

STATE OF WISCONSIN
Department of Health Services
Division of Medicaid Services



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DATE: 12/31/2025

ADMINISTRATOR'S MEMO

DISPOSAL DATE: Ongoing

NOTICE: 25-06

TO: County Departments of Human Services Directors
County Departments of Social Services Directors

FROM: William E. Hanna
Medicaid Director
Division of Medicaid Services

Signed by:

William Hanna

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ENHANCED FEDERAL FUNDING FOR QUALIFYING IM ACTIVITIES

PURPOSE

The purpose of this memo is to communicate information about enhanced federal funding for eligibility and enrollment activities under the Income Maintenance (IM) contract between the Department of Health Services (DHS) and Consortia for the period of January 1, 2024 through December 31, 2024.

BACKGROUND

In accordance with the Consortia's Income Maintenance contract (Exhibit II, Section 1-C. Reimbursement), DHS requested enhanced federal funding for qualifying eligibility and enrollment activities from the Center for Medicare and Medicaid Services (CMS).

Requests must be submitted for approval for each federal fiscal year (FFY) and are subject to review and demonstrated compliance with CMS requirements. If CMS determines that the enhanced funding is no longer available or if DHS's request is not approved, DHS will return to the standard 50% reimbursement rate for local costs.

Amount and Distribution of Enhanced Funding

The amount of enhanced funding was determined by using a blended rate based on the proportion of the total Medicaid related IM activities that qualify for enhanced claiming at 75%, determined by the RMS statistics for calendar year 2024. The attached table shows the amount of local enhanced funding to be distributed to the Consortia for CY24.

Enhanced funding associated with local dollars will be distributed based on the amount of local match each Consortium contributed in CY 2024 and reimbursement to the Consortia will be issued in the form

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of a check. A Consortium's enhanced funding amount is eligible for federal match if the Consortium chooses to re-invest the funds into the IM programs for reimbursement of allowable expenses.

CENTRAL OFFICE CONTACTS

For questions or assistance regarding information contained in this memo, please contact Jonelle Brom at (608) 867-4515 or by email at JonelleM.Brom@dhs.wisconsin.gov

For fiscal questions, please contact Riley Samis at (608) 261-0715 or by email at Riley.Samis@dhs.wisconsin.gov

CY 2024 IM Enhanced Funding Reimbursement

Consortium	CY 24 Enhanced FED Reimbursement
Bay Lake (Brown)	\$659,455.21
Capital (Dane)	\$2,089,380.23
Great Rivers (Eau Claire)	\$1,050,358.02
Moraine Lakes (Fond du Lac)	\$1,211,474.40
WKRP (Kenosha)	\$636,401.88
Western (LaCrosse)	\$567,312.36
Central (Marathon)	\$411,645.40
East Central (Marquette)	\$1,174,274.22
Southern (Rock)	\$850,260.10
Northern (Wood)	\$466,565.04
TOTAL	\$9,117,126.87