisconsin

<table>
<thead>
<tr>
<th>Citation</th>
<th>Condition or Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1902(a)(18) and 1902(f) of the Act</td>
<td>12. Pre-OBRA 93 Transfers of Resources - Categorically and Medically Needy, Qualified Medicare Beneficiaries, and Qualified Disabled and Working Individuals&lt;br&gt;The agency complies with the provisions of section 1917 of the Act with respect to the transfer of resources.&lt;br&gt;Disposal of resources at less than fair market value affects eligibility for certain services as detailed in Supplement 9 to ATTACHMENT 2.6-A.</td>
</tr>
<tr>
<td>1917(c)</td>
<td>13. Transfer of Assets – All eligibility groups&lt;br&gt;The agency complies with the provisions of section 1917(c) of the Act, as enacted by OBRA 93, with regard to the transfer of assets.&lt;br&gt;Disposal of assets at less than fair market value affects eligibility for certain services as detailed in Supplement 9(a) to ATTACHMENT 2.6-A, except in instances where the agency determines that the transfer rules would work an undue hardship.</td>
</tr>
<tr>
<td>1917(d)</td>
<td>14. Treatment of Trusts - All eligibility groups&lt;br&gt;The agency complies with the provisions of section 1917(d) of the Act, as amended by OBRA 93, with regard to trusts.&lt;br&gt;___ The agency uses more restrictive methodologies under section 1902(f) of the Act, and applies those methodologies in dealing with trusts;&lt;br&gt;___ The agency meets the requirements in section 1917(d)(4)(B) of the Act for use of Miller trusts.&lt;br&gt;The agency does not count the funds in a trust in any instance where the agency determines that the transfer would work an undue hardship, as described in Supplement 10 to ATTACHMENT 2.6-A.</td>
</tr>
</tbody>
</table>

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**Approval Date:** 12/21/12  
**Effective Date:** 07/01/2012

**TN No.** 12-016  
**Supersedes**  
**TN No.** 95-012
The agency complies with the provisions of § 1924 with respect to income and resource eligibility and posteligibility determinations for individuals who are expected to be institutionalized for at least 30 consecutive days and who have a spouse living in the community.

When applying the formula used to determine the amount of resources in initial eligibility determinations, the State standard for community spouses is:

- the maximum standard permitted by law;
- the minimum standard permitted by law; or
- a standard that is an amount between the minimum and the maximum.

The maximum is $90,660.
## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: **Wisconsin**

### A. MANDATORY CATEGORICALLY NEEDY

1. **AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:**

<table>
<thead>
<tr>
<th>Family Size</th>
<th><em>Need Standard</em></th>
<th><em>Payment Standard</em></th>
<th>Maximum payment amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$311/$301</td>
<td>$248.80/$240.80</td>
<td>Maximum payment amounts are the same as the payment standard rounded down to the nearest whole dollar</td>
</tr>
<tr>
<td>2</td>
<td>$550/$533</td>
<td>$440.00/$426.40</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>$647/$626</td>
<td>$517.60/$500.80</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>$772/$749</td>
<td>$617.60/$599.20</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$886/$861</td>
<td>$708.80/$688.80</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>$958/$929</td>
<td>$766.40/$743.20</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>$1,037/$1,007</td>
<td>$829.60/$805.60</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>$1,099/$1,068</td>
<td>$879.20/$854.40</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>$1,151/$1,117</td>
<td>$920.80/$893.60</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>$1,179/$1,143</td>
<td>$943.20/$914.40</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>$1,204/$1,168</td>
<td>$963.20/$934.40</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>$1,229/$1,193</td>
<td>$983.20/$954.40</td>
<td></td>
</tr>
</tbody>
</table>

Add $25 per person to the need standard and $20 per person to the payment standard for groups larger than 12. The payment standard is increased by $56.80 if a pregnant woman who is in at least her eighth month is included in the AFDC group.

* Area I/Area II; need standard is increased by $71 if a pregnant woman who is in at least her eighth month is included in the AFDC group.

2. **Pregnant Women and Infants under Section 1902(a)(10)(A)(i)(IV) of the Act:**

- ☑️ 133 percent  
- ✗ 185 percent (no more than 185 percent)  
  (specify) 150%

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**DHS Note:** See MMDL forms S14, S28, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

**Supplement 1 to Attachment 2.6-A**

**Page 1**

**TN # 07-007**

**Supersedes TN # 07-002**

**Nov 27, 2007**

**Approval date**

**Effective date 02/01/2008**
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

3. For children under Section 1902(a)(10)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

4. For children under Section 1902(a)(10)(i)(VII) of the Act (children who were born after September 30, 1983 and have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

B. MANDATORY CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children between Ages 6 and 19

The levels for determining income eligibility for groups of children who are born after September 30, 1983 and who have attained 6 years of age but are under 19 years of age under the provisions of section 1902(1)(1) of the Act (P.L. 101-508) are based on 100 percent (no more than 100 percent) of the official Federal income poverty line for the family size involved, as revised annually in the Federal Register.


Supplement 1 to Attachment 2.6-A
Page 2a

Approval date __________ Effective date 02/01/2008

TN # 07-007
Supersedes
TN # 07-002

NOV 27 2007
B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women and Infants

The levels for determining income eligibility for optional groups of pregnant women and infants under the provisions of sections 1902(a)(1)(A)(ii)(IX) and 1902(1)(2) of the Act are as follows:

Based on 185% of the official Federal income poverty level (no less than 133 percent and no more than 185 percent) for the family size involved, as revised annually in the Federal Register.
### B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children Between Ages 6 and 8

The levels for determining income eligibility for groups of children who are born after September 30, 1983 and who have attained 6 years of age but are under 8 years of age under the provisions of section 1902(l)(2) of the Act are as follows:

Based on _______ percent (no more than 100 percent) of the official Federal income poverty line.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$____________</td>
</tr>
<tr>
<td>2</td>
<td>$____________</td>
</tr>
<tr>
<td>3</td>
<td>$____________</td>
</tr>
<tr>
<td>4</td>
<td>$____________</td>
</tr>
<tr>
<td>5</td>
<td>$____________</td>
</tr>
<tr>
<td>6</td>
<td>$____________</td>
</tr>
<tr>
<td>7</td>
<td>$____________</td>
</tr>
<tr>
<td>8</td>
<td>$____________</td>
</tr>
<tr>
<td>9</td>
<td>$____________</td>
</tr>
<tr>
<td>10</td>
<td>$____________</td>
</tr>
</tbody>
</table>

**NOT APPLICABLE - SEE PAGE 2a**

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TN No. 91-0031
Superseded Approval Date 2-3-92
Effective Date 10/1/91
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO THE SUPPLEMENTAL SECURITY INCOME (SSI) FEDERAL BENEFIT RATE

1. SSI-Related Groups Other Than Poverty Level Aged and Disabled Individuals:

   1. $583.78
      (+ actual shelter up to $250.00)

   2. $882.05
      (+ actual shelter up to $375.00)
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

B. OPTIONAL CATEGORICALLY NEERTY GROUPS WITH INCOMES RELATED TO THE SUPPLEMENTAL SECURITY INCOME (SSI) FEDERAL BENEFIT RATE

2. Individuals in institutions who are eligible under a special income level (42 CFR 435.236)

X The State allows eligibility for individuals with income that does not exceed 300 percent of the SSI Federal benefit rate.

The State has elected to allow eligibility for individuals with income at an amount lower than 300 percent of the SSI Federal benefit rate.

Effective Date: Amount

IN No. 05-004
Supersedes
New

Approval date 01/08/2005 Effective date 01/01/2005
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME ELIGIBILITY LEVELS (Continued)

3. Aged and Disabled Individuals

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on _____ percent of the official Federal income poverty line.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$___________</td>
</tr>
<tr>
<td>2</td>
<td>$___________</td>
</tr>
<tr>
<td>3</td>
<td>$___________</td>
</tr>
<tr>
<td>4</td>
<td>$___________</td>
</tr>
<tr>
<td>5</td>
<td>$___________</td>
</tr>
</tbody>
</table>

If an individual receives a title II benefit, any amount attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

NOT APPLICABLE
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOMES ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

The levels for determining income eligibility for groups of qualified Medicare beneficiaries under the provisions of section 1905(p)(2)(A) of the Act are as follows:

1. NON-SECTION 1902(f) STATES

   a. Based on the following percent of the official Federal poverty income level:

      Eff. August 9, 1989:  ☐ 85 percent  × 100 percent (no more than 100)
      Eff. April 1, 1990:  ☐ 85 percent  × 100 percent (no more than 100)
      Eff. January 1, 1991:  100 percent
      Eff. January 2, 1992:  100 percent
C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. SECTION 1902(f) STATES WHICH AS OF JANUARY 1, 1989 USED INCOME STANDARDS MORE RESTRICTIVE THAN SSI

a. Based on the following percent of the official Federal income poverty level:

   Eff. Jan. 1, 1989: □ 80 percent  □ ______ percent (no more than 100)
   Eff. Jan. 1, 1990: □ 85 percent  □ ______ percent (no more than 100)
   Eff. Jan. 1, 1991: □ 95 percent  □ ______ percent (no more than 100)
   Eff. Jan. 1, 1992: 100 percent

b. Levels:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$__________</td>
</tr>
<tr>
<td>2</td>
<td>$__________</td>
</tr>
</tbody>
</table>

   NOT APPLICABLE

TN No. 91-0031
Supersedes  □
TN No.     □
Approval Date 2-3-91  Effective Date 10/1/91
HCFA ID: 7985E
### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

**State:** Wisconsin

**D. MEDICALLY NEEDY**

- **X** Applicable to all groups
- **Applicable to all groups except those specified below.**
- **Exempted group income levels are also listed on an attached page 3.**

<table>
<thead>
<tr>
<th>Family size</th>
<th>Net income level protected for maintenance for 12 months</th>
<th>Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007</th>
<th>Net income level for persons living in rural area for ____ months</th>
<th>Amount by which Column (4) exceeds limits specified in 42 CFR 435.1007</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$ 7100.04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>$ 7100.04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>$ 8271.96</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>$ 9872.04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$ 11328.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>$ 12255.96</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>$ 13263.96</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>$ 14064.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>$ 14720.04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>$ 15087.96</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For each additional person, add: $320.04

The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

**TN No. 00-004**
**Supersedes**
**TN No. 99-010**

**Approval Date 9/20/00**

**Effective Date 04/01/00**
### D. MEDICALLY NEEDY

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Net Income Level</th>
<th>Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007 1/</th>
<th>Net Income Level for persons living in rural areas for ___ months</th>
<th>Amount by which Column (4) exceeds limits specified in 42 CFR 435.1007 1/</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 urban only</td>
<td>$11,328.00</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>1 urban &amp; rural</td>
<td>$12,255.96</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>1 urban &amp; rural</td>
<td>$13,263.96</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>1 urban &amp; rural</td>
<td>$14,064.00</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>1 urban &amp; rural</td>
<td>$14,720.04</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>1 urban &amp; rural</td>
<td>$15,087.96</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

For each additional person, add: $320.04

1/ The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

---

TN No. 91-0031
Supersedes TN No. 91-0005
Approval Date 2-3-92
Effective Date 10/1/91
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

RESOURCE LEVELS

A. CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women
   a. Mandatory Groups
      Less restrictive than SSI resource levels and is as follows:

      | Family Size | Resource Level |
      |-------------|---------------|
      | 1           | 0             |
      | 2           | 0             |

   b. Optional Groups (NOT APPLICABLE)
      Less restrictive than SSI resource levels and is as follows:

      | Family Size | Resource Level |
      |-------------|---------------|
      | 1           |               |
      | 2           |               |

TN No. 91-0031 Supersedes Approval Date 2/3/92 Effective Date 10/1/91
TN No. 90-0020                      1/29/92   HCFA ID: 7985E

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.

Revision: HCFA-PM-91-4 (BPD) AUGUST 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

2. Infants
   a. Mandatory Group of Infants
      | Family Size | Resource Level |
      | 1          | 0             |
      | 2          | 0             |
      | 3          | 0             |
      | 4          | 0             |
      | 5          | 0             |
      | 6          | 0             |
      | 7          | 0             |
      | 8          | 0             |
      | 9          | 0             |
      | 10         | 0             |

Supersedes Approval Date JAN 29 1992 Effective Date 10/1/91

TN No. 91-0037    HCFA ID: 79835E
TN No. 87-0012
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

b. Optional Group of Infants

☑ Same as resource levels in the State's approved AFDC plan.

☑ Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

NOT APPLICABLE

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
3. **Children**

   a. **Mandatory Group of Children**

      - [ ] Same as resource levels in the State’s approved AFDC plan.
      - [X] Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>0</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

b. Mandatory Group of Children under Section 1902(a)(10)(i)(VII) of the Act. (Children born after September 30, 1983 who have attained age 6 but have not attained age 19.)

- Same as resource levels in the State's approved AFDC plan.
- Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>0</td>
</tr>
</tbody>
</table>

DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55, S57, and S59 for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

4. Aged and Disabled Individuals

☐ Same as SSI resource levels.
☐ More restrictive than SSI levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

☐ Same as medically needy resource levels (applicable only if State has a medically needy program)

TN No. 01-0031 Supersedes Approval Date 2-3-92 Effective Date 10/1/91

TN No. 1/29/92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

RESOURCE LEVELS (Continued)

B. MEDICALLY NEEDY

Applicable to all groups - Except those specified below under the provisions of section 1902(f) of the Act.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$ 2,000</td>
</tr>
<tr>
<td>2</td>
<td>3,000</td>
</tr>
<tr>
<td>3</td>
<td>3,300</td>
</tr>
<tr>
<td>4</td>
<td>3,600</td>
</tr>
<tr>
<td>5</td>
<td>3,900</td>
</tr>
<tr>
<td>6</td>
<td>4,200</td>
</tr>
<tr>
<td>7</td>
<td>4,500</td>
</tr>
<tr>
<td>8</td>
<td>4,800</td>
</tr>
<tr>
<td>9</td>
<td>5,100</td>
</tr>
<tr>
<td>10</td>
<td>5,400</td>
</tr>
</tbody>
</table>

For each additional person 300

Supersedes TN No. 89-0005

TN No. 91-0031  Approval Date 2-5-92  Effective Date 10/1/91

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

REASONABLE LIMITS ON AMOUNT FOR NECESSARY MEDICAL OR REMEDIAL CARE NOT COVERED UNDER MEDICAID

The deduction is limited to zero for the following medical and remedial care expenses, that:

1. Were incurred as the result of imposition of a transfer of assets penalty period.

2. A patient liability from a previous budget period, whether paid or unpaid, cannot be used as an incurred medical or remedial care expense in a subsequent budget period.

3. Incurred medical and remedial care expenses deducted from income to determine patient liability in a month cannot be used to determine patient liability in a subsequent month.

TN # 07-011
Supersedes
TN # 85-0154

Approval Date DEC 1 0 2007
Effective Date 07/01/07
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

METHODS FOR TREATMENT OF INCOME THAT DIFFER FROM THOSE OF THE SSI PROGRAM

(Section 1902(f) more restrictive methods and criteria and State supplement criteria in SSI criteria States without section 1634 agreements and in section 1902(f) States. Use to reflect more liberal methods only if you limit to State supplement recipients. DO NOT USE this supplement to reflect more liberal policies that you elect under the authority of section 1902(r)(2) of the Act. Use Supplement 8a for section 1902(r)(2) methods.)

NOT APPLICABLE

TN No. 91-0031
Supersedes Approval Date 2-3-92
Effective Date 10/1/91
TN No. NEW 1/29/92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE RESTRICTIVE METHODS OF TREATING RESOURCES THAN THOSE OF THE SSI PROGRAM - Section 1902(f) States only

NOT APPLICABLE

TN No. 91-0031  Approval Date 2-3-92  Effective Date 10/1/91
Supersedes TN No. 87-0012  1/29/92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

METHODS FOR TREATMENT OF RESOURCES FOR INDIVIDUALS WITH INCOMES RELATED TO FEDERAL POVERTY LEVELS

(Do not complete if you are electing more liberal methods under the authority of section 1902(r)(2) of the Act instead of the authority specific to Federal poverty levels. Use Supplement 8b for section 1902(r)(2) methods.)

NOT APPLICABLE

TN No. 91-0004
Supersedes TN No. 91-0031
Approval Date 2/5/92
Effective Date 10/1/91

HCFA ID: 7985E
### Standards for Optional State Supplementary Payments

<table>
<thead>
<tr>
<th>Payment Category</th>
<th>Administered By</th>
<th>Income Level</th>
<th>Income Disregards Employed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Gross</td>
<td>Net</td>
</tr>
<tr>
<td>(Reasonable Classification)</td>
<td>Federal</td>
<td>State Person</td>
<td>Couple Person</td>
</tr>
<tr>
<td>Aged</td>
<td>X</td>
<td>$1,500.00</td>
<td>$833.78</td>
</tr>
<tr>
<td>Blind</td>
<td>X</td>
<td>$1,500.00</td>
<td>$833.78</td>
</tr>
<tr>
<td>Disabled</td>
<td>X</td>
<td>$1,500.00</td>
<td>$833.78</td>
</tr>
<tr>
<td>Aged and Aged Spouse</td>
<td>X</td>
<td>$3,000.00</td>
<td>$1,257.05</td>
</tr>
<tr>
<td>Disabled and Disabled Spouse</td>
<td>X</td>
<td>$3,000.00</td>
<td>$1,257.05</td>
</tr>
<tr>
<td>Aged and Blind Spouse</td>
<td>X</td>
<td>$3,000.00</td>
<td>$1,257.05</td>
</tr>
<tr>
<td>Aged and Disabled Spouse</td>
<td>X</td>
<td>$3,000.00</td>
<td>$1,257.05</td>
</tr>
<tr>
<td>Blind and Disabled Spouse</td>
<td>X</td>
<td>$3,000.00</td>
<td>$1,257.05</td>
</tr>
</tbody>
</table>

DHS Note: See MACPro Package Optional State Supplement Beneficiaries for current information.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

INCOME LEVELS FOR 1902(f) STATES - CATEGORICALLY NEEDY
WHO ARE COVERED UNDER REQUIREMENTS MORE RESTRICTIVE THAN SSI

NOT APPLICABLE
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

RESOURCE STANDARDS FOR 1902(f) STATES - CATEGORICALLY NEEDY

NOT APPLICABLE

TN No. 91-0037
Supersedes TN No. 83-0150

Approval Date 2-3-92
Effective Date 10/1/91

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE LIBERAL METHODS OF TREATING INCOME
UNDER SECTION 1902(r)(2) OF THE ACT

| Section 1902(f) State | Non-Section 1902(f) State |

A. For persons in remedial or care institutions* and SSI-related medically needy:

1. **In-kind support and maintenance** - Totally exempt unless regular, predictable, and received in return for a service or product delivered.

2. **Deeming to other eligible children an ineligible parent's income in excess of that which makes one child ineligible** - Deemed parental income is split among siblings and no further computations are done.

3. **Income deductions** - Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.

B. For AFDC-related medically needy:

1. **Income deductions** - Court-ordered support amounts (child or spousal support) and court-ordered attorney and/or guardian fees are considered unavailable.

2. **Gross income test** - In determining eligibility, the AFDC gross income test which is based on 185 percent of the AFDC standard of need is not applied.

3. **Income Disregard** – For pregnant women covered under 1902(a)(10)(C)(ii)(II), disregard income in the amount of the difference between 300% of the poverty level (as revised annually in the Federal Register) and the Medically Needy income limit for the family size involved.

4. **Income Disregard** – For children covered under 1902(a)(10)(C)(ii)(I), disregard income in the amount of the difference between 150% of the poverty level (as revised annually in the Federal Register) and the Medically Needy income limit for the family size involved.

* Only includes persons in medical or remedial care institutions who would be eligible for AFDC, SSI, or an optional state supplement if they were not in a medical institution. These disregards do not apply to the eligibility group under section 1902(a)(10)(A)(ii)(V) of the Social Security Act.

Approval date: March 21, 2014
Effective date: 01/01/2014
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: Wisconsin

MORE LIBERAL METHODS OF TREATING INCOME
UNDER SECTION 1902(r)(2) OF THE ACT

C. For children age 1 up to age 6, Categorically Needy

1. Income Disregard - For children who are at least one year of age but have not yet attained six years of age applying for coverage under Wisconsin's Medical Assistance Program (MAP), an amount equal to the difference between 185% of the Federal Poverty Level (FPL) and 133% FPL for their family size is disregarded from family income in determining their eligibility under ss. 1902(a)(10)(A)(i)(VI) of the Social Security Act.

D. The following unearned income regulations apply to Working Disabled individuals as defined in Section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act:

1. Effective January 1, 2000, all of the applicant's unearned income and any deemed spousal unearned income shall be disregarded when determining whether or not the individual meets the financial eligibility requirements for SSI program under this section.

Note: Additional unearned income beyond $20 is not disregarded for purposes of determining whether or not the family's net income is below 250% of the federal poverty level.
Justification for Section 1902(r)(2)

Goals/Purpose

- Remove employment barriers, specifically health and long term care barriers, for working-age people with disabilities who work or are enrolled in a work program.

- Allow people with disabilities to earn and have additional savings from earnings including saving for a home, an automobile, a physically accessible van or for retirement.

- Eliminate eligibility cliffs based on income

All Unearned Income Exclusion (Supplement 8a, page 1)
Under the methodology outlined under Section 4733 alone, a working disabled individual would currently have to have unearned income less than $520. This requirement would make the majority of SSDI beneficiaries ineligible for Medicaid under this section; the average monthly SSDI benefit is $700. The SSDI population is a the prime target group for return-to-work strategies.

Resource Exclusion (Supplement 8b, page 1)
Based on the methodology outlined under Section 4733 alone, a single person participating in the Medicaid Purchase Plan would not be allowed to have more than $2000 in non-exempt assets. This requirement means that persons with disabilities are not able to save for a home, auto, physically accessible van, or participate in employers' retirement accounts.
State Plan Under Title XIX of the Social Security Act

State: Wisconsin

LESS RESTRICTIVE METHODS OF TREATING INCOME UNDER SECTION 1902(r)(2) OF THE ACT

The methodologies described in Paragraph E apply to all eligibility groups covered under sections 1902(a)(10)(A)(i)(IV), (VI) and (VII); 1902(a)(10)(A)(ii)(I), (II), (III), (IV), (IX), (XI), (XII), (XIII) and (XIV), 1902(a)(10)(C)(i)(III) and QMB, SMB and QI under 1905(p).

E. 1. All wages paid by the Census Bureau for temporary employment related to the decennial Census are excluded.

2. Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member’s deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.

3. The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).

* Less restrictive methods may not result in exceeding gross income limitations under section 1903 (f).
MORE LIBERAL METHODS OF TREATING INCOME
UNDER SECTION 1902(r)(2) OF THE ACT

[X] Non-Section 1902(f) State

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: Wisconsin

The following more liberal ways of treating income apply only to AFDC-related groups:

F. For parents and other caretaker relatives defined in sections 1902(a)(10)(A)(i) and 1905(a)(ii) of the Social Security Act:

1. Income Disregard - For parents and other caretaker relatives, an amount equal to the difference between 200% FPL (as revised annually in the Federal Register) and the AFDC standard (see Supplement 1 to Attachment 2.6-A page 1 for the family size involved. This replaces the following AFDC disregards: $30 plus 1/3, $30 earned income disregard, $175/$200 dependent care expense deduction, and $90 work-related expense deduction.

G. For pregnant women and infants under age 1 defined in Section 1902(a)(10)(A)(i)(IX) of the Social Security Act:

1. Income Disregard - For the group of pregnant women and infants covered under Section 1902(a)(10)(A)(i)(IX) and 1902(ii)(1)(A) and (B) of the Social Security Act, disregard income in the amount of the difference between 300% and 185% of the Federal Poverty Level for the family size involved, as revised annually in the Federal Register. This replaces the following AFDC disregards: $30 plus 1/3, $30 earned income disregard, $175/$200 dependent care expense deduction, and $90 work-related expense deduction.

The methodologies described in paragraphs H, I, J and L apply to persons described under 1902(a)(10)(A)(i)(III), (IV), (VI) and (VII) and to 1902(a)(10)(A)(i)(I) and (XXI). The disregards do not apply to any groups that are specifically excluded under 1903(f) of the Social Security Act.

H. Depreciation is deducted from self-employment income.

I. The earnings of any individual under age 18 are not counted towards the determination of eligibility.

J. The needs of group members receiving Supplemental Security Income benefits will be included in determining the group size. None of their income will be be counted toward a determination of the group's eligibility.

K. For optional targeted low income children defined at section 1902(a)(10)(A)(i)(XIV) of the Social Security Act, use the income methodology specified in the currently approved SCHIP title XXI State plan for Medicaid expansion children.

L. Income from the following sources is disregarded: Charitable contributions, General Assistance payments from a local government agency, interest and dividends.

M. For all persons covered under section 1902(a)(10)(A)(i)(XXI) and 1902(ii) of the Act, income changes that occur after the person has been determined eligible are disregarded until the next annual redetermination of eligibility. For children under the age of 19 covered under these sections of the Act, all income of their parents is disregarded.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r) OF THE ACT**

☐ Section 1902(f) State  ☒ Non-Section 1902(f) State

a. For persons in remedial or care institutions* and SSI-related Medically Needy:

1. **$2,000 limit on household goods and personal effects.** Household goods and personal effects are only counted if of unusual value.

2. **First moment of the month rule for counting of resources.** For an applicant - A person can become eligible any time during the month when assets are at or below limit. For a recipient - A person can maintain eligibility during the month even if resources exceed limits if the excess is used to discharge legal debts within the month or is converted to exempt resources.

3. **Irrevocable burial trusts.** Interest from irrevocable burial trusts is counted as an asset unless it has been specifically declared irrevocable in writing.

4. **Availability of assets.** Assets are not considered available unless they will be available in cash within 30 days (e.g., cash value of life insurance); value is suspended until asset becomes available.

5. **Exclusion of real property.** Nonexempt real property is considered unavailable when the property owner lists it for sale with a realtor at its fair market value or a joint owner who is outside the fiscal test group refuses to sell the property.

B. For AFDC-related Medically Needy:

All resources will be disregarded for persons eligible as AFDC-related medically needy under 1902(a)(10)(C)(ii).

* Includes persons in medical or remedial care institutions who are eligible under a special income level and persons in medical or remedial care institutions who would be eligible for AFDC, SSI, or an optional state supplement if they were not in a medical institution.

** These policies were approved effective October 1, 1988, as part of TN #88-0037
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Wisconsin

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r) OF THE ACT

☐ Section 1902(f) State  ☒ Non-Section 1902(f) State

C. The following resource regulations apply to Working Disabled individuals as defined in Section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act:

1. Up to $13,000 of available resources plus the value of an Independence Account shall be disregarded.

2. A resource disregard shall be given to a working disabled individual who holds monies in an Independence Account. To be eligible for this resource disregard the Independence Account is subject to the following provisions:
   - Only deposits made after an individual’s first enrollment in Medicaid under this section will be allowed as an Independence Account.
   - Depots into the account must not exceed 50% of earned income in any calendar year.
   - These accounts will be held separate from non-exempt resources, in an account for which prior approval has been obtained from the Department, and for which the owner authorizes regular monitoring and/or reporting including deposits, withdrawals, and other information deemed necessary by the Department for the proper administration of this provision. The separateness requirement may be waived in the case of an employer’s pension and/or a retirement account.
   - Amounts deposited and all gains, dividends or interest earned in an employer’s retirement fund and an individual’s IRA account after that person’s first enrollment in Medicaid under this section will automatically qualify as part of an Independence Account if registered with the Department.

3. A spouse’s resources will not be deemed to the applicant when determining whether or not the individual meets the financial eligibility requirements for the SSI program under this section.

D. For AFDC-related Categorically Needy:

All resources will be disregarded for persons eligible as AFDC-related categorically needy under ss. 1902 (a) (10) (A) (i) (III) and 1902 (a) (10) (A) (ii) (I) and (III).
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r) OF THE ACT

☐ Section 1902(f) State  ☒ Non-Section 1902(f) State

E. For all children:

All resources will be disregarded for children eligible in the following eligibility groups:


1902(a)(10)(A)(ii)(II) and 1905(a)(i): children who would meet the AFDC requirements if work-related child care costs were paid from earnings rather than by State agency.


F. For all aged, blind and disabled eligibility groups covered under sections 1902(a)(10)(A)(i), (II), (III), (IV), (IX), (XI), (XII), (XIII) and (XIV), 1902(a)(10)(C)(i)(III) and QMB, SMB and QI under section 1905(p):

For burial agreements funded by trusts, which Wisconsin state law permits only $3,000 of the funds within which to be irrevocable, $1,500 of funds in excess of the limit, which would otherwise be deemed revocable by operation of the irrevocable limit imposed by state law and thereby a countable resource under SSI policy, shall be disregarded.

TN # 13-017

Supersedes TN #11-005

Approval Date: 7/7/14

Effective Date: October 1, 2013
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

1902(r)(2) The following more liberal methodology applies to individuals who are 1917(b)(1)(C) eligible for medical assistance under one of the following eligibility groups:

Persons who meet the requirements under the following sections of the Social Security Act:
1902(a)(10)(A)(ii)(I), (IV), (V), (XI), (XII) and (XIII)
Medically Needy SSI-related persons under 1902(a)(10)(C)(i)(III), of the Act, and
Qualified Medicare Beneficiaries under section 1905(p) of the Act,

An individual who is a beneficiary under a long-term care insurance policy that meets the requirements of a "qualified State long-term care insurance partnership" policy (partnership policy) as set forth below, is given a resource disregard as described in this amendment. The amount of the disregard is equal to the amount of the insurance benefit payments made to or on behalf of the individual. The term "long-term care insurance policy" includes a certificate issued under a group insurance contract.

The State Medicaid Agency (Agency) stipulates that the following requirements will be satisfied in order for a long-term care policy to qualify for a disregard. Where appropriate, the Agency relies on attestations by the State Insurance Commissioner (Commissioner) or other State official charged with regulation and oversight of insurance policies sold in the state, regarding information within the expertise of the State's Insurance Department.

• The policy is a qualified long-term care insurance policy as defined in section 7702B(b) of the Internal Revenue Code of 1986.

• The policy meets the requirements of the long-term care insurance model regulation and long-term care insurance model Act promulgated by the National Association of Insurance Commissioners (as adopted as of October 2000) as those requirements are set forth in section 1917(b)(5)(A) of the Social Security Act.

• The policy was issued no earlier than the effective date of this State plan amendment.

TN No. 08-001
Supersedes APR 28 2008
TN No. New Effective Date 01/01/2009
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

- The insured individual was a resident of Wisconsin when coverage first became effective under the policy. If the policy is later exchanged for a different long-term care policy, the individual was a resident of Wisconsin when coverage under the earliest policy became effective.

- The policy meets the inflation protection requirements set forth in section 1917(b)(1)(C)(iii)(IV) of the Social Security Act.

- The Commissioner requires the issuer of the policy to make regular reports to the Secretary that include notification regarding when benefits provided under the policy have been paid and the amount of such benefits paid, notification regarding when the policy otherwise terminates, and such other information as the Secretary determines may be appropriate to the administration of such partnerships.

- The State does not impose any requirement affecting the terms or benefits of a partnership policy that the state does not also impose on non-partnership policies.

- The State Insurance Department assures that any individual who sells a partnership policy receives training, and demonstrates evidence of an understanding of such policies and how they relate to other public and private coverage of long-term care.

- The Agency provides information and technical assistance to the Insurance Department regarding the training described above.

The State Medicaid Agency elects to be subject to the reciprocity standards under section 6021(b) of the Deficit Reduction Act of 2005 (DRA). The long-term care insurance partnership resource disregards will be provided to Medicaid applicants who originally purchased a qualified long-term care insurance policy in any state that participates in the reciprocity agreement.

The State Medicaid Agency elects to be exempt from the reciprocity standards under section 6021(b) of the Deficit Reduction Act of 2005 (DRA). The long-term care insurance partnership resource disregards will not be provided to Medicaid applicants who originally purchased a qualified long-term care insurance policy in another state.

SEP 15 2010

Approval Date: SEP 15 2010
Effective Date: 05/28/2010
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF RESOURCES

1902(f) and 1917
of the Act

The agency provides for the denial of eligibility by reason of disposal of resources for less than fair market value.

A. Except as noted below, the criteria for determining the period of ineligibility are the same as criteria specified in section 1613(c) of the Social Security Act (Act).

1. Transfer of resources other than the home of an individual who is an inpatient in a medical institution.

a. /\ The agency uses a procedure which provides for a total period of ineligibility greater than 24 months for individuals who have transferred resources for less than fair market value when the uncompensated value of disposed of resources exceeds $12,000. This period bears a reasonable relationship to the uncompensated value of the transfer. The computation of the period and the reasonable relationship of this period to the uncompensated value is described as follows:

The entire sum must be expended on the divesting person's maintenance needs and medical care.

The amount expended is calculated by keeping a running account of the person's medical expenses and adding the medically needy monthly income limit to it.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

b. The period of ineligibility is less than 24 months, as specified below:

If the amount to divested is $12,000 or less when the entire sum of the divestment has been expended for maintenance needs and medical care, or two years have elapsed since the date of the divestment whichever occurs first.

c. The agency has provisions for waiver of denial of eligibility in any instance where the State determines that a denial would work an undue hardship.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

2. Transfer of the home of an individual who is an inpatient in a medical institution.

A period of ineligibility applies to inpatients in an SNF, ICF or other medical institution as permitted under section 1917(c)(2)(B)(i).

a. Subject to the exceptions on page 2 of this supplement, an individual is ineligible for 24 months after the date on which he disposed of the home. However, if the uncompensated value of the home is less than the average amount payable under this plan for 24 months of care in an SNF, the period of ineligibility is a shorter time, bearing a reasonable relationship (based on the average amount payable under this plan as medical assistance for care in an SNF) to the uncompensated value of the home as follows:

The agency keeps a running account of the total cost of the institutional care.

The amount expended is calculated by using the average monthly MA expenditure statewide for care provided by a SNF.
b. Subject to the exceptions on page 2 of this supplement, if the uncompensated value of the home is more than the average amount payable under this plan as medical assistance for 24 months of care in an SNF, the period of ineligibility is more than 24 months after the date on which he disposed of the home. The period of ineligibility bears a reasonable relationship (based upon the average amount payable under this plan as medical assistance for care in an SNF) to the uncompensated value of the home as follows:

If the amount of divestment to be removed exceeds $12,000 the entire sum must be expended on the divesting person's maintenance needs and medical care since the date of divestment.

The amount expended is calculated by using the average monthly MA expenditure standard for care provided by an SNF.
No individual is ineligible by reason of item A.2 if--

i. A satisfactory showing is made to the agency (in accordance with any regulations of the Secretary of Health and Human Services) that the individual can reasonably be expected to be discharged from the medical institution and to return to that home;

ii. Title to the home was transferred to the individual's spouse or child who is under age 21, or (for States eligible to participate in the State program under title XVI of the Social Security Act) is blind or permanently and totally disabled or (for States not eligible to participate in the State program under title XVI of the Social Security Act) is blind or disabled as defined in section 1614 of the Act;

iii. A satisfactory showing is made to the agency (in accordance with any regulations of the Secretary of Health and Human Services) that the individual intended to dispose of the home either at fair market value or for other valuable consideration; or

iv. The agency determines that denial of eligibility would work an undue hardship.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

3. 1902(f) States

- Under the provisions of section 1902(f) of the Social Security Act, the following transfer of resource criteria more restrictive than those established under section 1917(c) of the Act, apply:

B. Other than those procedures specified elsewhere in the supplement, the procedures for implementing denial of eligibility by reason of disposal of resources for less than fair market value are as follows:

1. If the uncompensated value of the transfer is $12,000 or less:
   The entire sum must be expended on the divesting person’s maintenance needs and medical care or two years must have elapsed since the date of divestment, whichever occurs first.

2. If the uncompensated value of the transfer is more than $12,000:
   The entire sum must be expended on the divesting person’s maintenance needs and medical care since the date of divestment.

Approval Date ___________ Effective Date ___________
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

3. If the agency sets a period of ineligibility of less than 24 months and applies it to all transfers of resources (regardless of uncompensated value):

4. Other procedures:

TN No. Supersedes TN No. Approval Date Effective Date
HCFA-179 #85-0150 Date Rec'd 5/18/85 REV. 6/18/85
Supersedes NEW Date Appr. 6/18/85 HCFA ID: 4093E/0002
State Rep. In. LCR Date Eff. 10/1/84
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

WISCONSIN

TRANSFER OF ASSETS

1917(c) The agency provides for the denial of certain Medicaid services by reason of disposal of assets for less than fair market value.

1. Institutionalized individuals may be denied certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

The agency withholds payment to institutionalized individuals for the following services:

- Payments based on a level of care in a nursing facility;
- Payments based on a nursing facility level of care in a medical institution;
- Home and community-based services under a 1915 waiver.

2. Non-institutionalized individuals:

The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

All MA recipients eligible to receive the services listed in the next paragraph.

The agency withholds payment to non-institutionalized individuals for the following services:

- Home health services (section 1905(a)(7));
- Home and community care for functionally disabled and elderly adults (section 1905(a)(22));
- Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

The following other long-term care services for which medical assistance is otherwise under the agency plan:

TN No. 95-012
Supersedes...
Approval Date 9/1/95
Effective Date 4-1-95
TRANSFER OF ASSETS

3. Penalty Date -- The beginning date of each penalty period imposed for an uncompensated transfer of assets is:
   - the first day of the month in which the asset was transferred;
   - the first day of the month following the month of transfer.

4. Penalty Period - Institutionalized Individuals --
   In determining the penalty for an institutionalized individual, the agency uses:
   - the average monthly cost to a private patient of nursing facility services in the agency;
   - the average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized.

5. Penalty Period - Non-institutionalized Individuals --
   The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual, including the use of the average monthly cost of nursing facility services; it may impose a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:

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TN No. 95-012
Supersedes NEW
Approval Date 9/1/95
Effective Date 4-1-95
TRANSFER OF ASSETS

6. Penalty period for amounts of transfer less than cost of nursing facility care--
   a. Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency:
      \(X\) does not impose a penalty;
      \(\_\) imposes a penalty for less than a full month, based on the proportion of the agency's private nursing facility rate that was transferred.
   b. Where an individual makes a series of transfers, each less than the private nursing facility rate for a month, the agency:
      \(X\) does not impose a penalty;
      \(\_\) imposes a series of penalties, each for less than a full month.

7. Transfers made so that penalty periods would overlap--
The agency:
\(X\) totals the value of all assets transferred to produce a single penalty period;
\(\_\) calculates the individual penalty periods and imposes them sequentially.

8. Transfers made so that penalty periods would not overlap--
The agency:
\(X\) assigns each transfer its own penalty period;
\(\_\) uses the method outlined below:
TRANSFER OF ASSETS

9. Penalty periods - transfer by a spouse that results in a penalty period for the individual--

(a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

STEP #1 - Take the original divested amount used to calculate the institutionalized individual's penalty.

STEP #2 - Subtract the average nursing home private pay rate times the number of months of penalty that have been served through the end of the month prior to the current month.

STEP #3 - Divide the remaining divested amount by the current average nursing home private pay rate and,

STEP #4 - Divide the result in half.

FINAL RESULT - This is the penalty that must be applied to both spouses.

(b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

10. Treatment of income as an asset--

When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

The agency will impose partial month penalty periods.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

For transfers of individual income payments, the agency will impose partial month penalty periods.

For transfers of the right to an income stream, the agency will use the actuarial value of all payments transferred.

The agency uses an alternate method to calculate penalty periods, as described below:

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TN No. 95-012

Supersedes

Approval Date 9/1/95

TN No. NEW

Effective Date 4-1-95
TRANSFER OF ASSETS

11. Imposition of a penalty would work an undue hardship--
The agency does not apply the transfer of assets provisions in any
case in which the agency determines that such an application would
work an undue hardship. The agency will use the following
procedures in making undue hardship determinations:

The State's undue hardship procedure will, at a minimum, include:

- Notice to recipients that an undue hardship exception exists.

- A timely process for determining whether an undue hardship
  waiver will be granted.

- A process under which an adverse determination can be appealed.

The following criteria will be used to determine whether the agency
will not count assets transferred because the penalty would work
an undue hardship:

"Undue hardship" means that a serious impairment to the
covered individual's health status would occur if the assets
transferred were counted.
TRANSFER OF ASSETS

FOR TRANSFERS OF ASSETS FOR LESS THAN FAIR MARKET VALUE MADE ON OR AFTER FEBRUARY 8, 2006, the agency provides for the denial of certain Medicaid services.

1. Institutionalized individuals are denied coverage of certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

The agency does not provide medical assistance coverage for institutionalized individuals for the following services:

- Nursing facility services;
- Nursing facility level of care provided in a medical institution;
- Home and community-based services under a 1915(c) or (d) waiver.

2. Non-institutionalized individuals:

X The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

- All individuals who are aged, blind or disabled.

Approval Date: 
Effective Date: 04/01/09
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

The agency withholds payment to non-institutionalized individuals for the following services:

Home health services [section 1905(a)(7)];

Home and community care for functionally disabled elderly adults [section 1905(a)(22)];

Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

The following other long-term care services for which payment for medical assistance is otherwise made under the agency plan:

3. Penalty Date--The beginning date of each penalty period imposed for an uncompensated transfer of assets is the later of:

   • the first day of a month during or after which assets have been transferred for less than fair market value;

   X The State uses the first day of the month in which the assets were transferred.

   The State uses the first day of the month after the month in which the assets were transferred

or
TRANSFER OF ASSETS

• the date on which the individual is eligible for medical assistance under the State plan and is receiving institutional level care services described in paragraphs 1 and 2 that, were it not for the imposition of the penalty period, would be covered by Medicaid;

AND

which does not occur during any other period of ineligibility for services by reason of a transfer of assets penalty.

4. **Penalty Period - Institutionalized Individuals**
   In determining the penalty for an institutionalized individual, the agency uses:

   - the average monthly cost to a private patient of nursing facility services in the State at the time of application;

   - the average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized at the time of application.

5. **Penalty Period - Non-institutionalized Individuals**
   The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual, including the use of the average monthly cost of nursing facility services;

   - imposes a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

6. **Penalty period for amounts of transfer less than cost of nursing facility care**

   Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency imposes a penalty for less than a full month, based on the option selected in item 4.

   X The state adds together all transfers for less than fair market value made during the look-back period in more than one month and calculates a single period of ineligibility, that begins on the earliest date that would otherwise apply if the transfer had been made in a single lump sum.

7. **Penalty periods - transfer by a spouse that results in a penalty period for the individual**

   (a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

   (b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ______ WISCONSIN ______

TRANSFER OF ASSETS

8. **Treatment of a transfer of income**

   When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

   When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

   - For transfers of individual income payments, the agency will impose partial month penalty periods using the methodology selected in 6. above.
   - For transfers of the right to an income stream, the agency will base the penalty period on the combined actuarial value of all payments transferred.

9. **Imposition of a penalty would work an undue hardship**

   The agency does not impose a penalty for transferring assets for less than fair market value in any case in which the agency determines that such imposition would work an undue hardship. The agency will use the following criteria in making undue hardship determinations:

   Application of a transfer of assets penalty would deprive the individual:

   (a) Of medical care such that the individual's health or life would be endangered; or
   (b) Of food, clothing, shelter, or other necessities of life.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

TRANSFER OF ASSETS

10. Procedures for Undue Hardship Waivers

The agency has established a process under which hardship waivers may be requested that provides for:

(a) Notice to a recipient subject to a penalty that an undue hardship exception exists;

(b) A timely process for determining whether an undue hardship waiver will be granted; and

(c) A process, which is described in the notice, under which an adverse determination can be appealed.

These procedures shall permit the facility in which the institutionalized individual is residing to file an undue hardship waiver application on behalf of the individual with the consent of the individual or the individual's personal representative.

11. Bed Hold Waivers For Hardship Applicants

The agency provides that while an application for an undue hardship waiver is pending in the case of an individual who is a resident of a nursing facility:

X Payments to the nursing facility to hold the bed for the individual will be made for a period not to exceed 30 days (may not be greater than 30)
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

The agency does not apply the trust provisions in any case in which the agency determines that such application would work an undue hardship.

The following criteria will be used to determine whether the agency will not count assets transferred because doing so would work an undue hardship:

"Undue hardship" means that a serious impairment to the covered individual's health status would occur if the trust provisions were applied.

The State's undue hardship procedure will, at a minimum, include:

- Notice to recipients that an undue hardship exception exists.
- A timely process for determining whether an undue hardship waiver will be granted.
- A process under which an adverse determination can be appealed.

Under the agency's undue hardship provisions, the agency exempts the funds in an irrevocable burial trust.

The maximum value of the exemption for an irrevocable burial trust is $20,000.00.
COST EFFECTIVENESS METHODOLOGY FOR COBRA CONTINUATION BENEFICIARIES

1902(u) of the Act

Premium payments are made by the agency only if such payments are likely to be cost-effective. The agency specifies the guidelines used in determining cost effectiveness by selecting one of the following methods:

- The methodology as described in SMM section 3598.
- Another cost-effective methodology as described below.

NOT APPLICABLE
State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The State covers low-income families and children under section 1931 of the Act.

The following optional groups are covered:

- [x] Pregnant women with no other eligible children.
- [x] AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.

In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, without modification.

- [x] In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, with the following modifications:
  - The agency applies lower income standards which are no lower than the AFDC standards in effect on May 1, 1988, as follows:
  - The agency applies higher income standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:
  - The agency applies higher resource standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:


TN #05-017
Supersedes
TN #01-010

MAR 03 2006
Approved
Effective 10/01/2005
State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

X The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

1. Wisconsin will disregard Temporary Assistance to Needy Families (TANF) income for purposes of determining Medicaid eligibility.

2. All wages paid by the Census Bureau for temporary employment related to the decennial census activities are excluded.

3. Any additional payment received under chapter 5 of title 37, United States Code, by a member of the United States Armed forces deployed to a designated combat zone shall be excluded from household income for the duration of the member's deployment if the additional pay is the result of deployment to or while serving in a combat zone, and it was not received immediately prior to serving in the combat zone.

4. Wisconsin will disregard all resources for the purposes of determining Medicaid eligibility.

5. Wisconsin will use the same income availability and exemption policies as for AFDC. Then, Wisconsin will disregard the difference between the calculated amount and 100% of the Federal poverty level for the family size involved, as revised annually in the Federal Register.

6. Depreciation is deducted from self-employment income.

7. The earnings of any individual under age 18 years are not counted towards the determination of eligibility.

8. The needs of group members receiving Supplemental Security Income benefits will be included in determining the group size. None of their income will be counted toward a determination of the group's eligibility.

9. Income from the following sources is disregarded: Charitable contributions, General Assistance payments from a local government agency, interest and dividends.

10. The first five hundred dollars of tribal per capita payments from tribally managed gaming revenues are excluded in determining eligibility. These payments are distributed from local tribal funds from gaming operations and have not been held in trust by the Secretary of Interior. These payments are not otherwise excluded under federal law (e.g., P.L. 98-64).

Approved MAY 14 2009
Effective 12/01/2008
State: Wisconsin

State Plan Under Title XIX of the Social Security Act

State:

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

1. TANF did not exist prior to July 16, 1996.
2. Count the wages paid by the Census Bureau for temporary employment to decennial census activities.
3. Counting all military pay with no exemptions for combat zone pay.
4. Counting all resources that were not exempt under AFDC regulations at 45 CFR 233.20 (a) and comparing the total to a resource limit of $1,000.
5. Deduct from income the four disregards/deductions associated with the AFDC program:
   a. $30 & 1/3 earned income disregard
   b. $30 earned income disregard
   c. $90 work related expense deduction
   d. $175/$200 dependent care deduction
6. Do not allow depreciation to be deducted when determining self-employment income.
7. Exclude the earnings of a person under age 18 or who meets the definition of a dependent 18 year old when that individual is a full-time student or is a part-time student who works fewer than 30 hours per week.
8. Exclude the income, resources and needs of any person who is receiving Supplemental Security Income benefits.
9. Count income from the following sources: Charitable contributions, General Assistance payments from a local government agency, interest and dividends.
10. Count the total amount of tribal per capita payments from tribally managed gaming revenues in determining eligibility.

The agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requirements.

The agency continues to apply the following waivers of provisions of Part A of Title IV in effect as of July 16, 1996, or submitted prior to August 22, 1996, and approved by the Secretary on or before July 1, 1997.

TN #08-024
Supersedes TN #08-021

MAY 14 2009
Approved

Effective 12/01/2008

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The State covers low-income families and children under section 1931 of the Act.

✓ The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:

All wages paid by the Census Bureau for temporary employment related to Census 2000 activities are excluded.

The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

State Plan Under Title XIX of the Social Security Act

State: Wisconsin

ELIGIBILITY UNDER SECTION 1925 OF THE ACT
TRANSITIONAL MEDICAL ASSISTANCE

The State covers low-income families and children for Transitional Medical Assistance (TMA) under section 1925 of the Social Security Act (the Act). This coverage is provided for families who no longer qualify under section 1931 of the Act due to increased earned income, or working hours, from the caretaker relative's employment, or due to the loss of a time-limited earned income disregard. (42 CFR 435.112, 1902(a)(52), 1902(e)(1), and 1925 of the Act)

The amount, duration, and scope of services for this coverage are specified in Section 3.5 of this State plan.

For Medicaid eligibility to be extended through TMA, families must have been Medicaid eligible under section 1931 (months of retroactive eligibility may be used to meet this requirement):

X During at least 3 of the 6 months immediately preceding the month in which the family became ineligible under section 1931.

For fewer than 3 of the 6 previous months immediately preceding the month in which the family became ineligible under section 1931. Specify:

The State extends Medicaid eligibility under TMA for an initial period of:

X 12 months. Section 1925(b) does not apply for a second 6-month extension period.

The State collects and reports participation information to the Department of Health and Human Services as required by section 1925(g) of the Act, in accordance with the format, timing, and frequency specified by the Secretary and makes such information publicly available.

DHS Note: See MMDL forms S25 and S28 for current information.

Attachment 2.6-A
Supplement 12
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TN # 09-009
Supersedes New

Approved SEP 25 2009
Effective 7/01/2009
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: WISCONSIN

SECTION 1924 PROVISIONS

A. Income and resource eligibility policies to determine eligibility for institutionalized individuals who have spouses living in the community are consistent with Section 1924.

B. In the determination of resource eligibility the State resource standard is $90,660.00.

C. An institutionalized spouse who (or whose spouse) has excess resources shall not be found ineligible under Title XIX of the Social Security Act, per section 1924(c)(3)(C), where the state determines that denial of eligibility would work an undue hardship.

TN No. 03-002
Supersedes TN No. 02-001
Approval Date 05/01/03
Effective Date 01/01/03
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

ASSET VERIFICATION SYSTEM

1940(a) of the Act

1. The agency will provide for the verification of assets for purposes of determining or redetermining Medicaid eligibility for aged, blind and disabled Medicaid applicants and recipients using an Asset Verification System (AVS) that meets the following minimum requirements.

A. The request and response system must be electronic:
   (1) Verification inquiries must be sent electronically via the internet or similar means from the agency to the financial institution (FI).
   (2) The system cannot be based on mailing paper-based requests.
   (3) The system must have the capability to accept responses electronically.

B. The system must be secure, based on a recognized industry standard of security (e.g., as defined by the U.S. Commerce Department's National Institute of Standards and Technology, or NIST).

C. The system must establish and maintain a database of FIs that participate in the agency's AVS.

D. Verification requests also must be sent to FIs other than those identified by applicants and recipients, based on some logic such as geographic proximity to the applicant's home address, or other reasonable factors whenever the agency determines that such requests are needed to determine or redetermine the individual's eligibility.

E. The verification requests must include a request for information on both open and closed accounts, going back up to 5 years as determined by the State.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ____________ WISCONSIN ____________

ASSET VERIFICATION SYSTEM

2. System Development

___ A. The agency itself will develop an AVS.

In 3 below, provide any additional information the agency wants to include.

___ B. The agency will hire a contractor to develop an AVS.

In 3 below, provide any additional information the agency wants to include.

___ C. The agency will be joining a consortium to develop an AVS.

In 3 below, identify the States participating in the consortium. Also, provide any other information the agency wants to include pertaining to how the consortium will implement the AVS requirements.

___ D. The agency already has a system in place that meets the requirements for an acceptable AVS.

In 3 below, describe how the existing system meets the requirements in Section 1.

___ E. Other alternative not included in A. – D. above.

In 3 below, describe this alternative approach and how it will meet the requirements in Section 1.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

ASSET VERIFICATION SYSTEM

3. Provide the AVS implementation information requested for the implementation approach checked in Section 2, and any other information the agency may want to include.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: WISCONSIN

DISQUALIFICATION FOR LONG-TERM CARE ASSISTANCE FOR INDIVIDUALS WITH SUBSTANTIAL HOME EQUITY

1917(f) The State agency denies reimbursement for nursing facility services and other long-term care services covered under the State plan for an individual who does not have a spouse, child under 21 or adult disabled child residing in the individual’s home, when the individual’s equity interest in the home exceeds the following amount:

- $500,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest $1,000).
- An amount that exceeds $500,000 but does not exceed $750,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest $1,000).

The amount chosen by the State is $750,000.

- This higher standard applies statewide.
- This higher standard does not apply statewide. It only applies in the following areas of the State:

- This higher standard applies to all eligibility groups.
- This higher standard only applies to the following eligibility groups:

The State has a process under which this limitation will be waived in cases of undue hardship.