

WISCONSIN DEPARTMENT OF HEALTH SERVICES
Division of Health Care Access and Accountability
1 W. Wilson St.
Madison WI 53703

To: Medicaid Eligibility Handbook (MEH) Users

From: Shawn Smith, Bureau Director
 Bureau of Enrollment Policy and Systems

Re: **Medicaid Eligibility Handbook Release 14-02**

Release Date: December 18th, 2014
 Effective Date: December 18th, 2014

EFFECTIVE DATE The following policy additions or changes are effective 12/18/14, unless otherwise noted. **Grey highlighted text denotes new text. Text with a strike through it in the old policy section denotes deleted text.**

CHANGES

3.1.6 Late Renewals *This section is new with this release.*

15.1.2 Special Financial Tests for Disabled Minors *Examples 3 and 4 have been updated.*

15.3.14 Payments to Native Americans

- 17. Per capita payments from a tribe that come from natural resources, usage rights, leases or royalties.
- 18. Payment from natural resources, farming, ranching, fishing, leases or royalties from land designated as Indian trust land by the Department of Interior (including reservations and former reservations).
- 19. Money from selling things that have cultural significance.

17.4 Exceptions

- If an individual or couple had a pattern of charitable gifting, or gifting to family members (i.e. birthdays, graduations, weddings, etc.) prior to the look-back period, similar transfers during the look-back period would not be considered to have been given with the intent to divest as long as the total yearly gifts did not exceed 15% of the individual's or couple's annual gross income. If the yearly gifted amount exceeds 15% of the individual's or couple's annual gross income, and/or there is a gap in the years the gifts occurred, the total amounts gifted for the years in the look-back period shall be considered divestment. This exception is not limited to gifts made on traditional gift-giving occasions and does not preclude a pattern of giving to assist family members with educational or vocational goals, or

18.4.3 Calculate the CSAS Effective January 1, 2015

IF the total countable assets of the couple are:	Then the CSAS is:
\$238,440 or more	\$117,240 \$119,220
Less than \$238,440 but greater than \$100,000	½ of the total countable assets of the couple
\$100,000 or less	\$50,000

18.6.2 Worksheet 7 Section A - Community Spouse Income Allocation

- a) ~~\$2,898.00~~ \$2,980.50 or
- b) ~~\$2,585.00~~ \$2,621.67 plus excess shelter allowance. (See 39.4.2)

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“Excess shelter allowance” means shelter expenses above \$775.50 \$786.50. Subtract \$775.50 \$786.50 from the community spouse’s shelter costs. If there is a remainder, add the remainder to \$2,585.00 \$2,621.67. (See 39.4.2)

18.6.3 Worksheet 7 Section B - Family Member Income Allowance

1. Enter \$646.25 \$655.42 on Line 1 under the name of each dependent family member who lives with the community spouse.

18.6.4 Section C -- Cost of Care

Example 2 has been updated.

20.4.1 Questionable Items Introduction

4. The member has been convicted of Medicaid recipient fraud or has legally acknowledged his/her guilt of recipient fraud. ~~Do not require a member to provide verification for the sole reason that they have acknowledged or been convicted of fraud in any other public assistance or employment program.~~

20.6 Front End Verification

Front-End verification (FEV) is intensive verification of a case by a special unit or worker. Refer a group for FEV only when its characteristics meet a designated profile. See 3.2.2 of the IMM Fraud Prevention/ Front End Verification 12.3 FEV Case Application of the Income Maintenance Manual.

22.1 Estate Recovery

Large portions of this section have been rewritten with this release. The text changes are too numerous to list.

26.3.5.1 HEC Processing

~~Office of Independence and Employment~~ Employment Initiatives Section
HEC Manager
Room 434-Room 418
1 W. Wilson St
Madison, WI 53708
Fax: ~~608-266-3386~~ 608-223-7755
Phone: 866-278-6440

31 PACE (Program of All-Inclusive Care for the Elderly)

This chapter is under development.

35.1.3.1 Verification of the Qualified LTCIP Policy

A "qualified LTCIP policy" must meet all relevant requirements of federal and state law. Qualified LTCIP policies are certified by the Wisconsin Office of the Commissioner of Insurance (OCI). A more detailed definition of a qualified LTCIP can be found at <http://oci.wi.gov/srissues/ltpartnership.htm>.

OCI certification of the policy must be verified by assuring that the policy is listed on the OCI website, accessible via the following link:

~~http://oci.wi.gov/oci_home.htm~~
<http://oci.wi.gov/srissues/ltpartner-qual.htm>

35.1.3.2 Reciprocity Standards

Participation in Wisconsin’s LTCIP program is allowed for individuals who purchased qualified policies in any state that is subject to the LTCIP reciprocity standards as documented in that state’s Medicaid State Plan. Such states are referred to as "Participating States." Information regarding reciprocity states can be found at:

<http://www.aaltci.org/long-term-care-insurance/learning-center/long-term-care-insurance-partnership-plans.php#approved>

~~Contact the CARES Call Center if presented with a LTCIP policy issued by a state other than Wisconsin to see if the state is a Participating State.~~

39.4.1 EBD Assets and Income Table

Group Size				
Category		1		2
EBD Categorically Needy Limits	Assets	\$2,000	Assets	\$3,000
	Income	\$572.45 (+ actual shelter up to \$244.33)	Income	\$865.38 (+ actual shelter up to \$366.67)
EBD Medically Needy Limits	Assets	\$2,000	Assets	\$3,000
	Income	\$591.67	Income	\$591.67
SSI Payment Level				
Federal SSI Payment Level	Income	\$710.00	Income	\$1,066.00
State Supplementary Payment (SSP)	Income	\$ 83.78	Income	\$132.05
Total	Income	\$793.78	Income	\$1,198.05
SSI Payment Level + E Supplement	Income	\$900.77		
SSI E Supplement	Income	\$95.99		
Community Waivers Special Income Limit	Income	\$2,163		
Institutions Categorically Needy Income Limit	Income	\$2,199		
Substantial Gainful Activity limit (non-blind individuals)	Income	\$1,040		
Substantial Gainful Activity limit (blind individuals)	Income	\$1740		

39.4.2 EBD Deductions and Allowances

	Description	Amount
1	Personal Needs Allowance (effective 7/1/01)	\$45.00
2	<u>EBD</u> Maximum Personal Maintenance Allowance	\$2,199.00
3	<u>EBD</u> Deeming Amount to an Ineligible <i>Minor</i>	\$367.00
4	Community Waivers Basic Needs Allowance	\$913
5	Parental Living Allowance for Disabled Minors	1 Parent \$733.00
		2 Parent \$1,100.00
6	<u>MAPP</u> Standard Living Allowance (<u>SLA</u>) <u>SLA</u> = <u>SSI</u> + State Supplement + \$20	\$824.00
7	<i>Community Spouse</i> Lower Income Allocation Limit	\$2,621.67
8	Community <i>Spouse</i> Excess Shelter Cost Limit	\$786.50
9	Family <u>Member</u> Income Allowance	\$655.42