# WISCONSIN SSI PAYMENT LEVELS Effective January 1, 1995

	A	<b>B</b> .	С	D	Е
Category of Eligible Individuals	Own Household	Another's Household	Ineligible Spouse in Own Household	Ineligible Spouse in Another's Household	Non- medical Group Care
Aged	458.00 83.78	305.34 83.78	458.00 130.43	305.34 135.05	458.00 179.77
Blind	458.00 83.78	305.34 83.78	458.00 130.43	305.34 135.05	458.00 179.77
Disabled	458.00 83.78	305.34 83.78	458.00 130.43	305.34 135.05	458.00 179.77
Aged and Aged Spouse	687.00 132.05	458.00 132.05			687.00 477.41
Blind and Blind Spouse	687.00 132.05	458.00 132.05			687.00 477.41
Disabled and Disabled Spouse	687.00 132.05	458.00 132.05			687.00 477.41
Aged and Blind Spouse	6 <b>87</b> .00 1 <b>32</b> .05	458.00 132.05			687.00 477.41
Aged and Disabled Spouse	687.00 132.05	458.00 132.05		- Andrews	6 <b>87</b> .00 47 <b>7</b> .41
Blind and Disabled Spouse	687.00 132.05	458.00 132.05			687.00 477.41

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

Gerald Whitburn

Secretary

Wisconsin Department of Health and Social Services Paul D. Barnes

Regional Commissioner

Social Security Administration

TN: 95-005 Supersedes TN: 94-012

Effective Date 1/1/95

# S54, S55, S57, and S59 for current information. Revision: HCFA-PM-92 -1 (MB) FEBRUARY 1992 DHS Note: See MMDL forms \$14, \$28, \$30, \$32, \$50, \$52, \$53,

ATTACHMENT 2.6-A

Page 1

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Wisc	consin
	ELIGIBILI	TY CONDITIONS AND REQUIREMENTS
Citation(s)		Condition or Requirement
	Α.	General Conditions of Eligibility
		Each individual covered under the plan:
42 CFR Part 435, Subpart G		<ol> <li>Is financially eligible (using the methods and standards described in Parts B and C of this Attachment) to receive services.</li> </ol>
42 CFR Part 435, Subpart F		2. Meets the applicable non-financial eligibility conditions.
		a. For the categorically needy:
		(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.
		(ii) For SSI-related individuals, meets the non-financial criteria of the SSI program or more restrictive SSI-related categorically needy criteria.
1902(1) of the Act		<pre>(iii) For financially eligible pregnant    women, infants or children covered under    sections 1902(a)(10)(A)(i)(IV),    1902(a)(10)(A)(i)(VII),    1902(a)(10)(A)(i)(VII), and    1902(a)(10)(A)(ii)(IX) of the Act, meets    the non-financial criteria of section    1902(1) of the Act.</pre>
1902(m) of the Act		(iv) For financially eligible aged and disabled individuals covered under sectio 1902(a)(10)(A)(ii)(X) of the Act, meets the non-financial criteria of section 1902(m) of the Act.

Effective date: 10/01/2009

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin

#### Citation

#### Condition or Requirement

b. For the medically needy, meets the non-financial eligibility conditions of 42 CFR Part 435.

# 1905(p) of the the Act

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.

# 1905(s) of the the Act

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).

# DHS Note: See MMDL form S89 for current information.

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		Pa	ge 2

STATE PLAN U. State:	NDER TITLE XIX OF THE SOCIAL SECURITY ACT  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:

TN No: 09-023 Supersedes TN No. 91-0031 Approval Date: MAR 0 9 2010

Effective Date: October 1, 2009

#### DHS Note: See MMDL form S89 for current information.

ATTACHMENT 2.6-A Page 2a

STATE PLA	N UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State:	Wisconsin
Citation(s)	Condition or Requirement

- (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.
- (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.
- (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:
  - (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).
  - (b) An individual currently under temporary protected status pursuant to section 244 of the INA.
  - (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.
  - (d) An individual currently under deferred enforced departure pursuant to a decision made by the President.
  - (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.

TN No: 09-023 Supersedes New Approval Date MAR 0 9 2010

Effective Date: October 1, 2009

#### DHS Note: See MMDL form S89 for current information.

ATTACHMENT 2.6-A Page 2b

STATE PLA	N UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State:	Wisconsin
Citation(s)	Condition or Requirement

- (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:
  - (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.
  - (b) A fiancé of a citizen, as permitted under section 101(a)(15)(K) of the INA.
  - (c) A religious worker under section 101(a)(15)(R).
  - (d) An individual assisting the Department of Justice in a criminal investigation, as permitted under section 101(a)(15)(S) of the INA.
  - (e) A battered alien under section 101(a)(15)(U) (see also section 431 as amended by PRWORA).
  - (f) An individual with a petition pending for 3 years or more, as permitted under section 101(a)(15)(V) of the INA.
    - X Elected for pregnant women.
    - X Elected for children under age 21.
- 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.

TN No: 09-023 Supersedes New

Approval Date: MAR 0 9 2010

Effective Date: October 1, 2009

# DHS Note: See MMDL form S88 for current information.

ATTACHMENT 2.6-A Page 3

		R TITLE XIX OF THE SOC Wisconsin	
Citation(s)		Condition or Req	uirement
42 CFR 435.403	1	Is a resident of the State rear	ardless of whether or not the
1902(b) of the Act		· -	dence permanently or maintains it
1502(0) 01 1110 7101		at a fixed address.	denote permanently of manitums it
	·		
	}	State has interstate reside States.	ency agreement with the following
		Alabama 4/27/87	Mississippi 4/11/82
		Arkansas 5/21/82	New Mexico 4/6/82
		California 4/21/82	North Dakota 4/13/82
•		Florida 4/14/82	Ohio 4/23/82
		Georgia 4/19/82	Pennsylvania 5/20/82
		Idaho 5/20/82	South Carolina 4/27/82
		Kansas 7/12/82	South Dakota 4/6/82
		Kentucky 5/14/82	Texas 4/28/82
		Maryland 7/27/82	Virginia 6/29/82
		Minnesota 12/14/82	West Virginia 4/20/82
		State has open agreement	t(s).
		Not applicable; no reside	ncy requirement.
		State has interstate comp	act on adoption and medical
		assistance with the follow	ving States.
		Arizona 11/2/92	Mississippi 5/31/89
		Arkansas 7/7/86	Missouri 7/7/86
		Colorado 7/7/86	Nebraska 7/7/86
		Delaware 7/7/86	Nevada 9/3/87
		Georgia 1/21/88	New Hampshire 7/7/86
		Hawaii 12/23/87	New Mexico 7/10/86
		Kansas 7/7/86	Oklahoma 7/10/86
		Kentucky 7/15/86	Rhode Island 9/13/89
		Maine 7/7/86	Utah 7/7/86
		Massachusetts 2/12/88 Minnesota 7/7/86	Virginia 10/24/91 West Virginia 11/19/86
		1/11/11050ta /1 //00	11 000 1 Mannin 11/17/00
09-023		MAR 0 9 2	010
des		Approval date:	Effective date: 10/01/200

TN No. Superse TN No. 98-004

# INTERSTATE COMPACT ON ADOPTION AND MEDICAL ASSISTANCE

# Signature Page

Pursuant to the authority conferred upon me b	by the laws of my state, the undersigned hereby
enters into the Interstate Compact on Adoption	n and Medical Assistance on behalf of the State
of ARIZONA, and signifies that the approximation of ARIZONA, and signifies that the approximation of the significant content content of the significant cont	gency 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 Comp	act in the manner and to the extent necessary for
compliance therewith.	
Executed this 2nd day of November	er, 19 <u>92</u>
on behalf of the State of ARIZONA	by:
Leland W. Morse	
Signature	Signature
Manager, Field Support	
Title	Title
Administration for Children, Youth and Families	
Department of Economic Security	
Agency	Agency

Revision: HCFA-PM-91-4

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

ATTACHMENT 2.6-A

Page 3a

OMB No.: 0938-

State: Wisconsin

Citation

Condition or Requirement

435.1008

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.

42 CFR 435.1008 1905(a) of the Act 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.

433.145 435.604 1912 of the 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.

42 CFR 435.910

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).

TN No. 21-0031 Supersedes TN No.

Approval Date 2

1/29/92

Effective Date 10/1/91

DHS Note: See MMDL forms \$14, \$30, \$32, \$50, \$52, \$53, \$54, \$55, \$57, and \$59 for current information.

Revision:

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

ATTACHMENT 2.6-A

Page 3b

OMB No.: 0938-

State: \_\_\_\_Wisconsin

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.)

TN No. 91-0031 Supersedes TN No. NEW

Approval Date 1/29/93

Effective Date 10/1/91

Revision: HCFA-PM-91-8 (MB)

October 1991

ATTACHMENT 2.6-A

Page 3c

OMB No.: 0938-

State/Territory: \_\_\_\_ WISCONSIN

Citation

Condition or Requirement

1906 of the Act 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

Strick A

Revision:

HCFA-PM-97-2 December 1997 ATTACHMENT 2.6-A Page 4 OMB No. 0938-0673

State: _Wisconsin	
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Citation	Condition or Requirement
В.	Posteligibility Treatment of Institutionalized Individuals' Incomes
	<ol> <li>The following items are not considered in the posteligibility process:</li> </ol>
1902(o) of the Act	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.
Bondi v Sullivan (SSI)	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.
1902(r)(1) of the Act	c. German Reparations Payments (reparation payments made by the Federal Republic of Germany).
105/206 of P. L. 100-383	d. Japanese and Aleutian Restitution Payments.
1. (a) of P.L. 103-286	e. Netherlands Reparation Payments based on Nazi, but not Japanese, persecution (during World War II).
10405 of P.L. 101-239	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.)
6(h)(2) of P.L. 101-426	g. Radiation Exposure Compensation.
12005 of P. L. 103-66	h. VA pensions limited to \$90 per month under 38 U.S.C. 5503.
TN No. 98-00 Supersedes	Approval Date 6/18178 Effective Date 1/1/98

Revision	HCFA-PM-97-2
	December 1997

ATTACHMENT 2.6-A Page 4a 0MB No. 0938-0673

Citation

### Condition or Requirement

1924 of the Act 435.725 435.733 435.832

2. 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 \$ 55
Couples \$ 110

For the following persons with greater need:

Supplement 12 to <u>Attachment 2.6-A</u> 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 \$ <u>55</u> Adults \$ <u>55</u>

For the following persons with greater need:

Supplement 12 to <u>Attachment 2.6-A</u> 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.

\$ <u>55</u>

TN No. WI-24-0014 Supersedes TN No. 01-007

Approval Date: 11/4/2024 Effective Date: 7/1/2024

Revision:

HCFA-PM-97-2 December 1997

State: Wisconsin

ATTACHMENT 2.6-A Page 4b OMB No.:0938-0673

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 orficial 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.

TN No. <u>98–002</u> Supersedes	Approval Date_	6/18/98	Effective Date_	1/1/98
TN No. New				

Revision:

TN No. New

HCFA-PM-97-2 December 1997

ATTACHMENT 2.6-A Page 4c OMB No.:0938-0673

Citation	Condition or Requirement
	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 amounted 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:
	<ul> <li>(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.</li> </ul>
	(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.)
No. 98-002 persedes	Approval Date 6/18/98 Effective Date 1/1/98

Revision: HCFA-PM-97-2 December 1997

ATTACHMENT 2.6-A Page 5 OMB No.:0938-0673

State: <u>W</u>	isconsin
Citation	Condition or Requirement
435.725 435.733 435.832	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:
	o AFDC level; or o 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.
	<ul> <li>(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 <u>ATTACHMENT 2.6-A.</u>)</li> </ul>
435.725 435.733 435.832	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:
	A monthly amount for the maintenance of the home of the individual or couple for not longer than 6 months if a physician has certified that the individual, or one member of the institutionalized couple, is likely to return to the home within that period:
•	No.
	Yes (the applicable amount is shown on page 5a.)
TN No. 98-002 Supersedes TN No. New	Approval Date 6/18/98 Effective Date 1/1/98

	State: _	<u>Wisconsin</u>
Citation		Condition or Requirement
		Amount for maintenance of home is:
		Amount for maintenance of home is the actual maintenance costs not to exceed $\$1,122.77$ .
		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.

HCFA-PM-92-1 (MB) Revision:

ATTACHMENT 2.6-A Page 6

**DHS Note: See MMDL forms** 

S14, S30, S32, S50, S52, STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

S53, S54, S55, S57, and

State:

Wisconsin

S59 and MACPro form

Non-MAGI Methodologies

ELIGIBILITY CONDITIONS AND REQUIREMENTS

for current

Citation(B)

Condition or Requirement

information. \_

42 CFR 435.711 435.721, 435.831

#### C. Financial Eligibility

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.

For individuals who are not AFDC or SSI recipients i 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.

Supplement 1 to ATTACHMENT 2.6-A specifies the incom levels for mandatory and optional categorically need groups of individuals, including individuals with incomes related to the Federal income poverty level--prequant women and infants or children covere under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(i)(VII), and 1902(a)(10)(A)(ii)(IX) of the Act and aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act--and for mandatory groups of qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act.

CULCUMBA

1902(z)(1) of the Act

Supplement 14 to ATTACHMENT 2.6-A specifies the incor levels for mandatory and optional categorically need groups of individuals, including individuals with incomes related to the Federal income poverty levelpregnant women and infants or children covered under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI) 1902(a)(10)(A)(i)(VII), and 1902(a)(10)(A)(ii)(IX)of the Act and aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) and 1902(a)(10)(A)(ii)(XII) of the Act-- and for mandato groups of qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act.

TN No. 95-031 Supersedes TN No. 92-0015

Approval Date

11/21/95 \_\_\_\_ Bffective Date 7-29-95

Revision: HCFA-PM-91-4

Citation

TN No. 95-031

Supersedes
TN No. 91-0031

(BPD)

ATTACHMENT 2.6-A Page 6a

Effective Date 7-29-95

State: Wisconsin

Condition or Requirement

Supplement 2 to ATTACHMENT 2.6-A specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups. Supplement 7 to ATTACHMENT 2.6-A specifies the income levels for categorically needy aged, blind and disabled persons who are covered under requirements more restrict than SSI. 1 Supplement 4 to ATTACHMENT 2.6-A specifies the methods f determining income eligibility used by States that have more restrictive methods than SSI, permitted under secti 1902(f) of the Act. Supplement 5 to ATTACHMENT 2.6-A specifies the methods f determining resource eligibility used by States that have more restrictive methods than SSI, permitted under secti 1902(f) of the Act. LXI Supplement 8a to ATTACHMENT 2.6-A specifies the methods determining income eligibility used by States that are m liberal than the methods of the cash assistance programs permitted under section 1902(r)(2) of the Act. /X7 Supplement 8b to ATTACHMENT 2.6-A specifies the methods 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. X Supplement 14 to ATTACHMENT 2.6-A specifies income level. used by states for determining eligibility of Tuberculos infected individuals whose eligibility is determined under section §1902(z)(1) of the Act.

Approval Date 11/21/95

# DHS Note: See MMDL forms S10, S14, S30, S32, S50, S52, S53, S 54, S55, S57, and S59 and

MACPro form Non-MAGI Methodologies for current information.

Revision: HCFA-PM-92-1 (MB) ATTACHMENT 2.6-A

FEBRUARY 1992

Page 7

S	TATE PLAN UNDER TITLE	XIX OF THE SOCIAL SECURITY ACT
Stat	e: Wisconsin	
	ELIGIBILITY CONDIT	IONS AND REQUIREMENTS
Citation(s)	Condi	tion or Requirement
1902(r)(2) of the Act		f Determining Income
	a. AFDC- level child	related individuals (except for poverty related pregnant women, infants, and ren).
		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
		x (b) The methods under the State's approved AFDC plan and/or any mon liberal methods described in Supplement 8a to ATTACHMENT 2.6-1
		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.
1902(e)(6) the Act		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.

TN No. 92-0015 4/1/92 Supersedes Approval Date Effective Date TN No. 91-0031

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Revision: HCFA-PM-92 -1 FEBRUARY 1992 (MB)

ATTACHMENT 2.6-A

Page 7a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Wisconsin		
ELIGI	IBILITY CONDITIONS AND REQUIREMENTS	
Citation(s)	Condition or Requirement	
42 CFR 435.721 435.831, and 1902(m)(1)(B)(m)(4) and 1902(r)(2) of the Act	b. 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:	
	The methods of the SSI program only.  x The methods of the SSI program and/or any	
	more liberal methods described in Supplement	

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

Approval Date 7799 Effective Date 4/1/92

Revision: HCFA-PM-91-4 ATTACHMENT 2.6-A (BPD) AUGUST 1991 Page 8 OMB No.: 0938-Wisconsin State: Citation Condition or Requirement 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. /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. 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 2.5-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. TN No. Supersedes Approval Date Effective Date \_\_\_10/1/91 TN No. ST

Revision: HCFA-PM-91-4 ATTACHMENT 2.6-A (BPD) AUGUST 1991 Page 9 OMB No.: 0938-\_\_Wisconsin State:\_\_ Condition or Requirement Citation 42 CFR 435.721 and c. Blind individuals. In determining countable 435.831 income for blind individuals, the following 1902(m)(1)(B), methods are used: (m)(4), and 1902(r)(2).of The methods of the SSI program only. the Act Χ\_ 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 <u>Supplement 8a to</u> ATTACHMENT 2.6-A. For institutional couples, the methods specified under section 1611(e)(5) of the Act. \_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. 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 <u>Supplement 4 to ATTACHMENT</u> 2.6-A and more liberal methods are described in Supplement 8a to ATTACHMENT 2.6-A. TN No. 91-0031

TN No. 91-0031 Supersedes TN No. 89-0014

Approval Date 2-5-43

Effective Date 10/1/91

Revision: HCFA-PM-91-4 (BPD) ATTACHMENT 2.6-A AUGUST 1991 Page 10 OMB No.: 0938-State: Wisconsin Condition or Requirement Citation 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. 42 CFR 435.721, d. Disabled individuals. In determining countable income of disabled and 435.831 1902(m)(1)(B), individuals, including individuals (m)(4), and with incomes up to the Federal poverty level described in section 1902(m) of 1902(r)(2) of the Act the following methods are used: the Act The methods of the SSI program. <u>X</u> SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT <u>2.6-A</u>. For institutional couples: the methods specified under section 1611(e)(5) of the Act. Χ For optional State supplement recipients under §435.230: income methods more liberal than SSI, as specified in <u>Supplement 4 to ATTACHMENT</u> 2.6-A.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

TN No. 91-003]
Supersedes
TN No. \$7-0023

Approval Date 23-93

Effective Date 10/1/91

HCFA ID: 7985E

described in Supplement 8a to ATTACHMENT 2.6-A.

Revision: HCFA-PM-91-4

(BPD)

ATTACHMENT 2.6-A

AUGUST 1991		Page 11 OMB No.: 0938-	
State:	Wisconsin	Out NO.: 0339-	
Citation	Condition or Requirement		
	section 1902(f) S	e supplement recipients in tates and SSI criteria States 616 or 1634 agreements	
	SSI methods on	ly.	
		d/or any more liberal methods ibed in <u>Supplement 8a to</u> -A.	
	than SSI, exce	estrictive and/or more liberal pt for aged and disabled scribed in section 1902(m)(1)	

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.

in Supplement 8a to ATTACHMENT 2.6-A.

of the Act. More restrictive methods are described in <u>Supplement 4 to ATTACHMENT</u> 2.6-A and more liberal methods are specified

TN No. 91-0031 Supersedes 6/00-18 ON NT

Approval Date 2-3

Effective Date 10/1/91

## DHS Note: See MMDL forms \$10, \$14, \$30, \$32, \$50, \$52, \$53,

S54, S55, S57, and S59 for current information. Revision: HCFA-PM-92-1 (MB)

FEBRUARY 1992

ATTACHMENT 2.6-A Page 11a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Wisconsin	•
	ELIGIBILITY CON	DITIONS AND REQUIREMENTS
Citation(s)	Condi	cion or Requirement
1902(1)(3)(E) and 1902(r)(2) of the Act	ch se	verty level pregnant women, infants, and ildren. For pregnant women and infants or ildren covered under the provisions of ctions 1902(a)(10)(A)(i)(IV), (VI), and (VII), in 1902(a)(10)(A)(ii)(IX) of the Act
	(1	) The following methods are used in determining countable income:
	<del></del>	_ The methods of the State's approved AFDC plan.
		The methods of the approved title IV-E plan.
	<u> </u>	The methods of the approved AFDC State plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
	_	The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

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TN No.92-0015 Supersedes Approval Date Effective Date TN No. 91-0031

# DHS Note: See MMDL forms \$14, \$30, \$32, \$50, \$52, \$53, \$54, \$55, \$57, and \$59 and MACPro form Non-MAGI Methodologies for current information.

Revision: HCFA-PM-92-1 FEBRUARY 1992

(MB)

ATTACHMENT 2.6-A Page 12

State:	Wiscon		XIX OF THE SOCIAL SECURITY ACT
	ELIGIBILITY	CONDIT	TIONS AND REQUIREMENTS
Citation(s)	· c	onditio	on or Requirement
		(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.
1902(e)(6) of the Act		(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.
1905(p)(1), 1902(m)(4), and 1902(r)(2) of the Act		dete Medi 1902	ified Medicare beneficiaries. In rmining countable income for qualified care beneficiaries covered under section (a)(10)(E)(i) of the Act, the following ods are used:
		•	The methods of the SSI program only.
		<u>X</u>	SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.
			For institutional couples, the methods specified under section 1611(e)(5) of the Act.

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quirement
benefit, any amounts crease in the monthly title II COLA is not sition period* beginning mefit for December is t day of the month on of the revised annual
ne, the revised poverty irst day of the month n period.
II income, the revised er than the date of
orking individuals.
e income for qualified lividuals covered under Act, the methods of the
edicare beneficiaries.
e income for specified neficiaries covered under e Act, the same method

TN No. <u>93-010</u> Supersedes TN No. <u>92-0015</u>

Approval Date 4/29/93

Effective Date 1/1/93

# DHS Note: See MMDL form \$10 and MACPro form Non-MAGI Methodologies for current information.

Revision: HCFA-PM-91-8 October 1991

(MB)

ATTACHMENT 2.6-A

Page 12b OMB No .:

Wisconsin State/Territory:

Citation Condition or Requirement COBRA Continuation Beneficiaries 1902(u) (h) of the Act 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

TN No. 07-0040 Supersedes Approval Date 3-6-92

Effective Date 10/1/91

NEW TN No.

1833 ST

HCFA 1D: 7585E

State/Territory: Wisconsin

Citation		Condition or Requirement	
.902(a)(10)(A) (ii)(XIII) of the Act	(i)	Working Disabled Who Buy In to Medicaid	
(II) (AIII) OI the Act		In determining countable income and resources for working disabled individuals who buy in to Medicaid, the following methodologies are applied:	
		The methodologies of the SSI program.	
		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.	
•		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.	
		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.

State/Territory: Wisconsin

#### 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.

 ${\it 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.
- 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.

TN No. 99-015 Supersedes TN No. 99-005

Approval Date 12/9/99

Effective Date 3/15/2000 HCFA ID:

#### State/Territory: Wisconsin

#### 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, costeffectiveness 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 <sup>1</sup> 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.

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

Revision: HCFA-PM-91-4

AUGUST 1991

(BPD)

ATTACHMENT 2.6-A

Page 13

OMB No.: 0938-

Wisconsin State: \_\_\_\_\_

Citation

Condition or Requirement

1902(k) of the Act

2. Medicaid Qualifying Trusts

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.

1902(a)(10) of the Act

3. Medically needy income levels (MNILs) are based on family size.

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, <u>Supplement 1</u> so indicates.

TN No. 91-0037 Supersedes TN No.

Approval Date

Effective Date \_\_\_\_10/1/91

This page has been superseded by MACPro Section "Handling Excess Income (Spenddown)."

Attachment 2.6-A

State: Wisconsin Page 14a

# Citation Condition or Requirement Medically Needy (Continued) a. (3) This section has been superseded by MACPro Section 1903(f)(2) of "Handling Excess Income (Spenddown)." the Act (4) This section has been superseded by MACPro Section "Handling Excess Income (Spenddown)." (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: X Pregnant women X Children Parents and caretaker relatives

Revision: HCFA-PM-91-4

AUGUST 1991

(BPD)

ATTACHMENT 2.6-A

Page 15

OMB No.: 0938-

State: Wisconsin

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)(XI) 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.

TN No. 91-0031 Supersedes TN No. 87-0012

Approval Date 2-3-92

Effective Date 10/1/91

Revision: HCFA-PM-91-8 October 1991

(MB)

ATTACHMENT 2.6-A

Page 15a OMÉ No.

State/Territory: \_\_\_

Wisconsin

Citation

Condition or Requirement

4.b. Categorically Needy - Section 1902(f) States
Continued

1903(f)(2) of the Act

\_\_\_ (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.

TN No. 91-0040 Supersedes \_\_ NEW \_\_

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Approval Date 3-6-92

Effective Date 10/1/91

#### DHS Note: See MACPro form Non-MAGI Methodologies for current information.

Revision:	HCFA-PM-91-4 AUGUST 1991	(BPD)		ATTACHMENT 2.6-A Page 16 OMB No.: 0938-
	State:	Wisconsin		——————————————————————————————————————
Citatio	on		Condition or Requi	rement

#### 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
  - /X/ (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.

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TN No. 91-0031	^	2 00		
Supersedes	Approval Date	Effec	ctive I	Date 10/1/91
TN NO. 87-0012		1 2/2		
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Revision:

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

ATTACHMENT 2.6-A

Page 16a

OMB No.: 0938-

State: Wisconsin

Citation

Condition or Requirement

#### 5. Methods for Determining Resources

1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B) and (C), and 1902(r) of the Act b. Aged individuals. For aged individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act, the agency used the following methods for treatment of resources:

The methods of the SSI program.

X SSI methods and/or any more liberal methods described in <u>Supplement 8b to ATTACHMENT</u> 2.6-A.

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.

TN No. SI-0031
Supersedes
TN No. NEW

Approval Date 3-9-9-3

Effective Date 10/1/91

Revision: HCFA-PM-91-4

AUGUST 1991

(BPD)

ATTACHMENT 2.6-A

Page 17 OMB No.: 0938-

State: Wisconsin	-
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Citation

Condition or Requirement

In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses.

1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B), and 1902(r) of the Act

c. Blind individuals. For blind individuals the agency uses the following methods for treatment of resources:

The methods of the SSI program.

<u>X</u> SSI methods and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.

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.

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.

TN No. 91-0031 Supersedes TN No. 89

Approval Date 2-3-95

Effective Date 10/1/91

## DHS Note: See MMDL forms S14, S30, S32, S50, S52, S53, S54, S55,

S57, and S59 for current information.

Revision:

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

ATTACHMENT 2.6-A

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OMB No.: 0938-

State: Wisconsin

onb no.

Citation	Condition or Requirement
1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B) and (C), and 1902(r)(2) of the Act	d. <u>Disabled individuals</u> , <u>including individuals</u> <u>covered under section 1902(a)(10)(A)(ii)(X) of the Act</u> . The agency uses the following methods for the treatment of resources: The methods of the SSI program.
	X SSI methods and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u>
	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 <u>Supplement 5 to ATTACHMENT 2.6-A</u> and more liberal methods are specified in <u>Supplement 8b to ATTACHMENT 2.6-A</u> .
	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.
1902(1)(3) and 1902(r)(2) of the Act	e. Poverty level prequant women covered under sections 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX)(A) of the Act.
	The agency uses the following methods in the treatment of resources.
	The methods of the SSI program only.
	The methods of the SSI program and/or any more liberal methods described in <u>Supplement 5a or Supplement 8b to ATTACHMENT 2.6-A.</u>

TN No. 91-0031Supersedes TN No. \$7-0012

Approval Date 2392

Effective Date 10/1/91

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

AUGUST 1991

Revision:

HCFA-PM-91-4

(BPD)

ATTACHMENT 2.6-A

Page 19 OMB No.: 0938-

State:	Wisconsin	

Citation	Condition or Requirement
	Methods that are more liberal than those of SSI. The more liberal methods are specified in Supplement 5a or Supplement 8b to ATTACHMENT 2.6-A.
	X 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.
1902(1)(3) and 1902(r)(2) of	f. Poverty level infants covered under section 1902(a)(10)(A)(i)(IV) of the Act.
the Act	The agency uses the following methods for the treatment of resources:
	The methods of the State's approved AFDC plan.
1902(1)(3)(C) of the Act	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 5a of ATTACHMENT 2.6-A.
1902(r)(2) of the Act	Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in Supplement 5a or Supplement 8b to ATTACHMENT 2.6-A.
	Not applicable. The agency does not consider resources in determining eligibility.
rn no. <u>91-0031</u>	Approval Data 3-2-4-2 Effective Data 10/1/91

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

Revision: HCFA-PM-92-1 FEBRUARY 1992 (MB)

ATTACHMENT 2.6-A Page 19a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	State:	Wisc	onsin	
		ELIGIBILIT	y condin	TIONS AND REQUIREMENTS
Citatio	Citation(s)		Conditio	on or Requirement
1902(1)(3) 1902(r)(2) the Act		g. 1	1902 The	rty level children covered under section (a)(10)(A)(i)(VI) of the Act.  agency uses the following methods for the the the courses:
•				The methods of the State's approved AFDC plan.
1902(1)(3) of the Act		. •		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 5a of ATTACHMENT 2.6-A.
1902(r)(2) of the Act				Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in Supplement 8b to ATTACHMENT 2.6-A.
			<u>_x</u>	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.

TN No. 92-00/5Supersedes Approval Date 7/9/9 Effective Date 4/1/92TN No. 91-0031

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

Revision: HCFA-PM-92-1 (MB) FEBRUARY 1992 ATTACHMENT 2.6-A Page 19b

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:		Wisco	onsin
	<del></del>	ELIGIBILITY	CONDITIONS AND REQUIREMENTS
Citatio	n(s)	Co	ondition or Requirement
1902(1)(3) 1902(r)(2) the Act		g. 2.	Poverty level children under section 1902(a)(10)(A)(i)(VII)
-	,		The agency uses the following methods for the treatment of resources:
			The methods of the State's approved AFDC plan.
1902(1)(3) the Act	(C)	·	Methods more liberal than those in the State's approved AFDC plan (but not more restrictive) as specified in Supplement 5a of ATTACHMENT 2.6-A.
1902(r)(2) of the Act			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.
			X Not applicable. The agency does not consider resources in determining eligibility.

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.

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IN No. 92-0015		7 01		
Supersedes	Approval Date	7129192	Effective Date	4/1/92
TENT NO. NO.				

## DHS Note: See MACPro form Children Under Age 19 with a Disability for current information.

Revision: HCFA-PM-91-8 October 1991

(MB)

ATTACHMENT 2.6-A

Page 20 OMB No.:

State/Territory: \_\_\_

Wisconsin

Citation	Condition or Requirement			
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 <u>Supplement 8b to ATTACHMENT 2.6-A.</u>			
1905(s) of the Act	<ol> <li>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.</li> </ol>			
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. <u>91-0040</u> Supersedes

Approval Date 3-6-92

Effective Date \_\_10/1/91

TN No. 91-003/

Revision:

HCFA-PM-93-5

MAY 1993

(MB)

ATTACHMENT 2.6-A Page 20a

State:

Wisconsin

Citation

Condition or Requirement

1902(a)(10)(E)(iii) of the Act

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.

TN No. Effective Date Supersedes Approval Date TN No. 91-0040

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

Revision: HCFA-PM-92-1 FEBRUARY 1992 (MB)

ATTACHMENT 2.6-A Page 21

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	<u>Wisconsin</u>				
	ELIGIBILITY CONDITIONS AND REQUIREMENTS				
Citation(s)	Condition or Requirement				
1902(1)(3)(A), (B) and (C) of the Act	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.			
		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.			
•	•	X No. The agency does not apply a resource standard to these individuals.			
1902(1)(3)(A) and (C) of the Act	. d.	For children covered under the provisions of section 1902(a)(10)(A)(i)(VI) of the Act, the agency applies a resource standard.			
		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.			
٠.		X No. The agency does not apply a resource standard to these individuals.			

Revision: HCFA-PM-91-4

(BPD)

ATTACHMENT 2.6-A

	AUGUST 1991 State:	Wisconsin	Page 21a OMB No.: 0938-		
Citati	.on	Condition or Requirement			
1902(m)(1) and (m)(2) of the Act	(B)				
		X Same as SSI reso	urce standards.		
		which are higher	cally needy resource standards than the SSI resource e State covers the medically		
		Supplement 2 to ATTACH resource levels for the	MENT 2.6-A specifies the ese individuals.		
			•		

TN No. 91-0031 Supersedes TN No. NEW

Approval Date 2-3-92 1/29/92

Effective Date 10/1/91

Effective Date: 01/01/2010

		State	e: Wisconsin
Citation		Cor	ndition or Requirement
(D)-100-104-100-104-104-104-104-104-104-104	C.	Financ	ial Eligibility (Continued)
1902(a)(10)(C)(i) of the Act		7. R	esource Standard - Medically Needy
		a. b. c.	A single standard is employed in determining resource eligibility for all groups.
			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.
1905(p)(1)(C) of the Act		S	esource Standard - Qualified Medicare Beneficiaries, pecified Low-Income Medicare Beneficiaries, and Qualifying dividuals
		19 be ar of fir	or qualified Medicare beneficiaries covered under Section 202(a)(10)(E)(i) of the Act, specified low-income Medicare eneficiaries covered under Section 1902(a)(10)(E)(iii) of the Act, and Qualifying Individuals covered under Section 1902(a)(10)(E)(iv) the Act, the resource standard is three times the SSI resource mit, adjusted annually since 2006 by the increase in the consumer rice index.
1905(s) of the Act			esource Standard - Qualified Disabled and Working dividuals
		S in	or qualified disabled and working individuals covered under ection 1902(a)(10)(E)(ii) of the Act, the resource standard for an dividual or a couple (in the case of an individual with a spouse) is vice the SSI resource standard.

Revision: HCFA-PM-91-8 (MB)

October 1991

. . . . .

ATTACHMENT 2.6-A

Page 22a OMB No.:

State/Territory; Wisconsin

Citation		Condition or Requirement		
1902(u) of the Act	9.1	For COBRA continuation beneficiaries, the resource standard is:		
		Twice the SSI resource standard for an individual.		
	***************************************	More restrictive standard as applied under section 1902(f) of the Act as described in Supplement 8 to Attachment 2.6-A.		

TOTAL SECTION

NOT APPLICABLE

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

		State:	Wisconsin	
Citation		Cond	ition or Requirement	
	C.	Financial	l Eligibility (Continued)	
1902(u) of the Act		10. Excess Resources		
		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	
,			_X 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.	

Revision: HCFA-PM-91-4

(BPD)

ATTACHMENT 2.6-A

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AUGUST 1991 OMB No.: 0938-Wisconsin State:\_\_\_\_ Citation Condition or Requirement 42 CFR Effective Date of Eligibility 11. 435.914 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.

TN No. 91-0031 Supersedes	Approval Date 2392	Effective Date	10/1/91
87-0012	1/29/92	HCFA ID: 7985E	

### **PDHS Note: See MMDL forms \$14, \$30, \$32, \$50, \$52, \$53, \$54, \$55, \$57, and \$59 for current information.**

Revision: HCFA-PM-92-1 FEBRUARY 1992

ATTACHMENT 2.6-A Page 25

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State	: <u>Wisconsin</u>	
	ELIGIBILITY CONDI	TIONS AND REQUIREMENTS
Citation(s)	Conditi	on or Requirement
1920(b)(1) of the Act	_X	(3) 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.
1902(e)(8) and 1905(a) of the Act	b.	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—
·		X 12 months
		6 months
	. •	months (no less than 6 months and no more than 12 months)

TN No. Supersedes

ก่อยอังหยัยเกิด

TN No. 91-0031

Approval Date 7-27-92 Effective Date 7/1/92

Revision: HCFA-PM-95-01

March 1995

ATTACHMENT 2.6-A

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### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:	Wisconsin
Citation	Condition or Requirement
1902(a)(18) and 1902(f) of the Act	<ul> <li>12. Pre-OBRA 93 Transfers of Resources -         Categorically and Medically Needy, Qualified Medicare Beneficiaries, and         Qualified Disabled and Working Individuals         The agency complies with the provisions of section 1917 of the Act with respect to the transfer of resources.     </li> </ul>
	Disposal of resources at less than fair market value affects eligibility for certain services as detailed in <u>Supplement 9 to ATTACHMENT 2.6-A</u> .
1917(c)	13. Transfer of Assets – All eligibility groups
	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.
	Disposal of assets at less than fair market value affects eligibility for certain services as detailed in <u>Supplement 9(a) to ATTACHMENT 2.6-A</u> , except in instances where the agency determines that the transfer rules would work an undue hardship.
1917(d)	14. Treatment of Trusts - All eligibility groups
	The agency complies with the provisions of section 1917(d) of the Act, as amended by OBRA 93, with regard to trusts.
	The agency uses more restrictive methodologies under section 1902(f) of the Act, and applies those methodologies in dealing with trusts;
	The agency meets the requirements in section 1917(d)(4)(B) of the Act for use of Miller trusts.
	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.
TN No. 12-016	
Supersedes TN No. 95-012	Approval Date: 12/21/12 Effective Date: 07/01/2012

	State: _	Wisconsin
Citation		Condition or Requirement
1924 of the Act	13.	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.