WISCONSIN DEPARTMENT OF HEALTH SERVICES

Division of Medicaid Services

1 W. Wilson St.

Madison WI 53703

To: BadgerCare Plus Users

From: Bureau of Eligibility and Enrollment Policy

Re: BadgerCare Plus Handbook Release 24-03

Release Date: 12/18/2024

Effective Date: 12/18/2024

EFFECTIVE DATE		The following policy additions or changes are effective 12/18/2024 unless otherwise noted. Underlined text		
		denotes new text. Text with a strike through it denotes		
		deleted text.		
POLICY UP	PDATES			
1.2.10	Certification Period	New section.		
	Changes for Children in			
	Continuous Coverage			
	Periods			
2.5	BadgerCare Plus	Removed "at least" from the participant requirement for a		
	Assistance Groups	BadgerCare assistance group.		
4.3.2.1	Reverification of	Updated text to be gender-neutral.		
	Immigration Status			
4.3.2.2	Reasonable Opportunity	Updated U.S. Department of Health and Human Services		
	Period for Verification of	Office of Refugee Resettlement to U.S. Department of Health		
	Immigration Status	Human Services on Trafficking in Persons in Example 2.		
4.3.3	Immigrants Eligible for	Section rewritten and reorganized.		
	BadgerCare Plus			
4.3.4	Public Charge	Updated to add abbreviations.		
4.3.5	Immigration Customs	Updated section header and updated INS to ICE (Immigration		
	Enforcement(ICE)	and Custom Enforcement).		
	Reporting			
4.3.6	Undocumented Non-	Updated language used in Examples to correctly reflect		
	Citizens	policy.		

4.3.7	Immigration Status	Section reorganized and updated text in far-right column
4.5.7	Chart	header to be gender-neutral.
4.3.10		Section removed; information moved to different section.
	Military Service	·
4.3.11	Victims of Trafficking	Section removed; information moved to different section.
9.9	Mandatory Verification	Added bullet point regarding verification of identity.
	Items	
9.9.8	Tribal Membership,	Clarified language to reflect current policy.
	Descent, or Eligible to	
	Receive Indian Health	
	Services	
16.1.2	Income Under Modified	Removed paragraph and example that included policy that is
	Adjusted Gross Income	no longer relevant. Effective 1/1/2025.
	Rules	
16.2.42	Money from Another	Removed a parenthesis.
	Person	
16.5.29	Restricted Stock	New section.
	Contributions	
18.1.3	Children	Added new examples for child coverage.
25.4	Valid Application	Removed duplicate bullet point.
26.1.1	Renewals Introduction	Updated early renewal information.
26.1.1.1	Redeterminations for	New section.
	Changes in Circumstance	
26.1.2	Late Renewals	Added Wisconsin Well Woman Medicaid and Katie Beckett
		Medicaid to the list of programs that can have late renewal.
		Effective 10/19/2024.
26.1.3.2	Administrative Renewals	Added details about admin renewals, updated terminology in
	Section Criteria	sections 26.1.3.3.1 and 26.1.3.3.2 for consistency.
26.2	Choice of Renewal	Updated terminology for consistency.
26.3	Renewal Processing	Updated terminology for consistency.
38.4.4.1	Automatic	Updated HMO Disenrollment information to reflect changes
	Disenrollment	implemented in November 2024.
41.1	BadgerCare Plus	Updated language for immigrants and pregnant people.
	Prenatal Program	
41.2.1	Unique Aspects of	Updated language for immigrants.
	BadgerCare Plus	
	Prenatal Program	
41.3	BadgerCare Plus	Updated language for immigrants and pregnant people.
	Prenatal Program	
41.5	Eligibility Begin Date	Updated language for immigrants and pregnant people.
41.6	Eligibility End Date	Updated language for immigrants.
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1.2 Continuous Coverage for Qualifying Children

1.2.10 Certification Period Changes for Children in Continuous Coverage Periods

When an individual opens for a new health care certification period on a case, new 12-month certification periods will be established for other eligible health care members in the household, with some exceptions.

If a child would be negatively impacted or move to a CHIP category of health care because of a change, person-add, or new program request during their 12-month continuous coverage period, the child will not get a new 12-month certification period. They will remain in their current certification period. However, other household members can get new 12-month certification periods. Households may also have different health care renewal dates.

Example 11

Mary's 10-year-old son Tom is enrolled in BadgerCare Plus with a \$10 premium because Mary's income is at 210% FPL. Tom's continuous coverage period is July 1, 2024, through June 30, 2025. On December 4, 2024, Tom moves to his father Jack's household. Jack requests health care for himself and Tom. Jack is denied due to excess income. Tom would also be ineligible due to Jack's income being over 306% FPL. However, since Tom has an already established continuous coverage period from his mother's case, Tom is enrolled in BadgerCare Plus on Jack's case at 210% FPL for the remainder of his continuous coverage period, through June 30, 2025. Jack will be charged the \$10 monthly premium for Tom's coverage once Tom is enrolled on Jack's case.

Example 12

LaTanva's 11-vear-old son Tucker is enrolled in BadgerCare Plus with a \$30 premium from January 1, 2025, through December 31, 2025. On February 7, 2025, LaTanya's 8-year-old son Trey joins the household and requests health care. Trey has continuous coverage under BadgerCare Plus without a premium from his father's case through June 30, 2025. Trey is determined eligible on LaTanya's case and would normally have a premium based on the income and group size of LaTanya's case. Trey will be enrolled in BadgerCare Plus without a premium for the remainder of his continuous coverage period from his father's case, through June 30, 2025. Tucker's premium reduces from \$30 to \$10 with the increased group size, and he gets a new 12-month certification period from March 1, 2025. through February 28, 2026. While Trey has a renewal date of June 30, 2025, Tucker has a renewal date of February 28, 2026. If a renewal is completed for Trev in June 2025, and Trev and Tucker are both determined eligible without adverse impact, their certification periods may align.

2.5 BadgerCare Plus Assistance Groups

Because of different BadgerCare Plus eligibility requirements, people within the BadgerCare Plus test group are placed into various BadgerCare Plus assistance groups.

Every BadgerCare Plus assistance group will have at least one potentially eligible member. Besides these potentially eligible members, other people may be designated as a person who is counted in the group and whose income may be counted when determining financial eligibility. Some people on the application will not be considered at all when determining eligibility. Placement in BadgerCare Plus assistance groups is dependent on age, tax filing relationships, and family relationships to the individual(s) whose eligibility is being determined.

The following are BadgerCare Plus assistance groups:

Assistance Group	Description
MAGY	Former Foster Care Youth
MAGP	Pregnant women, including those who are eligible for the BadgerCare Plus Prenatal Program and those who become eligible after meeting a deductible
MAGB	Continuously Eligible Newborns
MAGM	Adults in Earned Income and Spousal Support extensions
MAGN	Persons who are caretakers relatives, or the spouses of caretakers relatives in the home, including Child Welfare caretakers
MAGL	Children living with non-legally responsible relatives
MAGC	Children under age 19, living alone or with a parent or parents
MAGA	Persons age 19 or older who are parents, or stepparents of a child in the home, including Child Welfare parents
MAGD	Children who are eligible through meeting a deductible
MAGE	Children and Adults in Earned Income and Spousal Support extensions
MAGS	Childless adults

4.3 Immigrants

4.3.2 Verification

Primary verification of immigration status is done through the Department of Homeland Security by use of the Federal Data Services Hub (FDSH) or SAVE, which is an automated telephone and computer database system. A worker processing an application can simply enter the immigrant's alien number and immigration document type into CWW. That information, along with demographic information of the individual, is sent in real time to the FDSH. The FDSH will immediately return verification of the immigrant's status, date of entry, and the date the status was granted if it's available from the Department of Homeland Security, along with other information. If the FDSH cannot provide verification of the immigration status, workers are directed to seek secondary verification though SAVE or take other action.

The verification query via the FDSH or SAVE most likely results in returning the latest date of any qualified alien status update for an individual, not their original date of arrival. The only way to obtain an accurate date of arrival for those who do not meet an exemption category and who report a date of arrival prior to August 22, 1996, is through the secondary verification procedure. The FDSH or SAVE will describe the immigrant's current status which may have changed from the original status. In some situations described later workers will need to maintain the original status in CARES.

It may be necessary to complete a secondary or third level verification procedure with the U.S. Citizenship and Immigration Services (USCIS), including confirming the date of arrival, in the following situations:

- The applicant does not fall into any of the categories of non-citizens who are exempt from the five-year ban (for example, refugees, asylees, those with military service).
- An IM worker has made an initial or primary verification inquiry using the SAVE database. The information from the inquiry conflicts with information on the applicant's immigration documents or what they are telling the IM worker.
- A non-citizen applicant tells an IM worker that they came to the U.S. prior to August 22, 1996. If they arrived in a legal or documented status, the IM worker needs to verify the date of arrival to ensure that the correct alien eligibility rules are being applied.
- The FDSH or SAVE returns the message "Institute Secondary Verification."
- The IM worker finds any questionable information in the initial verification process.
- Cuban/Haitian entrants when SAVE or the Hub indicates the need.

An Immigration Status Verifier at Department of Homeland Security will research the alien's records and complete the response portion of the verification request. See Process Help, Chapter 82 SAVE for more information.

Additional verifications from sources other than the Department of Homeland Security are sometimes required as well. For example, persons who are in an immigration status subject to the 5-year bar and who indicate that they, their spouse or parent is in the military service or is a veteran, that military status must also be verified.

The following documents are considered valid verification of military service:

- A signed statement or affidavit form from an applicant attesting to being a veteran, surviving spouse, or dependent child.
- Military records

To establish a date of arrival for a qualified immigrant who originally arrived as an undocumented immigrant prior to August 22, 1996, the applicant must provide at least one piece of documentation that shows their presence in the U.S. prior to August 22, 1996. The following documents are considered valid verification of presence in the U.S.:

- Pay stubs
- A letter from an employer
- Lease
- Rent receipts
- Utility bills

To establish continuous presence, require a signed statement from the applicant stating they were continuously present for the period in question. The signed statement will be sufficient unless a worker believes the information is fraudulent or information received is questionable.

Signed Example

I, first and last name, hereby declare that I have continuously resided **Statement** in the United States between the day I arrived in the United States, date here, and the date I received qualified immigrant status, date here. I have not left the United States in that time for any single period longer than 30 days or for multiple periods totaling more than 90 days.

Applicant or Authorized Representative Signature and Date

Immigration statuses for most immigrants are permanent and most often change when the immigrant become a U.S. citizen. For this reason, immigration status for most members should only be verified once, unless the status for an individual is questionable or it's a status subject to reverification (see SECTION 4.3.2.1 REVERIFICATION OF IMMIGRATION STATUS). Even if an immigrant loses health care eligibility for a period of time, their immigration status does not need to be reverified unless the status is subject to reverification.

See Process Help, Section 44.3.9 Immigrant/Refugee Information Page for additional information on using the FDSH or the procedures in the SAVE Manual.

4.3.2.1 Reverification of Immigration Status

The following personspeople with a Registration Status Code of 20 – Lawfully Residing are required to verify their immigration status at application and renewal, even if they have previously verified their immigration status:

- Immigrant children under age 19
- Youths under age 21 in an Institution for Mental Disease Diseases (IMD)

Pregnant womenpeople

Typically, these <u>personspeople</u> will be labelled with a "Non-immigrant" status by the United States Citizenship and Immigration Services. Reverifications are not to be done for children and pregnant <u>womenpeople</u> with other Registration Status Codes, as those statuses are permanent.

The reverification requirement is only to be applied at the time of subsequent applications, renewals, or when an agency receives information indicating that the member may no longer be lawfully residing in the U.S. For pregnant womenpeople, the reverification is not to occur until the renewal is done to determine the woman's person's eligibility after the end of the 60-day postpartum period.

4.3.2.2 Reasonable Opportunity Period for Verification of Immigration Status

Applicants who have declared that they are in a satisfactory immigration status, are otherwise eligible and are only pending for verification of immigration status must be certified for health care benefits within the normal application processing timeframe (30 days from the filing date). They are to continue receiving health care benefits for which they are eligible, while the IM agency waits for immigration status verification. Applicants who are otherwise eligible and are only pending for verification of immigration will have 90 days after receiving a request for immigration verification to provide the requested documentation. This 90-day period is called the Reasonable Opportunity Period (ROP). The 90-day ROP starts on the date after the member receives the notice informing the member of the need for the member to provide immigration verification by the end of the reasonable opportunity period. Federal regulations require that a minimum of five days be allotted for applicants to receive notices. For this reason, the end of the ROP must be set no less than 95 days after the date on the notice, even when the member receives the notice in less than five days. It also means that if a member shows that a notice was received more than five days after the date on the notice, the deadline must be extended to 90 days after the date the member received the notice.

The 90-day ROP applies when immigration verification is needed from a person at any time: applications, renewals, and when a person is newly requesting benefits on an existing case.

Applicants are eligible for benefits beginning with the first of the month of application or request. However, they are not eligible for backdated health care benefits while waiting for verification of their immigration status. Once verification of an eligible immigration status is provided, the applicant's eligibility must then be determined for backdated health care benefits if they have been requested.

When requested verification is not provided by the end of the ROP, the worker must take action within 30 days to terminate eligibility, unless one of the following situations occurs where the worker is allowed to extend the reasonable opportunity period:

- The agency determines that the person is making a good faith effort to obtain any necessary documentation.
- The agency needs more time to verify the person's status through other available electronic data sources.
- The agency needs to assist the person in obtaining documents needed to verify their status.

Persons whose health care benefits were terminated for failure to provide verification of immigration status by the end of the ROP are not eligible to have their benefits continued if they request a fair hearing.

A person may receive a reasonable opportunity period more than once in a lifetime.

Example Vladimir is a 12-year-old lawfully present in the United States on a visa applying for health care benefits with his parents. When verification is attempted through the FDSH, the response requires a secondary verification request to SAVE. Vladimir is otherwise eligible for BadgerCare Plus and is enrolled in BadgerCare Plus and the ROP notice is sent to the family while waiting for the SAVE response. A week later, SAVE verifies the child is lawfully present in the U.S. under a Temporary Protected Status and the reasonable opportunity period ends.

> A year later, the case is up for renewal. Since Vladimir has a Registration Status Code of 20 – Lawfully Residing, his immigration status must be verified again. Once more, the FDSH response requires verification of the child's status through SAVE. If Vladimir is otherwise eligible for BadgerCare Plus, they will be enrolled without delay and be sent a new reasonable opportunity period notice to the family. Again, Vladimir may be eligible for up to 90 days after receiving the notice while his immigration status is being verified.

Example |Sasha is a 22-year-old applying for health care benefits. Information received from the FDSH indicates she is a victim of trafficking. Confirmation of her status as a victim of trafficking is needed, and she must submit a letter from the U.S. Department of Health and Human Services Office of Refugee Resettlement on Trafficking in Persons (HHS ORROTIP). She is enrolled in BadderCare Plus and is sent the ROP notice requesting Sasha submit a letter from HHS ORROTIP. Sasha never submits a letter from HHS ORROTIP and her benefits end when the ROP expires.

> One year later, Sasha again applies for health care benefits. Once more, the FDSH returns the same results. Sasha is otherwise eligible for BadgerCare Plus. She must be enrolled in BadgerCare Plus without delay and sent a new ROP notice requesting a letter from HSS ORROTIP. Again, Sasha is eligible for BadgerCare Plus for 90 days after receiving the notice while waiting for Sasha to provide a letter from HHS ORROTIP.

-Benefits issued during a reasonable opportunity period to a person otherwise eligible for BadgerCare Plus are not subject to recovery, even if the person turns out to have an immigration status that makes them ineligible for BadgerCare Plus benefits.

4.3.3 Immigrants Eligible for BadgerCare Plus

Immigrants may be eligible for BadgerCare Plus if they meet all other eligibility requirements and are either Qualifying Immigrants (see SECTION 4.3.3.1 QUALIFYING

4.3.3.1 Qualifying Immigrants

Immigrants of any age meeting the criteria listed below are considered Qualifying Immigrants. <u>Unless otherwise specified</u>, <u>categories of qualifying immigrants are</u> enumerated in 8 U.S.C § 1641(b) and (c).

- 1. A refugee admitted under Immigration and Nationality Act (INA) Section 207. A refugee is a person who flees their country due to persecution or a well-founded fear of persecution because of race, religion, nationality, political opinion, or membership in a social group. An immigrant admitted under this refugee status may be eligible for BadgerCare Plus even if their immigration status later changes.
- 2. An asylee admitted under INA Section 208. Similar to a refugee, an asylee is a person who seeks asylum and is already present in the U.S. when they request permission to stay. An immigrant admitted under this asylee status may be eligible for BadgerCare Plus even if their immigration status later changes.
- 3. An immigrant whose deportation is withheld under INA Section 243(h) and such status was granted prior to April 1, 1997, or an immigrant whose removal is withheld under INA Section 241(b)(3) on or after April 1, 1997. An immigrant admitted under this status may be eligible for BadgerCare Plus even if their immigration status later changes.
- 4. A Cuban/Haitian entrant. An immigrant admitted under this Cuban/Haitian entrant status may be eligible for BadgerCare Plus even if their immigration status later changes. Haitians paroled into the U.S. through the Haitian Family Reunification Parole Program are considered Cuban/Haitian entrants (see).
- An American Indian born in Canada who is at least 50% American Indian by blood or an American Indian born outside the U.S. who is a member of a federally recognized Indian tribe.
- 6. Victims of a severe form of trafficking in accordance with 107(b)(1) of the Trafficking Victims Protection Act of 2000 (P.L. 106-386) (see).
- 7. An immigrant lawfully admitted for permanent residence under INA 8 USC 1101 et seq.*
- 8. An immigrant paroled into the U.S. under INA Section 212(d)(5) for at least one year.*
- 9. An immigrant granted conditional entry under immigration law in effect before April 1, 1980 [INA Section 203(a)(7)].*
- 10. An immigrant who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*
- 11. An immigrant whose child has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*
- 12. An immigrant child who resides with a parent who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.*
- 13. Citizens of the Compacts of Free Association (COFA) countries (see Section 4.1.2 Citizens of the Compacts of Free Association Countries).

*If these immigrants lawfully entered the U.S. on or after August 22, 1996, they must also meet one of the following:

- Be lawfully residing in Wisconsin and an honorably discharged veteran of the U.S. Armed Forces (see)
- Be lawfully residing in Wisconsin and on active duty (other than active duty for training) in the U.S. Armed Forces (see)
- Be lawfully residing in Wisconsin and the spouse, unmarried dependent child, or surviving spouse of either an honorably discharged veteran or a person on active duty in the U.S. Armed Forces
- Be a certain Amerasian immigrant defined under §584 of the Foreign Operations, Export Financing and Related Programs Appropriations Act of 1988, with Class of Admission codes: AM1, AM2, AM3, AM6, AM7, or AM8
- Have resided in the U.S. for at least five years since their date of entry (see)

4.3.3.2 Lawfully Present Immigrant Children, Young Adults, and Pregnant Women

Children younger than 19 years old, adults younger than 21 years old who are residing in an Institute for Mental Diseases (IMD), and pregnant women do not have to wait five years to be eligible for full-benefit Medicaid and BadgerCare Plus if they meet one of the following:

- Are lawfully admitted for permanent residence (see)
- Are lawfully present under Section 203(a)(7) (see)
- Are lawfully present under Section 212(d)(5) (see)
- Have suffered from domestic abuse and are considered to be a battered immigrant (see)

Women who have an immigration status requiring a five-year waiting period before being eligible for BadgerCare Plus will have the waiting period lifted when their pregnancy is reported to the agency. The lift on the five-year waiting period continues for an additional 60 days after the last day of pregnancy and through the end of the month in which the 60th day occurs.

Example 1

Rose has an immigration status that requires a five-year waiting period before being eligible for BadgerCare Plus. Her date of entry to the U.S. was two years ago, so she is not eligible for BadgerCare Plus. In March, Rose reports that she is pregnant. She meets the other financial and nonfinancial requirements, so she is determined eligible for BadgerCare Plus as a pregnant woman. Rose's last day of pregnancy is September 5. The 60th day after her last day of pregnancy is November 4, so Rose's BadgerCare Plus coverage will end November 30. Starting in December, Rose is again subject to the five-year waiting period from her date of entry to the U.S.

Types of Qualifying Immigrants

Short Name	Qualifying Immigrant Description	Eligible if:	Additional Eligibility Information	CWW Registration Status
Refugee	A refugee admitted under Immigration and Nationality Act (INA) Section 207. A refugee is a person who flees their country due to persecution or a well-founded fear of persecution because of race, religion, nationality, political opinion, or membership in a social group.	No additional criteria	An immigrant admitted under this status may be eligible for BadgerCare Plus, without a 5-year wait, even if their immigration status later changes.	<u>04</u>
Refugee- Like	An immigrant who has benefits eligibility to the same extent as refugees due to an act of Congress	See SECTION 4.3.3.1.1 REFUGEE-LIKE IMMIGRANTS WHO HAVE BENEFIT ELIGIBILITY AS REFUGEES BECAUSE OF AN ACT OF CONGRESS for more information.	N/A	<u>04</u>
<u>Asylee</u>	An asylee admitted under INA Section 208. An asylee is a	No additional criteria.	An immigrant admitted under this status may be eligible	<u>05</u>

	person who seeks asylum and is already present in the U.S. when they request permission to stay.		for BadgerCare Plus, without a 5- year wait, even if their immigration status later changes.	
<u>Deportation</u> Withheld	An immigrant whose deportation is withheld under INA Section 243(h) and such status was granted prior to April 1, 1997, or an immigrant whose removal is withheld under INA Section 241(b)(3) on or after April 1, 1997.	No additional criteria.	An immigrant admitted under this status may be eligible for BadgerCare Plus, without a 5- year wait, even if their immigration status later changes.	<u>15</u>
Cuban- Haitian Entrant	Cuban-Haitian Entrants are defined as certain nationals of Cuba or Haiti who have permission to reside in the U.S. based on humanitarian considerations or under Section 501(e) of the Refugee	No additional criteria. See SECTION 4.3.3.1.2 CUBAN-HAITIAN ENTRANTS for more information.	The term "Cuban- Haitian Entrant" (CHE) relates to benefit eligibility rather than an immigration status. Individuals who meet the definition of	11

	Education Assistance Act of 1980 (REAA).		a CHE may be eligible for certain public benefits.		
Foreign Born American Indian	An American Indian born in Canada who is at least 50% American Indian by blood, as defined by §289 of the Immigration and Nationality Act or An American Indian born outside the U.S. who is a member of a federally recognized Indian tribe, as defined in 25 U.S.C. 450b(e).	No additional criteria.	N/A	18	
COFA Citizen	A person who is a citizen of a country in the Compacts of Free Association (COFA)	No additional criteria. See SECTION 4.3.3.1.3 CITIZENS OF THE COMPACTS OF FREE ASSOCIATION COUNTRIES for more information.	COFA citizens who later become lawful permanent residents must meet additional criteria at the time they become LPRs.	<u>22</u>	

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Trafficking Victim's child, spouse, or parent	Victims of a severe form of trafficking, and their child, spouse, or parent in accordance with 107(b)(1) of the Trafficking Victims Protection Act of 2000 (P.L. 106-386).	See SECTION 4.3.3.1.4 VICTIMS OF TRAFFICKING for more information.	An immigrant admitted under this status may be eligible for Medicaid, without a 5-year wait, even if their immigration status later changes.	<u>19</u>
Example 4Trafficking Victim		Meet one additional criterion: 1. Have been in a qualifying immigration status for at least five years. 2. Be a child younger than 19 years old. 3. Be younger than 21 years old and reside in an Institution for Mental Diseases. 4. Be pregnant. 5. Have arrived in the U.S. before August 22, 1996, and have been continuously present. 6. Have a military service/connection. 7. Be an Amerasian immigrant. SEE SECTION 4.3.3.1.5 ADDITIONAL CRITERIA FOR CERTAIN QUALIFYING IMMIGRANTS for more information.	Be certified by the Department of Health and Human Services (HHS) as a victim of trafficking (applies to T1 visa holders and others).	19 - Meets one additional criterion or is certified by HHS as a victim of trafficking. Or 21-5-year wait applies

<u>LPR</u>	An immigrant lawfully admitted for permanent residence under INA 8 USC 1101 et seq	LPRs who were first refugees, asylees, Cuban or Haitian entrants, certain trafficking victims, or had their deportation withheld maintain that status for benefits	<u>01</u>	
Parolee	An immigrant paroled into the U.S. under INA Section 212(d)(5) for at least one year	eligibility purposes. Certain parolees are treated as refugees for benefits eligibility purposes due to acts of Congress (SEE SECTION 4.3.3.1.1 REFUGEE- LIKE IMMIGRANTS WHO HAVE BENEFIT ELIGIBILITY AS REFUGEES BECAUSE OF AN ACT OF CONGRESS). Parolees who are nationals of Cuba or Haiti may	<u>06</u>	

		be Cuban Haitian Entrants for benefits eligibility purposes (SEE SECTION CUBAN- HAITIAN ENTRANTS 4.3.3.1.2).	
Conditional Entrant	An immigrant granted conditional entry under immigration law in effect before April 1, 1980 [INA Section 203(a)(7)].	<u>N/A</u>	<u>03</u>
Battered Immigrants	An immigrant as described at 8 U.S.C. §1641(c)(1) who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements	<u>N/A</u>	<u>16</u>
	An immigrant as described at 8 U.S.C. §1641(c)(2) whose child has been battered or subjected to extreme cruelty in the	N/A	<u>16</u>

U.S. and meets certain other requirements.		
An immigrant child as described at 8 U.S.C. §1641(c)(3) who resides with a parent who has been battered or subjected to extreme cruelty in the U.S. and meets certain other requirements.	N/A	<u>16</u>

Children younger than 19 years old, young adults younger than 21 years old who are residing in an IMD, and pregnant women may qualify for BadgerCare Plus if they are lawfully present in the U.S. under many of the immigrant and nonimmigrant statuses. For those who are not in a qualifying Immigrant category, but are lawfully present, use the Registration Status Code of 20 (see Process Help, for a list of SAVE Responses and the appropriate Registration Status Code in CWW to apply).

Immigrants who are not a qualifying immigrant nor lawfully present (for example, someone with a status of DACA) and who apply for BadgerCare Plus and meet all eligibility requirements except for citizenship and immigration status may be entitled to receive BadgerCare Plus Emergency Services only (see Chapter 39 Emergency Services).

Pregnant immigrants who are not a qualifying immigrant nor lawfully present and who apply for BadgerCare Plus and meet the eligibility requirements, except for citizenship and immigration status, are entitled to receive BadgerCare Plus Prenatal Program benefits (see), BadgerCare Plus Emergency Services (see Chapter 39 Emergency Services), or both.

Immigration status is an individual eligibility requirement. An individual's immigration status does not affect the eligibility of the BadgerCare Plus Group. The citizen spouse or child of an ineligible immigrant may still be eligible even though the immigrant is not.

4.3.3.4.3.3.1.1 "Refugee-Like" Immigrants who have Benefit Eligibility as Refugees Because of an Act of Congress

4.3.3.1.1.1 Iraqis and Afghans with Special Immigrant Status

Special Immigrants from Iraq or Afghanistan (Class of Admission (COA) Codes SI, and SQ-1, 2, 3, 6, 7, and 8 and SW1, 2, and 3) are to be treated like they are refugees when determining their eligibility for BadgerCare Plus for as long as they have this Special Immigrant status. This policy applies to these immigrants regardless of when they received this status.

Class of Admission (COA) Code	Description	CARES Alien Registration Status Code
SI1 or SQ1	Principal Applicant Afghan or Iraqi Special Immigrant	Code 04
SI2 or SQ2	Spouse of Principal Applicant Afghan or Iraqi Special Immigrant	Code 04
SI3 or SQ3	Unmarried Child Under 21 Years of Age of- Afghan or Iraqi Special Immigrant	Code 04
SI6 or SQ6	Principal Applicant Afghan or Iraqi Special Immigrant Principal Adjusting Status in the U.S.	Code 04
SI7 or SQ7	Spouse of-Principal Applicant Afghan or Iraqi Special Immigrant Principal Applicant Adjusting Status in the U.S.	Code 04
SI8 or SQ8	Unmarried Child Under 21 Years of Age of- Afghan or Iraqi Special Immigrant Principal Applicant Adjusting Status in the U.S.	Code 04
SW1	Surviving Spouse or child of an SQ1-eligible person	Code 04
SW2	Current Spouse of SW1	Code 04
SW3	Unmarried child of SW1	Code 04

In addition, immigrant Afghan spouses and children of former Special Immigrants who have become United States citizens are also to be treated like they are refugees when determining their eligibility for BadgerCare Plus. This treatment is to continue for as long as they have a status of Special Immigrant Conditional Permanent Resident (SI CPR). The Class of Admission (COA) codes for SI CPRs are CQ1, CQ2, and CQ3.

4.3.3.41.1.2 Afghan <u>Humanitarian</u> Parolees

Afghans and persons with no nationalities who were residing in Afghanistan and subsequently paroled into the United States on_July 31, 2021, through_September 30, 2023, are to be treated as refugees when determining their eligibility for BadgerCare Plus.

In addition, Afghans and persons with no nationalities who were residing in Afghanistan and subsequently paroled into the United States after September 30, 2022, are to be treated as refugees when determining their eligibility for BadgerCare Plus if they are one of the following:

- The spouse or child of a person paroled on July 31, 2021, through September 30, 2023.
- The parent or legal guardian of a person paroled on July 31, 2021, through September 30, 2023, who is determined to be an unaccompanied child.

All of the above persons Afghan Humanitarian Parolees are to continue to be treated as refugees until either March 31, 2023, or the date their parole status expires, whichever is later.

The table below shows the Class of Admission (COA) Codes that are used for these groups:

Class of Admission (COA) Code	Description	CARES Alien Registration Status Code
SQ4, SQ5	Special Immigrant Parolee (SI Parolee)	Code 04
DT, OAR, OAW, PAR	Humanitarian Parolee	Code 04

4.3.3.51.1.3 Ukrainian-Humanitarian Parolees

Ukrainians and persons with no nationalities who were residing in Ukraine and subsequently paroled into the United States between February 24, 2022, and September 30, 2024, are to be treated as refugees when determining their eligibility for BadgerCare Plus.

In addition, Ukrainians and persons with no nationalities who were residing in Ukraine and subsequently paroled into the United States after September 30, 2023, are to be treated as refugees when determining their eligibility for BadgerCare Plus if they are one of the following:

- The spouse or child of a person described above paroled between February 24, 2022, and September 30, 2024.
- The parent or legal guardian, or primary caregiver(s)_of an unaccompanied child described above who was paroled between February 24, 2022, and September 30, 2024.

<u>Ukrainian Humanitarian Parolees are to continue to be treated as refugees until the date their parole status expires or as long as they remain in a qualifying immigrant status.</u>

The table below shows the Class of Admission Codes (COA) codes that are used for these groups:

Class of Admission (COA) Code	Description	CARES Alien Registration Status Code
UHP, DT, PAR, or U4U	Humanitarian Parolee	Code 04

See Process Help,-<u>Section 82.6 SAVE Responses Mapping to CARES Immigration</u>
<u>Status Codes Chart</u> for detailed information including <u>classClass</u> of <u>admissionAdmission</u>
(COA) codes for Ukrainian humanitarian parolees.

4.3.3.61.2 Cuban & Haitian Entrants

The term "Cuban-Haitian Entrant" (CHE) relates_to benefit eligibility rather than an immigration status. Cuban-Haitian entrants are defined as certain nationals of Cuba or Haiti who have permission to reside in the U.S. based on humanitarian considerations or under Section 501(e) of the Refugee Education Assistance Act of 1980 (REAA). CHEs are qualified immigrants with no waiting period.

The following individuals meet the definition of Cuban-Haitian Entrant:

- An individual granted parole as a Cuban-Haitian Entrant (Status Pending) or any other special status subsequently established under the immigration laws for nationals of Cuba or Haiti, regardless of the status of the individual at the time assistance or services are provided; or
- A national of Cuba or Haiti who is not subject to a final, non-appealable and legally enforceable removal order, and:
 - Was paroled into the United States and has not acquired any other status under the Immigration and Nationality Act; or
 - o Is in removal proceedings under the Immigration and Nationality Act; or
 - Has an application for asylum pending with USCIS- (U.S. Citizenship and <u>Immigration Services</u>).

Cuban-Haitian Entrants who later have a change in status and become Lawful Permanent Residents are not subject to the 5-year waiting period as Lawful Permanent Residents.

4.3.3.1.3 Citizens of the Compacts of Free Association Countries

Citizens of the Compacts of Free Association (COFA) countries are not considered U.S. citizens or nationals. The Compacts of Free Association countries include the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau. COFA citizens have a special status with the U.S. that allows them to enter the country, work here, and acquire an SSN without obtaining an immigration status.

As of December 27, 2020, COFA citizens may be eligible for health care if they meet all other eligibility requirements. In addition, COFA citizens are not subject to the five-year

waiting period. However, COFA citizens who have a change in their status and become Lawful Permanent Residents (LPRs) are subject to the five-year waiting period.

4.3.3.1.4 Victims of Trafficking

The U.S. Department of Health and Human Services Office on Trafficking in Persons (HHS OTIP) provides adult victims of trafficking with Certification Letters which allow those whose immigration status would otherwise prevent them from being eligible to receive BadgerCare Plus to be eligible to receive benefits. The certification process typically takes only a few days after HHS is notified by DHS that a person has made a bona fide application for a T visa or has been granted a T visa or Continued Presence.

- Applicants with a victim Certification Letter from the HHS OTIP qualify for benefits as a Victim of Trafficking regardless of their immigration status.
- Applicants who are victims of trafficking with class of admission (COA) codes ST6 or T1 and are:
 - Under 18 at the time of application do NOT require a Certification Letter.
 - 18 or older must either have a victim Certification Letter or meet one of the additional qualifying criteria for certain qualifying immigrants (see SECTION 4.3.3.1.5 ADDITIONAL CRITERIA FOR CERTAIN QUALIFYING IMMIGRANTS)

4.3.3.1.5 Additional Criteria for Certain non-citizens Qualifying Immigrants

<u>Certain qualifying immigrants must meet one additional criterion to be eligible for full-benefit Medicaid and BadgerCare Plus. These groups include:</u>

- Lawful permanent residents (LPR)
- People whose deportation is withheld under INA Section 243(h) and such status was granted prior to April 1, 1997, or an immigrant whose removal is withheld under INA Section 241(b)(3) on or after April 1, 1997.
- People who are paroled into the U.S. under INA Section 212(d)(5) for at least one year.
- People considered to be battered immigrants who suffered domestic abuse.

The groups listed above must meet one of the following additional criteria:

- 1. Have been in a qualifying immigration status for five years. These immigrants who arrived in the U.S. on or after August 22, 1996, are subject to a five-year ban on receivingwaiting period to receive federal benefits (including BadgerCare Plus and Medicaid), other than emergency services. For these immigrants, the five-year banwaiting period is calculated beginning on the day on which when they gain qualified immigrant first receive their qualifying immigration status. However, certain
- 2. Are less than 19 years old.
- 3. Are less than 21 years old and reside in an Institution for Mental Diseases.
- 4. Are pregnant.

- <u>Pregnant applicants are eligible for full-benefit Medicaid and BadgerCare Plus. Pregnant people will have the 5-year waiting period lifted when their pregnancy is reported to the agency. The waiting period will be lifted until 60 days after the last day of pregnancy and through the end of the month in which the 60th day occurs.</u>
- 5. <u>Arrived in the U.S. before August 22, 1996, and have been continuously present.</u>
 <u>Applicants</u> who alleged an arrival date in the U.S. before August 22, 1996, and obtained legal qualified immigrant status after August 22, 1996, are not subject to the five-year ban and may be eligible to receive federal BadgerCare Plus enrollment. The immigrants described below, who apply for BadgerCare Plus and meet all eligibility requirements, are entitled to receive BadgerCare Plus benefits:
 - A non-citizen who arrived in the U.S. before August 22, 1996, in a legal, but non-qualified, immigration status and changed their status to a qualified immigrant on or after August 22, 1996. This individual would not be subject to the five-year ban if they remained continuously present from their date or arrival in the U.S. until the date they gained qualified immigration status.
 - A non-citizen who arrived in the U.S. before August 22, 1996, in undocumented status or who overstayed their original visa is treated the same as someone who arrived and remained in the U.S. with valid immigration documents. Therefore, if this individual remained continuously present from their date of arrival in the U.S. until the date they gained qualified immigration status, they would not be subject to the five-year ban.
 - For those non-citizens who arrived in the U.S. with or without documentation on or after August 22, 1996, or for those whose continuous presence cannot be verified, the five-year ban applies from the date the individual obtained qualified immigrant status.

An individual meets the "continuous presence" test if they:

- Did not have a single absence from the U.S. of more than 30 days, or
- Did not have a cumulative number of absences totaling more than 90 days.

To establish continuous presence, require a signed statement from the applicant stating they were continuously present for the period of time in question. The signed statement will be sufficient unless a worker believes the information is fraudulent or further information received now indicates that it is questionable.

Below is one example of a signed statement:

I, first and last name, hereby declare that I have continuously resided in the United States between the day I arrived in the United States, date here, and the date I received qualified alien status, date here. I have not left the United States in that time for any single period of time longer than 30 days or for multiple periods totaling more than 90 days.

Applicant or Authorized Representative Signature, Date

4.3.7 Undocumented Non-Citizens

In cases in which it is known that the applicant originally arrived in the U.S. in undocumented status, do not attempt to verify their status with the USCIS. Undocumented immigrants do not have any official documentation regarding their date of arrival. Therefore, if a worker needs to establish a date of arrival for a qualified immigrant who originally arrived as an undocumented immigrant prior to August 22, 1996, alternative methods need to be used. In such cases, the applicant must provide at least one piece of documentation that shows their presence in the U.S. prior to August 22, 1996. This may include pay stubs, a letter from an employer, lease or rent receipts, or a utility bill in the applicant's name.

Example 1 <u>:</u>	The legal status conferred on a non-citizen by immigration law—Toshi entered the U.S. February 2, 2004, with qualified immigrant status. She is applying for BadgerCare Plus in February 2008. The IM worker should first determine if she is in one of the immigrant categories exempt from the five-year ban. If Toshi is not exempt, then she must wait five years before qualifying for BadgerCare Plus. She can be enrolled in BadgerCare Plus after February 2, 2009.
Example 2	Shariff arrived as a student in June 2002. On June 5, 2006, he was granted asylum. The five year ban does not apply because asylees are exempt from the ban. Secondary verification is not necessary. Shariff is eligible to be enrolled in BadgerCare Plus if he meets other financial and non-financial criteria.
Example 3	Katrin entered the U.S. March 3, 1995, and gained qualified immigrant status June 20, 1995. She is applying for BadgerCare Plus in February 2008. She is a qualified immigrant who entered the U.S. prior to August 22, 1996. There is no need to apply the five-year ban. She is eligible for BadgerCare Plus if she meets other financial and non-financial criteria.
Example 4	Juan entered the U.S. as an undocumented immigrant on April 1, 1996. He applied for BadgerCare Plus on February 1, 2008. His immigration status changed to lawful permanent resident on March 3, 2005. He has signed a self-declaration stating he remained continuously present in the U.S. between April 1, 1996, and March 3, 2005. Additionally, Juan provided a copy of a lease showing a date prior to August 1996. He is eligible for BadgerCare Plus if he meets other financial and non-financial criteria.
Example 5	Elena entered the U.S. on July 15, 1999, on a temporary work visa and obtained qualified immigration status on October 31, 2004. She applied for BadgerCare Plus February 1, 2008, and has been in the U.S. for over five years. Elena is

not in one of the immigrant categories exempt from the fiveyear ban. Therefore, the five-year ban would have to be applied since Elena's original entry date is after August 22, 1996. The five-year clock starts from the date she obtained qualified immigration status, so she would be able to apply for BadgerCare Plus after October 31, 2009.

Example 6

Tomas entered the U.S. on April 8, 1996, on a visitor's visa. He obtained qualified alien status on September 22, 2003. Tomas applied for Medicaid on May 5, 2008. The IM worker completed primary verification and USCIS responded with the date of entry as September 22, 2003, since that was the last updated date on his status. The IM worker needs to confirm with the applicant that this is the original date he arrived in the U.S. Tomas explained that he arrived in 1996; therefore, the IM worker needs to conduct secondary verification. USCIS responds and confirms that the original date of arrival was April 8, 1996. Additionally, the IM worker needs to confirm that the applicant was continuously present between April 8, 1996, and September 22, 2003. Tomas signs a self-declaration confirming this and is found eligible. If the IM worker had used September 22, 2003, as the date of entry in CARES, Tomas would have been incorrectly subject to the five-year ban and not eligible until September 22, 2008.

4.3.10 Military Service

- <u>Applicants with an immigration status that requires them to be in that immigration status for five years A non-citizen who:</u>
 - Arrived in the U.S. before being eligible for health care benefits are exemptAugust 22, 1996, in a legal, but non-qualified, immigration status, and
 - Had a change in their status to a qualified immigrant on or after August 22, 1996, and
 - Remained continuously present from their date of arrival in the U.S. until the date they gained qualified immigration status.
- A non-citizen who:
 - Arrived in the U.S. before August 22, 1996, in undocumented status, or
 - Overstaved their original visa, and
 - Remained continuously present from their date of arrival in the U.S. until the date they gained qualified immigration status.
- For those non-citizens who arrived in the U.S. before August 22, 1996, but whose continuous presence cannot be verified, the five-year waiting period applies from the date the individual obtained a qualified immigrant status.

An individual meets the "continuous presence" test if they:

- <u>Did not have a single absence</u> from this five-year barthe U.S. for more than 30 days, or
- Did not have a cumulative number of absences totaling more than 90 days.

To establish continuous presence, require a signed statement from the applicant stating they were continuously present for the period in question. The signed statement will be sufficient unless a worker believes the information is fraudulent or information received is questionable.

	T
Signed Statement Example:	I, first and last name, hereby declare that I have continuously resided in the United States between the day I arrived in the United States, date here, and the date I received qualified immigrant status, date here. I have not left the United States in that time for any single period longer than 30 days or for multiple periods totaling more than 90 days.
	Applicant or Authorized Representative Signature and Date

- 6. Have a military service/connection.
 - <u>Applicants may be eligible for BadgerCare Plus</u> if they meet any of the following criteria related to military service:
 - Honorably discharged veterans of the U.S. Armed Forces. This is defined as persons who were honorably discharged after any of the following:
 - Serving for at least 24 months in the U.S. Armed Forces-
 - Serving for the period for which the person was called to active duty in the U.S. Armed Forces.
 - Serving less than 24 months but was discharged or released from active duty for a disability incurred or aggravated in the line of duty.
 - Serving less than 24 months but was discharged for family hardship.
 - Serving in the Philippine Commonwealth Army or as a Philippine Scout during World War II.
 - On active duty (other than active duty for training) in the U.S. Armed Forces.
 - The spouse, unmarried and non-emancipated child under age 18, or surviving spouse of either an honorably discharged veteran or a person on active duty in the U.S. Armed Forces. A surviving spouse is defined as meeting all of the following criteria:
 - A spouse who was married to the deceased veteran for at least one year.
 - A spouse who was married to the deceased veteran either:
 - Before the end of a 15-year time span following the end of the period of military service, or

- For any period-of time to the deceased veteran and a child was born of the marriage or was born before the marriage.
- A spouse who has not remarried since the marriage to the deceased veteran.
- 7. Are an Amerasian immigrant.
 - Amerasian immigrants, defined under §584 of the Foreign Operations,
 Export Financing and Related Programs Appropriations Act of 1988, may be eligible for BadgerCare Plus.
- 8. Also be considered a Cuban-Haitian Entrant.
- 9. Lawful permanent residents (LPRs) who were previously a refugee, asylee, or had their deportation withheld under INA Section 243(h).
 - Immigrants admitted under these statuses continue to be treated as refugees, asylees or immigrants who had their deportation withheld for benefits eligibility.
 - o See SECTION 4.3.3.1.4 VICTIMS OF TRAFFICKING for additional details.

4.3.3.2 Lawfully Present Immigrant Children, Young Adults, and Pregnant People

Children younger than 19 years old, young adults younger than 21 years old who are residing in an Institute for Mental Diseases (IMD), and pregnant people may qualify for BadgerCare Plus if they are lawfully present in the U.S. under many of the immigrant and nonimmigrant statuses. For those who are not in a qualifying Immigrant category, but are lawfully present, use the Registration Status Code of 20 (see Process Help, Section 82.6 SAVE Responses mapping to CARES immigration Status Code in CWW to apply).

4.3.3.3 Immigrants Eligible for Other Health Care Programs

Immigrants who are not a qualifying immigrant nor lawfully present (for example, someone who is undocumented) and who apply for BadgerCare Plus and meet all eligibility requirements except for citizenship and immigration status may be entitled to receive BadgerCare Plus Emergency Services only (see CHAPTER 39 EMERGENCY SERVICES).

Pregnant immigrants who are not a qualifying immigrant nor lawfully present and who apply for BadgerCare Plus and meet the eligibility requirements, except for citizenship and immigration status, are entitled to receive BadgerCare Plus Prenatal Program benefits (see CHAPTER 41 BADGERCARE PLUS PRENATAL PROGRAM), BadgerCare Plus Emergency Services (see CHAPTER 39 EMERGENCY SERVICES), or both.

4.3.3.4 Impact of Immigrant Status on Household

Immigration status is an individual eligibility requirement. An individual's immigration status does not affect the eligibility of the BadgerCare Plus Group. The citizen spouse or child of an ineligible immigrant may still be eligible even though the immigrant is not.

4.3.4 Public Charge

Public charge determinations are part of longstanding immigration policy that can impact a non-U.S. citizen's ability to gain entry to the U.S or obtain lawful permanent resident (LPR) status (get a green card). A public charge is someone who the government believes is likely to rely on cash assistance or government-funded institutionalization for long-term care to survive.

Many non-U.S. citizens are exempt from public charge determinations. These include LPRs, also known as green card holders (unless they travel outside the U.S. for six months or more), asylees, refugees, special immigrant juveniles, survivors of trafficking, and other protected groups.

For non-U.S. citizens who are subject to public charge determinations, enrolling in BadgerCare Plus does **not** make them a public charge.

The **only** category of BadgerCare Plus services considered in public charge determinations is **long-term institutionalization paid for by Medicaid**. The following institutionalization situations are not considered in public charge determinations:

- Short-term institutionalization for rehabilitative purposes
- Sporadic or intermittent periods of institutionalization, even on a recurring basis.

No services provided under the Children's Health Insurance Program (CHIP) are considered in public charge determinations.

4.3.5 Immigration and Naturalization Service Reporting

Do not refer an immigrant to INS unless information for administering the BadgerCare Plus program is needed (for example, if BadgerCare Plus needs to determine an individual's immigration status or an individual's location for repayment or fraud prosecution).

4.3.5 Immigration Customs Enforcement (ICE) Reporting

<u>BadgerCare Plus member information cannot be used for immigration enforcement purposes</u>. Do not refer an immigrant to ICE.

4.3.6 Continuous Presence

4.3.6 Undocumented Non-Citizens

In cases in which it is known that the applicant originally arrived in the U.S. in undocumented status, do not attempt to verify their status with the U.S. Citizenship and Immigration Services (USCIS). Undocumented immigrants do not have any official documentation regarding their date of arrival. Therefore, if a worker needs to establish a date of arrival for a qualified immigrant who originally arrived as an undocumented immigrant prior to August 22, 1996, alternative methods need to be used. In such cases, the applicant must provide at least one piece of documentation that shows their presence in the U.S. prior to August 22, 1996. This may include pay stubs, a letter from an employer, lease or rent receipts, or a utility bill in the applicant's name.

Example 1	Toshi entered the U.S. February 2, 2004, with the qualified immigrant status of parolee. She is still a parolee, and she is applying for BadgerCare Plus in February 2008. As a parolee, Toshi must meet one additional criterion before qualifying for BadgerCare Plus. If the only additional criterion Toshi will be able to meet is being in a qualified immigration status for five years, she may be able to enroll in BadgerCare Plus after February 2, 2009, if she meets other financial and non-financial criteria.
Example 2	Shariff arrived as a student in June 2002. On June 5, 2006, he was granted asylum. Asylees do not have to meet any additional immigration related criteria, and secondary verification is not necessary. Shariff is eligible to be enrolled in BadgerCare Plus if he meets other financial and non-financial criteria.
Example 3	Katrin entered the U.S. March 3, 1995, and gained qualified immigrant status June 20, 1995. She is applying for BadgerCare Plus in February 2008. She is a qualified immigrant. Because she entered the U.S. prior to August 22, 1996, she meets the necessary additional criteria. She is eligible for BadgerCare Plus if she meets other financial and non-financial criteria.
Example 4	Juan entered the U.S. as an undocumented immigrant on April 1, 1996. He applied for BadgerCare Plus on February 1, 2008. His immigration status changed to lawful permanent resident (LPR) on March 3, 2005. He has signed a self-declaration stating he remained continuously present in the U.S. between April 1, 1996, and March 3, 2005. Additionally, Juan provided a copy of a lease showing a date prior to August 1996. He is eligible for BadgerCare Plus if he meets other financial and non-financial criteria.

Elena entered the U.S. on July 15, 1999, on a temporary work visa and obtained qualified immigration status on October 31, 2004. She applied for BadgerCare Plus February 1, 2008, and has been in the U.S. for over five years. Elena is in one of the immigrant categories which requires the individual to meet one additional criterion. The five-year waiting period must be applied since Elena's original entry date is after August 22, 1996. The five-year clock starts from the date she obtained qualified immigration status. Elena may be able to enroll in BadgerCare Plus after October 31, 2009.

Example 6

Tomas entered the U.S. on April 8, 1996, on a visitor's visa. He obtained qualified alien status on September 22, 2003. Tomas applied for Medicaid on May 5, 2008. Primary verification was requested, and U.S. Citizenship and Immigration Services (USCIS) responded with the date of entry as September 22, 2003. since that was the last updated date on his status. The original date he arrived in the U.S must be confirmed. Tomas explained that he arrived in 1996. Therefore, a secondary verification must be completed to establish Tomas' original arrival date since it was before August 22, 1996, and Tomas' should not be subjected to the five-year wait period. USCIS responds and confirms that the original date of arrival was April 8, 1996. Additionally, confirmation that the applicant was continuously present between April 8, 1996, and September 22, 2003 must be obtained. Tomas signs a selfdeclaration confirming this and is found eligible. If the September 22, 2003 date was used as the date of entry, Tomas would have been incorrectly subject to the five-year waiting period in the additional criteria and not eligible until September 22, 2008.

4.3.7 Immigration Status Chart

See Process Help, Section 82.6 SAVE Responses mapping to CARES immigration Status Codes Chart for a list of Systematic Alien Verification for Entitlement (SAVE) Responses and the appropriate Registration Status Code in CWW to apply.

CARE S	Immigration Status	Arrived Before	Veteran*	Arrived on or	Veteran *	Children under
Regist ration Status Code		August 22, 1996	Arrived before Augu st 22, 1996	after August 22, 1996	Arrived on or after August 22, 1996	age 19 and pregnant people; Arrived on or after August 22, 1996

<u>01</u>	Lawfully admitted for permanent residence	Eligible	Eligible	Ineligibl e for 5 years	<u>Eligible</u>	Effective October 1, 2009, Eligible
<u>02</u>	Permanent resident under color of law (PRUCOL)	Ineligible	Ineligible	Ineligibl e	Ineligibl e	<u>Ineligible</u>
03	Lawfully present under Section 203(a)(7)	Eligible	Eligible	Ineligibl e for 5 years	<u>Eligible</u>	Effective October 1, 2009, Eligible
<u>04</u>	Lawfully present under Section 207(c)	Eligible	Eligible	Eligible	Eligible	Eligible
<u>05</u>	Lawfully present under Section 208	Eligible	Eligible	Eligible	Eligible	Eligible
<u>06</u>	Lawfully present under Section 212(d)(5) and paroled for at least one year	<u>Eligible</u>	<u>Eligible</u>	Ineligibl e for 5 years	<u>Eligible</u>	Effective October 1, 2009, Eligible
<u>07</u>	IRCA (No longer valid)	N/A	N/A	<u>N/A</u>	<u>N/A</u>	N/A
08	Lawfully admitted - temporary	Ineligible	Ineligible	Ineligibl e	Ineligibl e	Ineligible
09	Undocumented Immigrant	Ineligible	Ineligible	Ineligibl e	Ineligibl e	Ineligible
10	Illegal Immigrant	Ineligible	Ineligible	Ineligibl e	Ineligibl e	Ineligible
11	Cuban/Haitian Entrant	Eligible	Eligible	Eligible	Eligible	Eligible
12	Considered a Permanent Resident by USCIS	<u>Ineligible</u>	<u>Ineligible</u>	Ineligibl e	Ineligibl e	<u>Eligible</u>
<u>13</u>	Special agricultural worke	<u>Ineligible</u>	Ineligible	Ineligibl e	Ineligibl e	Eligible

	r under Section 210(A)					
14	Additional special agricultur al worker under Section 210(A)	Ineligible	Ineligible	Ineligibl e	Ineligibl e	Eligible
<u>15</u>	Withheld deportation - Section 243(h)	Eligible	Eligible	Eligible	Eligible	<u>Eligible</u>
<u>16</u>	Battered Immigrant	Eligible	<u>Eligible</u>	Ineligibl e for 5 years	<u>Eligible</u>	Effective October 1, 2009, Eligible
<u>17</u>	Amerasian	Eligible	<u>Eligible</u>	Eligible	Eligible	<u>Eligible</u>
<u>18</u>	Foreign Born Native American	<u>Eligible</u>	Eligible	<u>Eligible</u>	Eligible	<u>Eligible</u>
<u>19</u>	Victims of Trafficking**	Eligible	Eligible	Eligible	Eligible	Eligible
20	Lawfully Residing	Ineligible	Ineligible	Ineligibl e	Ineligibl e	Eligible
21	Victims of Trafficking Subject to 5 Year Waiting Period	<u>Eligible</u>	<u>Eligible</u>	Ineligibl e for 5 years	<u>Eligible</u>	<u>Eligible</u>
<u>22</u>	Citizen of Compacts of Free Assoc (COFA)	Eligible	Eligible	Eligible	Eligible	<u>Eligible</u>

^{* &}quot;Veteran" includes certain veterans and active-duty service members, their spouses, dependent children, or certain surviving spouses.

4.3.11 Victims of Trafficking

Applicants claiming to be victims of trafficking (or have a Class of Admission (COA) code indicating that they are a victim – ST6 or T1), have not resided in the United States for at least five years, and are at least 18 years of age, must have a victim certification from the federal Office of Refugee Resettlement (ORR) in the Department of Health and Human Services to be treated like a refugee and be exempt from the five-year bar.

^{**} Some victims of trafficking may need to provide certain verification to be exempt from the five-year waiting period (see SECTION 4.3.3.1.4 VICTIMS OF TRAFFICKING

Persons with a COA code indicating they are a child, spouse, or parent of a trafficking victim (Codes ST0, ST1, ST7, ST8, ST9, T2, T3, T4, T5, or T6) are exempt from the five-year bar and do not need certification from the ORR. Victims of trafficking who are under 18 at the time they apply do not require a certification from the ORR. Victims of Trafficking who are 18 or older and do not have the certification will be subject to the five-year bar.

9.9 Mandatory Verification Items

The following items must be verified for BadgerCare Plus:

- SSN (see SECTION 6.1 SSN REQUIREMENTS)
- Citizenship, but only for certain applicants who declare they are U.S. citizens (see <u>SECTION 4.2 VERIFYING U.S. CITIZENSHIP</u>)
- Identify, but only for certain applicants whose U.S.citizenship is not verified by the SSA and are unable to provide stand-alone documentation of citizenship (see SECTION 4.2.4.3 EVIDENCE OF IDENTIFY)
- Immigrant status (see <u>SECTION 4.3.2 VERIFICATION</u>)
- Medical expenses used to meet a deductible (see <u>SECTION 17.4 MEETING</u> THE DEDUCTIBLE)
- Documentation for Power of Attorney and Guardianship (see <u>SECTION 9.9.5</u> POWER OF ATTORNEY, GUARDIANSHIP, OR CONSERVATOR)
- Migrant worker's eligibility in another state (see <u>SECTION 12.4.2 SIMPLIFIED</u> APPLICATION PROCEDURE FOR MIGRANT WORKERS)
- Income (see CHAPTER 16 INCOME)
- Health insurance access (see <u>SECTION 7.2 PAST ACCESS TO HEALTH INSURANCE</u> and <u>SECTION 7.3 CURRENT ACCESS TO HEALTH INSURANCE</u>)
- Health insurance coverage (see <u>CHAPTER 7 HEALTH INSURANCE ACCESS</u> <u>AND COVERAGE REQUIREMENTS</u>)
- Family re-unification plan for child welfare parents (see <u>CHAPTER 10 CHILD</u> WELFARE PARENTS)
- The placement status of a Former Foster Care Youth on their 18th birthday (see SECTION 11.2 FORMER FOSTER CARE YOUTH)
- Tribal membership or Native American descent (see <u>SECTION 9.9.8 TRIBAL MEMBERSHIP</u>, <u>DESCENT</u>, <u>OR ELIGIBLE TO RECEIVE INDIAN HEALTH SERVICES</u>)
- Pre-tax deductions (see <u>SECTION 16.3.2 PRE-TAX DEDUCTIONS</u>)
- MAGI tax deductions (see <u>SECTION 16.3.3 TAX DEDUCTIONS</u>)
- Huber Law participation, for incarcerated individuals qualifying for the Huber Law exemption (see SECTION 45.8.3 HUBER LAW)

Unless determined questionable, self-declaration is acceptable for all other items.

9.9.8 Tribal Membership, Descent, or Eligible to Receive Indian Health Services

The following people are exempt from paying BadgerCare Plus premiums and benefit copayments:

- Members of American Indian and Alaska Native tribes
- Children of members of American Indian and Alaska Native tribes

- Grandchildren of members of American Indian and Alaska Native tribes
- People eligible to receive IHS

To receive these exemptions, verification of tribal Verification of Tribal membership, descent from a tribal Tribal member, or eligibility to receive IHS Indian Health Service (IHS) services is required. Verification may be done with a in order to receive an exemption from paying BadgerCare Plus premiums and copayments (see Section 38.2.2 Copay Exempt Populations). Acceptable verification sources include:

- Tribal Enrollment Card
- Written verification or a document issued by the tribe indicating tribal affiliation
- Certificate of degree of Indian blood <u>issue issued</u> by <u>the Bureau of Indian Affairs</u>
- Tribal census document
- Medical record card (or similar documentation-) issued by an Indian health care provider that specifies an individual is an Indian that is issued by an Indian health care provider
- Statement of Tribal Affiliation (F-00685)

If verification is not provided, do not indicate in CARES that the person is a tribal Tribal member. Do not deny or terminate eligibility for failure to provide the requested verification.

16.1 Income

16.1.2 Income Under Modified Adjusted Gross Income Rules

All taxable income is counted when determining BadgerCare Plus eligibility. Social Security income is also counted. See <u>SECTION 16.2 INCOME TYPES NOT COUNTED</u> for the list of income that is not counted. These rules apply to families that are filing taxes and those who are not.

Within a MAGI group, income will be counted as detailed in Chapter 2 BadgerCare Plus Group. For any member whose income is budgeted for their assistance group, income under the countable income types listed in Section 16.4 Earned Income and SECTION 16.5 OTHER INCOME will be counted and deductions under the types listed in Section 16.3 Income Deductions will be allowed. See Chapter 2 BadgerCare Plus Group for determining the assistance group size.

All MAGI group members' income is counted with one exception: If a group member is the child or tax dependent of another group member, their income is only counted if they are "expected to be required" to file a tax return for the current year (see Section 2.8 MAGI Income Counting Rules).

If a member's income is budgeted for their assistance group, their deductions will be counted for that group. In situations where an individual is planning to file a joint tax return with their spouse, the individual's deductions may offset the spouse's income even if the individual has no income.

Note The availability of income does not affect whether or not the income is counted under MAGI rules

When it is known that a member of the group is eligible for income or an increased amount of income:

- 1. If the amount is known, count the income as if the person is receiving it.
- 2. If the amount is unknown, ignore the income.

Example Marianne is entitled to unemployment compensation benefits of \$430. However, she declined a \$100 increase offered by unemployment compensation, and the amount of her check remains at \$430. Since the full entitlement amount is known, the available amount is \$530.

16.2 Income Types Not Counted

42. Money from Another Person

Money a person receives that is not repayment for goods or services the person provided and is not given because of a legal obligation on the giver's part. Money from another person is not a loan.

Do not count money from another person as income (see <u>SECTION 16.2 INCOME TYPES NOT COUNTED</u>, #43 INHERITANCES, BEQUESTS, AND DEVISES) for policies regarding money received from another person through an inheritance, bequest, or devise).

Example 6		Mimi receives \$500 each month from her parents. She is not expected to pay back this money. The \$500 is not counted as income for BadgerCare Plus eligibility.
Note	If money received from another person is in exchange for goods or services (such as an informal arrangement in which someone rents a room in their house) and if the payment is regular and predictable, it should be counted. See Section 16.4.3.1 Income Sources for information on counting rental income.	
Example	e 7	Jeremy pays Micah \$300 each month to live in a room in Micah's house. Micah and Jeremy do not have a formal lease agreement, but the payment is regular and predictable. Count the \$300 per month as income for BadgerCare Plus eligibility.

16.5 Other Income

29.Restricted Stock Contributions

Count restricted stock contributions as income only after the stock has been substantially vested.

18.1 Extensions

18.1.3 Children

If the child is in their 12-month continuous coverage period, the child will stay in their current BadgerCare Plus assistance group while their parent(s) enter the extension. The child's BadgerCare Plus and the parent's extension renewal dates will alignmay or may not align. If the child remains eligible for their existing coverage, they will get a new 12month continuous coverage period, and their renewal date will align with the parent's extension renewal date. If the change would move the child to a CHIP category of BadgerCare Plus with a premium, then the child will remain in their current BadgerCare Plus category for the rest of the existing continuous coverage period.

Example Jordan and her 10-year-old son Phoenix are enrolled in BadgerCare Plus with income at 95% of the FPL from January 1, 2025, through December 31, 2025. On July 7, 2025, Jordan reports an increase in earned income which places the household at 125% of the FPL. Jordan moves into an extension from August 1, 2025, to July 31, 2026. Phoenix remains eligible for MAGC in BadgerCare Plus and gets a new 12-month certification period from August 1, 2025, to July 31, 2026.

Example

Portia and her 8-year-old daughter Jewel are enrolled in BadgerCare Plus with income at 90% of the FPL from January 1, 2025, through December 31, 2025. On May 9, 2025, Portia reports an increase in earned income which places the household at 175% of the FPL. Portia moves into an extension from June 1, 2025, to May 31, 2026. Jewel cannot move from non-CHIP to CHIP BadgerCare Plus during her continuous coverage period, so Jewel remains enrolled in MAGC BadgerCare Plus in the non-CHIP category for the remainder of her current certification period, through December 31, 2025. At renewal, if the income remained the same and Jewel is determined eligible for BadgerCare Plus at 175% of the FPL, she will get a new 12-month continuous coverage period. If Jewel is determined ineligible for any other category of health care, she will move into the remainder of the extension with Portia through May 31, 2026.

Under most circumstances, the end of an extension will apply to all of the members of the BadgerCare Plus Test group. However, when the household income decreases to 100% FPL or less, the extension will end for the parent(s), but any children would remain in the extension. All dependent children, stepchildren, and NLRR children whose parent or caretaker may become eligible for an extension will be eligible for the same extension provided that in the month prior to the start of the extension the child is both eligible for BadgerCare Plus and:

- Has AG income under 306% FPL and is under age one.
- Has AG income under 191% FPL and is age one through age five.
- Has AG income under 156% FPL and is age six through age 18.

Conditions:

1. Children do not have to be eligible for BadgerCare Plus for three of the past six months.

- 2. The child's AG income does not have to be below 100% FPL at the time the extension starts.
- 3. CENs are not eligible for extensions.
- 4. A child who is currently in an extension is not eligible for a new extension.
- 5. If a parent's income decreases below 100% FPL, the child's extension continues.
- 6. Once a child is in an extension, the child does not lose the extension for any reason except for death, moving out of Wisconsin, or turning 19 while in an earned income extension.
- 7. The child is not in a 12-month continuous coverage period.
- 8. The child is not eligible for other full-benefit coverage.

Note If a child is in an unexpired extension and a parent qualifies for a new extension, the child's extension will continue to stay in the original extension eligibility category until it expires. The child is not eligible for the new extension.

25.4 Valid Application

A valid application for BadgerCare Plus must include the applicant's:

- Name
- Address
- Signature in the Rights and Responsibilities section of one of the following forms:
 - Wisconsin Medicaid for the Elderly, Blind, or Disabled Application Packet (<u>F-10101</u>)
 - Wisconsin Medicaid, BadgerCare Plus and Family Planning Services Registration Application (F-10129)
 - BadgerCare Plus Application Packet (F-10182)
 - BadgerCare Plus Supplement to FoodShare Wisconsin Application (<u>F-10138</u>)
 - Application for Health Coverage & Health Paying Costs
 - Application for Health Coverage & Help Paying Costs from the FFM
 - Telephonic signature in CWW
 - Electronic signature in ACCESS
 - Electronic signature in an account transfer from the FFM

26.1 Renewals

26.1.1 Renewals Introduction

A renewal is the process during which all eligibility factors subject to change are reexamined and it is determined if eligibility continues. is redetermined. The group's continued eligibility depends on its the timely completion of a renewal and verification receipt of required information verification. Each renewal results in a determination to continue or discontinue eligibility.

The first required eligibility renewal for a BadgerCare Plus case is 12 months from the certification month, except for the following:

- **CEN**s. The renewal date is 12 months from the date of birth.
- Pregnant womenpeople. The renewal date is two calendar months after the
 date the pregnancy ends. Women Pregnant people in the BadgerCare Plus
 Prenatal Program lose eligibility on the date the pregnancy ends. However, they
 are automatically eligible for emergency services for two months after eligibility
 for BadgerCare Plus Prenatal Program ends (see SECTION 41.6
 ELIGIBILITY END DATE).
- **Deductibles**. A renewal is not scheduled for a case that did not meet its deductible, unless someone in the case was open for BadgerCare Plus. For cases that did meet the deductible, the renewal date is six months from the start of the deductible period.

For manually certified BadgerCare Plus cases, make sure the member receives a timely notice of when the renewal is due.

Note For manually certified BadgerCare Plus cases, make sure the member receives a timely notice of when the renewal is due.

Review Dates for Time-Limited Benefits

BadgerCare Plus members are required to complete a renewal no earlier and no later than 12 months from their certification period. People whose benefits are time-limited (CENs, pregnant womenpeople, people who have met a deductible, or people in an extension) are required to complete a renewal at the end of their time-limited benefit unless they are on a case with other open BadgerCare Plus assistance groups. In this situation:

- If the regular BadgerCare Plus assistance group has a renewal date after the end of the time-limited benefit certification period, the person enrolled in time-limited benefits will have their eligibility redetermined at the end of their certification period, but a full renewal is not required at that time.
- If the regular BadgerCare Plus assistance group has a renewal date prior to the end of the time-limited benefit certification period, the time-limited benefit will remain open even if there is no renewal completed for the regular BadgerCare Plus assistance group. If a renewal is completed for the BadgerCare Plus

assistance group, the length of the time-limited benefit certification period does not change. Workers An early renewal can complete anonly be completed if the member requests an early renewal. Once the member requests an early renewal, the renewal must be completed.

Note Shortening certification periods in an attempt to balance agency workload is not permissible.

If an early renewal is completed for a child within their continuous coverage period, and that child would be adversely impacted by the early renewal (for example, they would be ineligible, or would have a new or higher premium), then the child will remain in their current continuous coverage period. However, other household members can be renewed and may qualify for new 12-month certification periods.

26.1.1.1 Redeterminations for Changes in Circumstance

Health care eligibility must be promptly redetermined between regular renewals whenever information is received about a change in a member's circumstances that may affect their eligibility. Requests for information or verification must be limited to information related to the change. If enough information is available to determine eligibility following the change, new certification periods may begin.

When an individual opens for a new health care certification period on a case, new 12-month certification periods will be established for other eligible health care members in the household, with some exceptions.

New certification periods will be established for existing eligible members when an individual opens following a change in circumstances, person-add, new program request, or renewal. For example, new certification periods can be established when a person joins the household and opens for health care, changes health care categories, or a previously ineligible person becomes eligible due to a change (for example, a reduction in income puts them under the program limit).

New certification periods will not be established for an existing member when:

- A newly added person is found ineligible.
- A new assistance group is pending.
- The member is open for time-limited benefits.
- The member is a child who is in their 12-month continuous coverage period and the change would result in a negative action or would move the child from Medicaid to CHIP.
- The existing member is ineligible based on the change in circumstances.

Example 1 Margaret and Phillip are enrolled in BadgerCare Plus as ch			
	adults with a certification period of January 1, 2025, through		
	December 31, 2025. On July 2, 2025, 11-year-old William joins the		
	household and requests health care. William does not have		
	continuous coverage from another case. William is enrolled in		

	BadgerCare Plus with continuous coverage from July 1, 2025, through July 31, 2026. Margaret and Phillip are now eligible for BadgerCare Plus as parents and will also start a new certification period from August 1, 2025, through July 31, 2026.
Example 2	Diego, Sofia, and their 4-year-old daughter Gabriella are enrolled in BadgerCare Plus from February 1, 2025, through January 31, 2026. On August 8, 2025, Diego's 12-year-old daughter Isabella joins the household and requests health care. Isabella has had BadgerCare Plus on another case since January. Her BadgerCare Plus is closed on the other case, and she is determined eligible on Diego's case. Isabella is enrolled in BadgerCare Plus with a new continuous coverage period from September 1, 2025, through August 31, 2026. Diego, Sofia, and Gabriella remain eligible for BadgerCare Plus and start a new certification period from September 1, 2025, through August 31, 2026.
Example 3	Bill and Carrie are enrolled in BadgerCare Plus as parents. Their 12-year-old daughter Kiley is disabled and enrolled in SSI-Related Medicaid. Their certification period is January 1, 2025, through December 31, 2025. Kiley is determined to no longer be disabled on June 5, 2025. There was no other change. Kiley transitions from SSI-Related Medicaid to BadgerCare Plus with a new certification period of July 1, 2025, through June 30, 2026. A new 12-month certification period is established for Bill and Carrie from July 1, 2025, through June 30, 2026.
Example 4	Dimitri is enrolled in BadgerCare Plus as a childless adult from July 1, 2024, through June 30, 2025. In October, Dimitri gets married and requests health care for his wife, Polina. Polina is not a US citizen or qualifying immigrant and is found ineligible. Dimitri's BadgerCare Plus certification period does not change.

Time-Limited Benefits

New certification periods will not be established for members enrolled in time-limited health care benefits, including:

- Pregnant and postpartum people enrolled in BadgerCare Plus,
- Continuously Eligible Newborns,
- People in a four or twelve-month BadgerCare Plus Extension, and
- People who need to meet or have met a deductible to enroll in BadgerCare Plus or Medicaid.

Matthew and his child Lee are enrolled in BadgerCare Plus from
January 1, 2025, through December 31, 2025. Lilly, Lee's mother,
is enrolled in BadgerCare Plus as a pregnant individual with a
renewal date of September 30, 2025. In May, their other child Silas
joins the household. Lilly remains pregnant. Silas's information is

verified and there is no other change. Silas is enrolled in BadgerCare Plus from May 1, 2025, through May 31, 2026. A new 12-month certification period is established for Matthew and Lee from June 1, 2025, through May 31, 2026. Lilly's certification period does not change.

However, a new time-limited health care benefit will result in other members getting a new 12-month certification period.

Example 6

Deepak, Fatima, and their son Ravi are enrolled in BadgerCare Plus from July 1, 2025, through June 30, 2026. In August 2025, Fatima's pregnancy is reported, and she moves from BadgerCare Plus as a parent to BadgerCare Plus as a pregnant person through May 31, 2026. There are no other changes, and Deepak and Ravi remain eligible. A new 12-month certification period is established for Deepak and Ravi from September 1, 2025, through August 31, 2026.

Children in Continuous Coverage Periods

If a child would be negatively impacted or move to a CHIP category of health care because of a change, person-add, or new program request during their 12-month continuous coverage period, the child will not get a new 12-month certification period. They will remain in their current period. However, other eligible household members can get new 12-month certification periods. Households may also have different health care renewal dates. See SECTION 1.2.10 CERTIFICATION PERIOD CHANGES FOR CHILDREN IN CONTINUOUS COVERAGE PERIODS for examples.

Other Health Care Programs

If an individual opens for a new certification period for Wisconsin Well Woman Medicaid, Katie Beckett Medicaid, the SeniorCare Prescription Drug Program, or benefits outside of the CARES eligibility system, new 12-month certification periods will not be established for existing members on the case.

26.1.2 Late Renewals

Most health care renewals received within three months of the renewal month can be processed as a late renewal instead of requiring a new application. This policy applies to the following health care programs:

- BadgerCare Plus
- FPOS
- EBD Medicaid
- HCBW
- Institutional Medicaid
- MAPP
- Medicare Savings Programs (QMB, SLMB, SLMB+, QDWI)
- Wisconsin Well Women Medicaid

Katie Beckett Medicaid

This policy applies to members receiving health care benefits based on a met deductible but not to members with an unmet deductible.

Late renewals are only permitted for people whose eligibility has ended because of lack of renewal, and not for other reasons. Late renewals and renewal-related verifications must be accepted for up to three calendar months after the renewal month. Members whose health care benefits are closed for more than three months because of lack of renewal must reapply.

Agencies must consider late submission of an online or paper renewal form or a late renewal request by phone or in person to be a valid request for health care. The new health care certification date should be set based on the receipt date of the signed renewal. If verification is required during the completion of a late renewal, the member has 20 days to provide it.

Example 1

Jenny's renewal is due on January 31. She submits an online renewal via ACCESS on March 10. If the renewal is processed on the same day and verification is requested, the verification would be due on March 30. If she provides verification on or before this due date and meets all other eligibility criteria for BadgerCare Plus, her eligibility and certification period would start on March 1. Her next renewal would be due February 28 of the following year.

Note

The late renewal three-month period starts after the month the renewal was due. It does not restart when a late renewal has been submitted. If Jenny submits her renewal on March 15 but does not provide verification until May 20, she will need to reapply since she submitted her verification after the three-month period that started with her January renewal date and ended April 30.

26.1.3 Administrative Renewals

26.1.3.1 Administrative Renewals Introduction

Based on federal requirements, health care eligibility must be redetermined once every 12 months based on information available to an agency. Agencies cannot require information from health care members during an annual renewal unless the information cannot be obtained through an electronic data exchange or the information from the electronic data exchange is not reasonably compatible with the information on file. The process of using electronic data exchanges for renewals is referred to as the administrative renewal process.

If information from electronic data exchanges validated information about a member's income as currently recorded in CARES, additional information about income cannot be requested from the member at renewal. This includes member-reported information about earned income that is found to be reasonably compatible with earned income information obtained from the State Wage Information Collection Agency (SWICA) and Federal Data Services Hub (FDSH) data exchanges, as well as any information about unearned income verified through the Social Security Administration (SSA) or

Unemployment Insurance Benefits (UIB) data exchanges. Unless reported otherwise, it is assumed during the administrative renewal process that household composition and tax filing status have not changed.

26.1.3.2 Administrative Renewal Selection Criteria

To be considered for an administrative renewal, a member must be due for renewal in the following month and have eligibility in one or more qualifying BadgerCare Plus, Family Planning Only Services (FPOS), or Elderly, Blind, or Disabled (EBD) Medicaid assistance groups (AGs) open, including members open with a suspended status.

Some members in a household may have their eligibility administratively renewed while other members in the household must complete a regular renewal to continue their eligibility.

A member's health care eligibility can be administratively renewed if all of the information necessary to determine the member's eligibility is on file and can be verified through a data exchange (for example, income with a SWICA match or Equifax match through FDSH, Social Security income, and/or Unemployment income).

Some members in a household may have their <u>A member's health care eligibility cannot be administratively renewed while if they meet any of the following criteria:</u>

- Have income on file that cannot be verified through a data exchange, such as self-employment income, alimony/spousal support, interest and dividend income, and other memberstypes of countable income for BadgerCare Plus.
- Are age 14 or older and have a missing or unverified SSN.
- Are enrolled in BadgerCare Plus as a Former Foster Care Youth and are turning 26 years old.
- Are enrolled in the household must complete BadgerCare Plus and turning 19 years old or 65 years old.
- Are pregnant and the due date is on or before the renewal month.
- Are enrolled in BadgerCare Plus after having met a deductible.
- Are enrolled in a BadgerCare Plus extension.
- Have a calendar year tax dependent in their tax filing group.
- Are already in the process of completing a regular renewal to continue their eligibility.

26.1.3.3 Administrative Renewal Process

The administrative renewal process begins in the 11th month of a member's certification period. CARES determines who qualifies for an administrative renewal, verifies and updates information based on data exchanges, tests employment income and SWICA and FDSH results for reasonable compatibility, and runs through batch eligibility (see Process Help, Section 4.7 Administrative Renewals).

26.1.3.3.1 Successful Administrative Renewals

Members who have a successful administrative renewal will have health care or FPOS eligibility redetermined and will be recertified for a new 12-month certification period and will receive a noticeNotice of decisionDecision.

If all members in the household can be administratively renewed, they will be sent a letter notifying them that their eligibility has been renewed, along with a case summary. The member(s) must review the information on the case summary and report if any of the information is incorrect within 30 days of the mailing date. The member(s) can make the changes on the summary and mail or fax it to their agency, or they can report their changes through ACCESS or by phone. If all of the information on the case summary is correct, the member(s) will not need to take any other action.

If any members of the household cannot be administratively renewed, the household will be sent <u>aan eligibility</u> renewal letter and a <u>pre-printed renewal form.Pre-Printed Renewal Form (PPRF)</u>. If the household does not complete this renewal process, then only the members who were administratively renewed will continue to be eligible in the next 12-month certification period.

26.1.3.3.2 Unsuccessful Administrative Renewals

Benefits may not be terminated or reduced (for example, being charged a greater premium amount) during the administrative renewal process based solely on information obtained from a data exchange. This includes information obtained from SSA, UIB, FDSH, or SWICA data exchanges. If benefits cannot be continued through the administrative renewal process, the member will be excluded from the administrative renewal process, and they will be sent a 45-day an eligibility renewal letter and a Pre-Printed Renewal Form (PPRF). The member will have at least 30 days to complete, sign, and return the PPRF or to complete their renewal by phone, inperson, or through ACCESS.

26.1.3.3.3 Change Reporting After Administrative Renewal

Members who have a successful administrative renewal remain subject to change reporting requirements. The administrative renewal letter instructs a member to review and report any changes to the information provided in the -attached case summary. In addition, members who are administratively renewed will receive a Notice of Decision that identifies program-specific change reporting requirements. Changes reported for a member who has undergone an administrative renewal should be processed under existing policy.

Changes reported as part of a renewal for another program should also be applied to health care.

26.2 Choice of Renewal

The member has the choice of the following methods for any BadgerCare Plus renewal:

- Face-to-Face Interview
- Mail-In (paper application or pre-printed renewal packet Pre-Printed Renewal Form (PPRF)
- Telephone Interview
- ACCESS (https://access.wisconsin.gov/access/)

26.3 Renewal Processing

A BadgerCare Plus eligibility renewal notice is letter and a Pre-Printed Renewal Form (PPRF) are generated in the second week of the 11th month of the certification period. Do not schedule a renewal until after adverse action in the month prior to the month of renewal.

·	CARES sends out the <u>eligibility</u> renewal letter <u>and PPRF</u> the 2nd week of July for a review due in August. Do not schedule the renewal for a date prior to adverse action in July.
	renewal for a date prior to daverse detion in dary.

Do not require a new <u>Authorized Representative authorized representative</u> form at renewal, if the person signing the renewal is the authorized representative on file. If the renewal is not completed by the end of the certification period, the case will close. The closure notice is generated through CARES, at adverse action in the renewal month.

26.3.1 Signature at Renewal

The member must include a valid signature at the time of renewal. This includes either signing telephonically, signing electronically, or signing in writing one of the following:

- The paper application form or Pre-Printed Renewal Form (PPRF)
- The signature page of the Application Summary
- The ACCESS or FFM application form with an electronic signature

With the exception of renewals completed through the administrative renewal process, the signature requirements for renewals are the same as those for applications (see SECTION 25.5 VALID SIGNATURE).

38.4 HMO Enrollment

38.4.4 HMO Disenrollment

Members may be disenrolled from the HMO for a variety of reasons. Some disenrollments are automatic, meaning the disenrollment occurs based on changes to the member's eligibility or enrollment status. There are also voluntary disenrollments, which can be requested by the member, the member's family, or a legal guardian, and involuntary disenrollments, which are requested by the HMO.

38.4.4.1 Automatic Disenrollment

Automatic disenrollment occurs when there are changes to the member's eligibility or enrollment status that affect their HMO enrollment and typically occurs automatically once eligibility has been updated. The table below includes a list of automatic disenrollments and the date on which the disenrollment is effective.

Reason for Disenrollment	Disenrollment Date	
Loss of BadgerCare Plus eligibility	End of the month in which BadgerCare Plus eligibility ends-	
Date of Death Entered	Date of Death	
Moving outside of the HMO's service area	End of the month in which the move was reported	
Incarceration or Institutionalization	End of the month in whichprior to the month incarceration or institutionalization was reported starts and lasts more than 30 calendar days	
Enrollment in a Waiver program or Long- Term Care MCO	End of the month prior to the month when waiver program or LTC MCO enrollment occurs	
Becoming eligible for Medicare	Depending on when notification of Medicare eligibility was received and the Medicare eligibility start date, if the notification is received:	
	 Prior to the Medicare eligibility begin date, the disenrollment date is the end of the month in which notification was received. After the Medicare eligibility begin date, the disenrollment date is the 	

end of the month prior to the month of notification.
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41.1 BadgerCare Plus Prenatal Program

The BadgerCare Plus Prenatal Program provides coverage for women pregnant people who otherwise apply for BadgerCare Plus and meet the all financial and most nonfinancial and financial eligibility requirements for BadgerCare Plus and are at least one of the following, including:

- Not eligible for Pregnant people who do not meet the BadgerCare Plus because they citizenship or immigration status requirements.
- Pregnant people who are non-qualifying immigrants
- Inmates inmates of a public institution (see Section SECTION 45.8.3 Pregnant Women). 2 PREGNANT MEMBERS) and would otherwise be placed in suspended status for BadgerCare Plus.

41.2 Eligibility Requirements

41.2.1 Unique Aspects of BadgerCare Plus Prenatal Program

- 1. Providing an SSN is not an eligibility requirement for either inmates or-non-qualifying_immigrants applying for the BadgerCare Plus Prenatal Program.
- 2. Cooperation with Child Support Enforcement is not an eligibility requirement for this program.
- 3. Unlike regular BadgerCare Plus which locks in eligibility throughout the pregnancy, BadgerCare Plus Prenatal Program eligibility may be terminated with timely notice for failure to meet any of the BadgerCare Plus eligibility requirements (see SECTION 41.1 BADGERCARE PLUS PRENATAL PROGRAM).
- 4. There is no Presumptive Eligibility for the BadgerCare Plus Prenatal Program. Eligibility for the BadgerCare Plus Prenatal Program may only be determined by the IM agencies.
- There is no three-month backdating option available for Prenatal Program members.
- Unlike BadgerCare Plus for Pregnant Members, Prenatal Program members are not eligible for the 60-day pregnancy extension <u>but</u>. <u>They</u> are, <u>however</u>, eligible for Emergency Services during that time.

41.3 <u>BadgerCare Plus Prenatal Program</u> Policy for Non-Qualifying Immigrants

- 1. For non-U.S. citizens with documentation, verify the applicant's immigration status through normal SAVE procedures in order to determine eligibility for BadgerCare Plus. If SAVE verifies the pregnant woman person is a non-qualifying immigrant not eligible for BadgerCare Plus because of their immigration status only, proceed with determining eligibility for the BadgerCare Plus Prenatal Program.
- 2. For non-U.S. citizens who are undocumented, do not request SAVE verification and continue with the determination of eligibility for the BadgerCare Plus Prenatal Program.
- 3. A non-qualifying An immigrant whose immigration status changes while they are pregnant and receiving BadgerCare Plus Prenatal benefits must have their eligibility re-determined using the their new immigration status. If their new status makes them eligible for BadgerCare Plus for Pregnant Women, they are no longer eligible for the BadgerCare Plus Prenatal Program.

Note Verification of identity is not required if the applicant or member is not a U.S. citizen.

41.5 Eligibility Begin Date

BadgerCare Plus Prenatal Program eligibility begins no sooner than the first of the month in which a valid application is received.

Pregnant non-qualifying immigrants who are Immigrants not eligible for the BadgerCare Plus Prenatal Program because they do not meet a non-financial eligibility requirement in SECTION 41.2 ELIGIBILITY REQUIREMENTS should have Emergency Services eligibility determined according to policy in Chapter 39 Emergency Services.

41.6 Eligibility End Date

BadgerCare Plus Prenatal Program eligibility ends when the pregnancy ends. Benefits will continue through the end of the month following timely notice requirements.

Non-qualifying immigrants Immigrants who lose eligibility for the BadgerCare Plus Prenatal Program when their pregnancy ends, for any reason other than moving out of state, are eligible for Emergency Services after they lose BadgerCare Plus Prenatal Program eligibility (see Chapter 39.5 Non-Qualifying Immigrants No Longer Eligible for the BadgerCare Plus Prenatal Program).

When the pregnancy ends, CARES will automatically send ForwardHealth an emergency services certification through the end of the month in which the 60th day occurs for adults, or 12 months for children under age 19.

<u>BadgerCare Plus Emergency Services is a limited BadgerCare Plus benefit for people who are ineligible for BadgerCare Plus only because of their immigration status.</u>