STATE OF WISCONSIN Department of Health Services Division of Medicaid Services



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Date: April 25, 2018 DMS Operations Memo 18-11

To: Income Maintenance Supervisors

Income Maintenance Lead Workers

Income Maintenance Staff

Affected Programs:	
☐ BadgerCare Plus	☐ Caretaker Supplement
FoodShare	☐ FoodShare Employment
	and Training
SeniorCare	

From: Rebecca McAtee, Bureau Director

Bureau of Enrollment Policy and Systems

Division of Medicaid Services

Policy and Process Changes for Home and Community-Based Waiver Medicaid for Children's Long-Term Support

CROSS REFERENCE

- Operations Memos <u>12-43</u> and <u>17-27</u>
- Medicaid Eligibility Handbook, <u>Section 28.14.2 Children's Long-Term Support Waiver Program</u> CARES Processing

EFFECTIVE DATE

Immediately

PURPOSE

This Operations Memo announces a change in policy related to how Medicaid eligibility is determined for Children's Long-Term Support (CLTS) Waiver Program applicants and participants and provides instructions on how to process applications and renewals for Home and Community-Based Waiver (HCBW) Medicaid for CLTS in CARES Worker Web (CWW).

This Memo also announces a new form, <u>Home and Community-Based Waiver Medicaid Enrollment for the Children's Long-Term Support Waiver Program</u>, F-02319, which was created to facilitate streamlined communication between county waiver agency (CWA) staff and income maintenance (IM) workers, expedite the process of determining HCBW eligibility for CLTS Waiver Program applicants and participants, and ensure the determination of a correct Medicaid eligibility begin date.

BACKGROUND

CWAs determine eligibility and enroll children and youth with disabilities in the CLTS Waiver Program, which provides support and services beyond the regular scope of Medicaid card services to

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support participants in their homes and communities. To be enrolled in the CLTS Waiver Program, a child must first be eligible for any full-benefit Wisconsin Medicaid program or BadgerCare Plus.

Previously, children applying for HCBW for the CLTS Waiver Program were required to be tested first with their families to see if they would be eligible for BadgerCare Plus and the Group A Waiver. The changes stated in this Memo will expedite the Medicaid eligibility determination and CLTS Waiver Program enrollments and renewals for eligible children.

POLICY

Effective immediately, when CLTS Waiver Program applicants and participants apply for or renew HCBW, they must first be tested for eligibility using HCBW rules. If an applicant or participant is ineligible for HCBW, he or she must then be tested for BadgerCare Plus.

People can be eligible for the CLTS Waiver Program and HCBW Medicaid through age 21.

As a reminder, when eligibility is determined for HCBW for the CLTS Waiver Program, only the applicant's or participant's income is counted. There is no asset test.

PROCESS

IM workers must follow the instructions below to ensure that the new policy is applied correctly. HCBW requests must be processed differently depending on whether there are any other people on the case who are requesting health care.

To facilitate the application and renewal process and reduce the duplication of verification requests that could cause a burden to families who are applying for multiple programs, CWA staff working with a family whose child is requesting HCBW must submit the following information to the IM agency based on whether the request is an initial application or a renewal.

For **applications**, CWA staff must submit the following:

- A valid application for health care (see <u>Medicaid Eligibility Handbook, Section 2.4 Valid Application</u>), including the <u>Wisconsin Medicaid, BadgerCare Plus and Family Planning Only Services Registration Application</u>, F-10129
- Home and Community-Based Waiver Medicaid Enrollment for the Children's Long-Term Support Waiver Program form, F-02319
- Medicaid Waiver Eligibility and Cost Sharing Worksheet, F-20919, with Section IV fully completed
- Verification of the child's income, if any

Note: As a reminder, if the registration application (F-10129) is submitted, workers must continue to collect the second signature once the application has been processed to attest to the information provided and used for the eligibility determination. This may be done by completing a telephonic signature if a phone interview is done or by sending the case summary and pending for signature.

For **renewals**, the family must submit a completed Pre-Printed Renewal Form and CWA staff must submit the following:

- Home and Community-Based Waiver Medicaid Enrollment for the Children's Long-Term Support Waiver Program, F-02319
- Medicaid Waiver Eligibility and Cost Sharing Worksheet, F-20919, with Section IV fully completed
- Verification of the child's income, if any

NO ONE ELSE ON THE CASE IS REQUESTING HEALTH CARE

For any child being tested for HCBW where no one else on the case is requesting health care, process the HCBW request as follows:

- 1. When proceeding through the driver flow, enter information pertaining to the child only. (For example, select "No" for the employment gatepost questions if the child is not employed.)
- 2. On the Community Waivers page, enter the information provided by the CWA staff on F-02319:
 - **Date of Request:** Date the IM agency received the application
 - Program Start Date: Date CLTS functional eligibility was established

Reminder: The "Is Disability Determination Required?" field must be updated to **No** for all children's HCBW determinations (see <u>Operations Memo 17-27</u>, "<u>Disability Determination Will No Longer Be Required for Children Applying for the Children's Long-Term Support Waiver Program</u>").

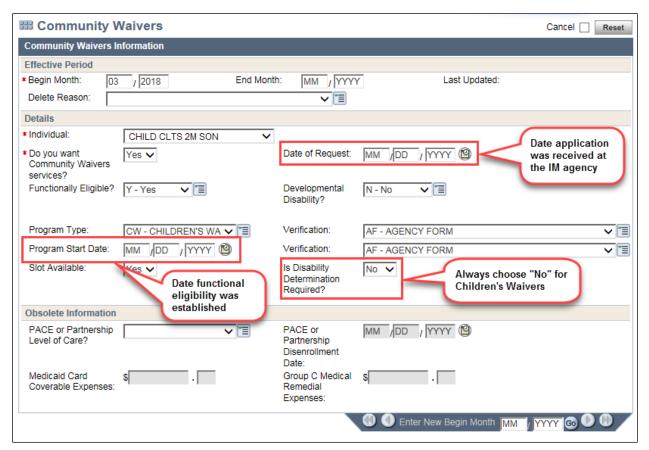


Figure 1 Community Waivers Page

3. On the Tax Filing Details page, select **F** - **Failed to provide information** for the question "Is Anyone in The Household Filing Taxes?"

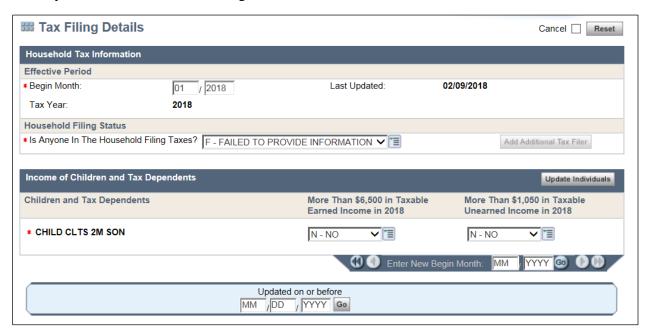


Figure 2 Tax Filing Details Page

4. Document the actions taken in case comments.

SOMEONE ELSE ON THE CASE IS REQUESTING HEALTH CARE

For any child being tested for HCBW where someone else on the case is requesting health care, process the HCBW request as follows:

1. On the child's Benefits Received page, select **Yes** for the SSI 1619(b) field.

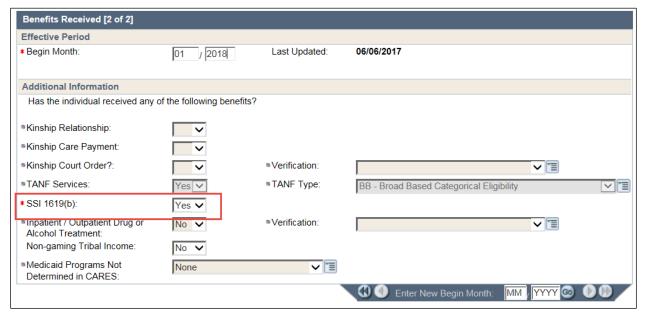


Figure 3 Benefits Received Page

- 2. On the Community Waivers page, enter the information provided by the CWA staff on F-02319:
 - **Date of Request:** Date the IM agency received the application
 - Program Start Date: Date CLTS functional eligibility was established

Reminder: The "Is Disability Determination Required?" field must be updated to **No** for all children's HCBW determinations.

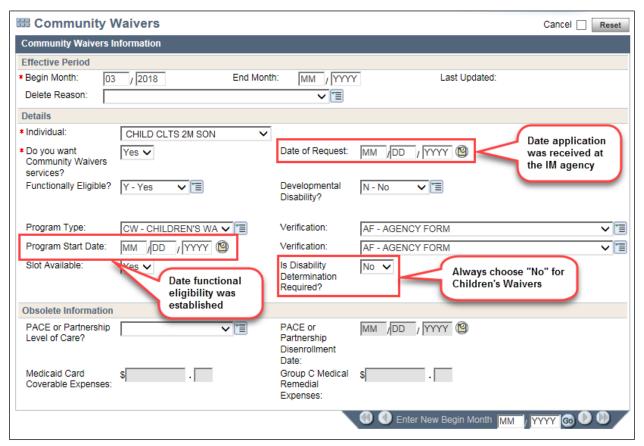


Figure 4 Community Waivers Page

3. Document the actions taken in case comments.

CONTACTS

BEPS CARES Information and Problem Resolution Center

DHS/DMS/BEPS/MF