



WISCONSIN DEPARTMENT  
*of* HEALTH SERVICES

# Medicaid and BadgerCare Plus: What's Coming in 2024?

September 14, 2023

# Today's Agenda



- Recap Unwinding activities
- Prepare for 2024
  - Medicaid Purchase Plan (MAPP) refresher
  - Policy reinstatement
  - 12-month continuous coverage for children
- Answer questions

# Current Status of Unwinding



# A Quick Recap

- Unwinding refers to the process of returning to routine operations in Medicaid programs, as temporary policies related to the pandemic end.



# Unwinding is Underway

Effective April 1, 2023

- New applicants who apply for BadgerCare Plus or Medicaid do not have continuous coverage.
- Existing members keep their coverage until the next full redetermination of their eligibility.

Renewals were distributed evenly over 12 months from June 2023 through May 2024.

# Key Unwinding Resources

- Download materials from our partner toolkit  
[dhs.wi.gov/unwindingtoolkit](https://dhs.wi.gov/unwindingtoolkit)
- Email us if you have questions  
[DHSForwardHealthPartners@dhs.wisconsin.gov](mailto:DHSForwardHealthPartners@dhs.wisconsin.gov)
- Join our listserv to get Unwinding updates via email  
[public.govdelivery.com/accounts/WIDHS/subscriber/new?topic\\_id=WIDHS\\_668](https://public.govdelivery.com/accounts/WIDHS/subscriber/new?topic_id=WIDHS_668)

# New Unwinding Activities

- Some temporary policies continue to be suspended:
  - Premiums for childless adults in BadgerCare Plus
  - A treatment needs question for childless adults in BadgerCare Plus
  - Premiums for children in BadgerCare Plus
  - Premiums for MAPP members
  - MAPP work requirements
- Next month we will start to reach out to members about the reinstatement of premiums and work requirements for MAPP.

# MAPP Refresher





# About MAPP

- For people with a disability who are working or participating in the Health and Employment Counseling (HEC) program.
- It has higher income and asset limits than most other forms of Medicaid, allowing members to get health coverage while employed.
- Premiums changed in 2020, but changes were on hold during the COVID-19 public health emergency.

# MAPP Qualifications

- U.S. citizen or qualifying immigrant
- At least 18 years old
- Determined disabled, presumptively disabled, or “MAPP Disabled”
- Meet the work requirement with at least one work activity per month
  - Employed
  - Self-employed
  - Earning “in kind” income
  - Participating in HEC

# In-Kind Income

- Done in return for a service or product, not cash
  - Example: walking a neighbor's dog in exchange for groceries
- Regular and predictable
- Must occur at least once per month



# Health and Employment Counseling

- Members can enroll in HEC by submitting a plan with activities to help them become employed.
- HEC participation can occur for up to nine months with a three-month extension, for a total of 12 months.

# Financial Limits

Income Limit	Asset Limit
250% of the federal poverty level (FPL)	\$15,000
Household income is counted, including the applicant, their spouse, and minor dependents	<ul style="list-style-type: none"><li>• Only the member's assets are counted</li><li>• Independence Accounts are exempt</li></ul>

# MAPP Premiums

Who pays?	Members whose gross income is $> 100\%$ of the FPL
Who doesn't pay?	Members whose gross income is $\leq 100\%$ FPL
How much?	\$25 + 3% of their adjusted income over 100% FPL
What changed?	<ul style="list-style-type: none"><li>• Before 2020, premiums were charged when a member's gross income was <math>&gt; 150\%</math> of FPL</li><li>• In general, premiums were higher before this change</li></ul>

# MAPP Premium Example

- Our MAPP member's gross monthly income is 206% FPL, more than the 100% FPL premium limit. They do not have deductions.

\$2,503 Adjusted income	-	\$1,215 100% FPL	=	\$1,288
\$1,288	x	3%	=	\$38.64
\$38.64	+	\$25.00 Minimum	=	\$63.64

**\$63**

monthly premium

# Other MAPP premium policies

- Members may apply for temporary waivers of premiums due to an unusual situation causing a temporary financial hardship.
- If a member does not pay their premium, they will enter a 3-month Restrictive Reenrollment Period (RRP).





# Policy Reinstatement in 2024



# MAPP Policy Reinstatement

## Premiums and work requirements resume

- Members without continuous coverage as of January 1 need to pay premiums in January and meet the work requirement by January 31, 2024.
- Members with continuous eligibility as of January 1 need to meet the MAPP work requirement at their renewal and start paying a premium after they've renewed.

# MAPP Policy Reinstatement

Key Policy Dates	
January 1, 2024	MAPP work requirements and premiums will resume for new applicants and existing members*
January 10, 2024	First premium payment due for members subject to a premium in January 2024*
February 1, 2024	First day a MAPP member can lose eligibility due to not paying a January MAPP premium or not meeting the work requirement*

\*MAPP members with continuous coverage as of January 1, 2024, will not be subject to these policies until they complete their renewal in 2024.

# Polling Question #1

*True or False?*

MAPP members must work at least 20 hours per week to meet the work requirement.

# Polling Answer #1

*False.*

MAPP members must have at least one work activity per month. This can be employment, self-employment, in-kind income or enrollment in the Health and Employment Counseling Program (HEC).

# Continuous Coverage for Kids



# Keeping Kids Covered

- Wisconsin will implement 12 months of continuous coverage for children in BadgerCare Plus and most other Medicaid programs as of January 1, 2024.
- Kids under age 19 will stay covered through their certification period, even if the family's situation changes.

## Benefits:

- ✓ Improved health outcomes
- ✓ Reduced financial barriers to care
- ✓ Decreased churn

# Qualifying Children's Groups

- BadgerCare Plus
- BadgerCare Plus Former Foster Care Youth
- Children's Long-Term Support (CLTS) Waiver
- Family Planning Only Services
- Foster Care Medicaid
- Institutional Medicaid
- Medicaid Purchase Plan (MAPP)
- Special Status Medicaid
- SSI Medicaid
- SSI-Related Medicaid
- Wisconsin Well Woman Medicaid



# Non-Qualifying Children

- Continuous coverage does not apply to children:
  - Enrolled as continuously eligible newborns (CENs)
  - Enrolled under presumptive eligibility
  - Enrolled in Katie Beckett Medicaid
  - Enrolled in a Medicare Savings Program
  - Required to meet deductibles
  - With unverified citizenship, identity, or immigration status (after a reasonable opportunity period)

# Continuous Coverage Period and Exceptions



- Children shall remain eligible until:
  - The end of their 12-month certification period
  - They turn 19
  - They are no longer a resident of Wisconsin
  - They voluntarily disenroll
  - They pass away
- **Whichever comes first!**

# The Continuous Coverage Period



- 12-month continuous coverage periods will be established for eligible children:
  - At application
  - When a child becomes eligible under a qualifying group (move from a non-qualifying group or added to a case)
  - At renewal
  - For existing members, as of January 1, 2024, until their renewal date

# How it Works

- Children enrolled in a qualifying program as of January 1, 2024, will continue to have coverage until their renewal date.
- For example, children in a household that enrolled in May 2023 will keep their benefits at least through April 2024, even if the household reports a change.
- New members under age 19 who enroll in a qualifying program on or after January 1, 2024, will also keep their benefits for a full 12 months.

# SSI Medicaid

- Continuous coverage periods will be based on the month a child's SSI Medicaid began, ensuring at least 12 months of coverage.
- When they lose SSI, children will be informed that they will keep their Medicaid until the end of their 12-month continuous coverage period.
- Letters will be sent approximately 45 days before the end of the continuous coverage period to tell them their Medicaid is ending and next steps.

# Foster Care Medicaid

- Children in Foster Care, Subsidized Guardianship, or Adoption Assistance Medicaid will keep continuous coverage until:
  - The end of their 12-month period, or
  - Three months after they lose placement
- **Whichever comes later!**

# Polling Question #2

*True or False?*

Any child enrolled in Medicaid on January 1, 2024 will have 12 months of continuous coverage from January through December 2024.

# Polling Answer #2

*False.*

A child enrolled in Medicaid on January 1, 2024 will have continuous coverage, but the 12 months is based on their last application or renewal date.



Questions?



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