

2025 Third Quarter Medicaid Waiver Updates

The Social Security Act created Medicaid. It defines the populations and services that Medicaid can cover and the rules about how Medicaid works. Based on these rules, the federal government and states work together to define and manage Medicaid. Each state describes their Medicaid program, populations, and services in their state plan.

The Centers for Medicare and Medicaid Services (CMS) reviews and approves each state plan. In addition, CMS can make an exception to (or waive) some requirements and allow state Medicaid programs to expand the populations and services they cover. Waivers must be updated and renewed every five years.

In the state plan, Wisconsin Medicaid covers primary care, acute care, and other health care for these populations:

- Children and families with low incomes
- Pregnant people with low incomes
- People with disabilities
- People who receive social security income
- Some current and former foster care youth
- Some people who also receive Medicare

In five (5) approved waivers, Wisconsin Medicaid covers additional populations and services:

- BadgerCare
- SeniorCare
- Family Care and Family Care Partnership
- IRIS (Include, Respect, I Self-Direct)
- Children's Long-Term Care (CLTS) Program



Wisconsin Medicaid waivers for health care services

Name	Summary	Population(s) covered	Dates	Ongoing activities
BadgerCare	 The BadgerCare 1115 waiver adds Medicaid coverage for: Adults without children who have low incomes. Former foster care youth from another state. Residential substance use disorder treatment for adults in institutions for mental disease (IMDs). Members enroll in a managed care organization. The BadgerCare waiver allows the Medicaid to charge an \$8 copayment when members visit the emergency room when their care needs aren't an emergency. 	Adults with incomes up to 100% federal poverty level (FPL) who do not have children Former foster care youth up to age 26 from out of state	10/29/24 to 12/31/29	DHS submitted two required reports to CMS: 1. BadgerCare evaluation for the 2018-2024 waiver period. Proposed approach to evaluate BadgerCare in the current waiver period from 2024-2029.
	This addition to the BadgerCare waiver would add coverage for inpatient stays in an IMD for adults age 21-64 who have serious mental illness (SMI) or serious emotional disturbance (SED).	Adults with SMI or SED, age 21-64	Pending	DHS submitted to CMS in December 2024. Approval may happen in 2026.
SeniorCare	 The SeniorCare 1115 waiver adds Medicaid coverage for: Prescription drugs Medication Therapy Management for members with high risk for medical complications due to their medications. Members are older adults who aren't eligible for Wisconsin Medicaid because their annual income is too high. 	Adults age 65 and older with income up to 200% FPL	4/12/19 to 12/31/28	DHS submitted an annual evaluation report in March 2025.



Family Care & Family Care Partnership	The Family Care and Family Care Partnership 1915 waiver adds Medicaid coverage for long term care services. Members use home and community-based services (HCBS) and would otherwise require enough care that they would live in a nursing home. Covered services include: day care, care management, transportation, and daily living. Members work with a managed care organization to plan, find, manage, and pay for the services they need.	Adults age 65 and older Adults age 18-64 with disabilities who need a nursing home level of care Adults age 18 and older with intellectual and/or development disabilities	1/1/25 to 12/31/29	Renewed January 2025. DHS is submitting updated budget information to CMS.
IRIS (Include, Respect, I Self-Direct)	The IRIS 1915 waiver adds Medicaid coverage for long term care services. Members use HCBS and would otherwise require enough care that they would live in a nursing home. Covered services include: live-in caregivers, nursing, assistive equipment and devices, transportation, and counseling. IRIS members work with a partner agency to manage their care. They create their own care plan, choose services and providers, and pay for their care within an approved budget.	Adults 65 and older Adults ages 18-64 with disabilities who need a nursing home level of care Adults age 18 and older with intellectual and/or development disabilities	1/1/21 to 12/31/25	In September 2025, DHS will submit a request to CMS to extend the IRIS waiver. DHS gathered public input between July and August. More information about the waiver renewal is available on the IRIS Waiver Renewal webpage.
Children's Long-Term Care (CLTS) Program	The CLTS 1915 waiver adds Medicaid coverage for long term care services. CLTS covers HCBS for kids with disabilities (and their families). Without HCBS, members would otherwise require enough care that they would live in an institution. County agencies work with members and families to determine kids' needs and coordinate services. Covered services include: support services, teaching and skills development, service coordination, assistive equipment, and housing supports.	 Kids up to age 21 who: Have an intellectual disability Have a physical disability Have been diagnosed with severe emotional disturbance 	1/1/22 to 12/31/26	CMS approved small, technical changes in early 2025. In July 2026, DHS will submit a request to CMS to extend the CLTS waiver. DHS is currently gathering input from the public. More information is available on the CLTS Program Waiver Renewal webpage.



