
Table of Contents

State/Territory Name: Wisconsin

State Plan Amendment (SPA) #: WI-23-0010

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) State Plan Pages



Children and Adults Health Programs Group

May 5, 2023

Jamie Kuhn
Medicaid Director
Wisconsin Department of Health Services
1 West Wilson Street, Room 350
PO Box 309
Madison, WI 53701-0309

Dear Ms. Kuhn:

Your title XXI Children's Health Insurance Program (CHIP) State Plan Amendment (SPA) number WI-23-0010, submitted March 29, 2023, has been approved. This SPA has an effective date of May 12, 2023.

This amendment, as it relates to the COVID-19 public health emergency (PHE), extends the state's authority to implement certain cost sharing flexibilities after the end of the federally-declared PHE through the unwinding period.¹ Specifically, the state will continue to suspend premiums, termination for failure to pay premiums following the premium grace period, and premium lockout periods for all enrollees through December 31, 2023. Effective January 1, 2024, the state will resume the collection of premiums, terminations for failure to pay premiums following the premium grace period, and premium lockouts for all enrollees who have had a renewal within the last 12 months, or had an application filed on or after April 1, 2023. The state will resume the implementation of these policies on a rolling basis as renewals are conducted through the state's COVID-19 PHE unwinding period, scheduled to end May 31, 2024. Effective June 1, 2024, the state will resume the standard, approved state plan premium policies.

Your Project Officer is Mrs. Chanelle Parkar. Chanelle is available to answer your questions concerning this amendment and other CHIP-related matters. Chanelle's contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, MD 21244-1850
Telephone: (667) 290-8798
E-mail: Chanelle.Parkar@cms.hhs.gov

¹ CMS previously approved CHIP SPA WI-21-0015 to provide these flexibilities through the end of the federally-declared PHE.

If you have additional questions, please contact Meg Barry, Division Director, Division of State Coverage Programs, at (410) 786-1536. We look forward to continuing to work with you and your staff.

Sincerely,
/Signed by Sarah deLone/

Sarah deLone
Director

TEMPLATE FOR CHILD HEALTH PLAN UNDER TITLE XXI OF THE SOCIAL SECURITY ACT CHILDREN'S HEALTH INSURANCE PROGRAM

(Required under 4901 of the Balanced Budget Act of 1997 (New section 2101(b)))

State/Territory: Wisconsin

As a condition for receipt of Federal funds under Title XXI of the Social Security Act, (41 CFR, 457.40(b))

(Signature of Governor, or designee, of State/Territory, Date Signed)

submits the following Child Health Plan for the Children's Health Insurance Program and hereby agrees to administer the program in accordance with the provisions of the approved Child Health Plan, the requirements of Title XXI and XIX of the Act (as appropriate) and all applicable Federal regulations and other issuances of the Department.

The following State officials are responsible for program administration and financial oversight (42 CFR 457.40(c))

Name: Kirsten Johnson
Name: Jaime Kuhn
Name: Jori Mundy

Position/Title: Secretary, Department of Health Services
Position/Title: Wisconsin State Medicaid Director
Position/Title: Wisconsin SCHIP Director

* Disclosure: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938 0707. The time required to complete this information collection is estimated to average 80 hours per response, including the time to review instructions, search existing data resources, gather the data needed, complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, write to: CMS, 7500 Security Blvd., Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Section 1. General Description and Purpose of the Children's Health Plans and the Requirements

1.4. Provide the effective (date costs begin to be incurred) and implementation (date services begin to be provided) dates for this SPA (42 CFR 457.65) A SPA may only have one effective date, but provisions within the SPA may have different implementation dates that must be after the effective date.

Original Plan

Effective Date: **April 1, 1999**

Implementation Date:

**Amendment #1 Effective date: July 1, 1999
Implementation date: July 1, 1999**

**Amendment #2 Effective date: October 18, 2001
Implementation date: November 1, 2001**

**Amendment #3 Effective date: July 14, 2004
Implementation date: August 1, 2004**

**Amendment #4 Effective date: November 1, 2005
Implementation date: January 1, 2006**

**Amendment #5 Effective date: January 14, 2008
Implementation date: February 1, 2008**

**Amendment #6 Effective date: February 1, 2008
Implementation date: February 1, 2008**

**Amendment #7 Effective date: July 1, 2008
Implementation date: July 1, 2008**

**Amendment #8 Effective date: December 18, 2009
Implementation date: January 1, 2010**

**Amendment #9 Purpose of SPA: End of Benchmark Plan coverage and general updates.
Effective date: July 1, 2014
Implementation date: July 1, 2014**

**Amendment #10 Purpose of SPA: Initiate Health Service Initiative for a Poison Control Center.
Proposed effective date: July 1, 2015**

Proposed implementation date: July 1, 2015

Amendment #11 Purpose of SPA: Implement the Mental Health Parity and Addiction Equity Act (MHPAEA, Pub.L. 110-343)

Proposed effective date: July 1, 2017

Proposed implementation date: July 1, 2017

Amendment #12 Purpose of SPA: Implement Lead Abatement HSI

Proposed effective date: July 1, 2018

Proposed implementation date: July 1, 2018

Amendment #13 Purpose of SPA: Implement CMS Managed Care Final Rule of April 25, 2016

Effective date: July 1, 2018 for All Programs Excluding

Children Come First and Wraparound Milwaukee PIHPs

Effective date: by June 30, 2021 for Children Come First and Wraparound Milwaukee PIHPs

Amendment #14 Purpose of SPA: Implement Suspension of copayments for COVID-19 Testing and Testing-Related Services, Extension of Renewal Deadlines and Reasonable Opportunity Period, Exceptions to Timely Processing of Changes and Suspension of Premiums during the COVID-19 National Emergency.

Proposed effective date: March 1, 2020

Proposed implementation date:

- **March 1, 2020 for Suspension of Copayments for COVID-19 Testing and Testing-Related Services, Extension of Renewal Deadlines and Reasonable Opportunity Period, and Exceptions to the Timely Processing of Changes in Circumstances**
- **April 1, 2020 for Suspension of Premiums**

Amendment #15 Purpose of SPA: Implement the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act

Proposed effective and implementation date: October 24, 2019 for All Amendments Excluding for Section 6.3.1.2

Behavioral Health Screening Tools in Primary Care Settings

Proposed effective and implementation date: January 1, 2021 for Section 6.3.1.2 Behavioral Health Screening Tools in Primary Care Settings

Amendment #16 Purpose of SPA: Cost-share and Health Service Initiatives Modifications

Effective date: July 1, 2020
Implementation date: July 1, 2020

Amendment #17 Purpose of SPA: Health Service Initiatives Modification
Proposed effective date: March 1, 2022
Proposed implementation date: March 1, 2022

Amendment #18 Purpose of SPA: ARP COVID Vaccines and Testing
Proposed effective date: March 11, 2021
Proposed implementation date: March 11, 2021

Amendment #19 Purpose of SPA: Partial Extension of Disaster SPA
Suspension of Premiums
Proposed effective date: May 12, 2023
Proposed implementation date: May 12, 2023

1.4-TC Tribal Consultation (Section 2107(e)(1)(C)) Describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment, when it occurred and who was involved.

The Wisconsin Tribal Health Directors Association (WTHDA) held its bi-monthly meeting on Wednesday, March 8, 2023. Several Wisconsin Department of Health Services (DHS) staff attended. State Plan Amendment Coordinator, Bailey Dvorak, presented an overview of SPA 23-0010-CHIP. The health directors had no questions or concerns related to the SPA.

8.2. Describe the amount of cost-sharing, any sliding scale based on income, the group or groups of enrollees that may be subject to the charge by age and income (if applicable) and the service for which the charge is imposed or time period for the charge, as appropriate (Section 2103(e)(1)(A)) (42CFR 457.505(a), 457.510(b) &(c), 457.515(a)&(c)).

8.2.1. Premiums:

At State discretion, premiums will be temporarily waived for CHIP applicants and existing beneficiaries for the duration of the federal COVID-19 public health emergency, or at state discretion, a shorter period of time.

Premiums will be imposed upon children with monthly family income greater than 201% FPL. The rate is based upon family income and will not exceed 5% of monthly family income. Recipients will receive a notice telling them how much their premiums will be. Children ages 1 – 18, with:

Incomes at or above 201 percent up to, but not including 231 percent of the FPL: \$10; Incomes at or above 231 percent up to, but not including 241 percent of the FPL: \$15;
Incomes at or above 241 percent up to, but not including 251 percent of the FPL: \$23; Incomes at or above 251 percent up to, but not including 261 percent of the FPL: \$34;
Incomes at or above 261 percent up to, but not including 271 percent of the FPL: \$44; Incomes at or above 271 percent up to, but not including 281 percent of the FPL: \$55;
Incomes at or above 281 percent up to, but not including 291 percent of the FPL: \$68; Incomes at or above 291 percent up to, but not including 301 percent of the FPL: \$82;
Incomes at 301 percent up to and including 306 percent of the FPL: \$97.53.

Wisconsin will waive all premiums for all enrollees through December 31, 2023. Effective January 1, 2024, the state will resume the collection of premiums for all enrollees who have had a renewal within the last 12 months, or had an application filed on or after April 1, 2023. The state will resume the implementation of these policies on a rolling basis as renewals are conducted through the state's COVID-19 PHE unwinding period, scheduled to end May 31, 2024. Effective June 1, 2024, the state will resume the standard, approved state plan premium policies.

8.7

Provide a description of the consequences for an enrollee or applicant who does not pay a charge (42CFR 457.570 and 457.505(c)).

Premiums

Each family is sent an invoice in the tenth day of the month prior to the month in which the premium is due. When a family does not pay their premium by the date required (the 10th of the month for which it is due), the family is sent a termination notice that indicates that they must pay the premium by the end of the calendar month or lose eligibility for those members for whom the premium is owed. If they pay by the end of the month, eligibility is not interrupted. If the family pays the premium by the end of the following month, their eligibility is restored without any gaps. However, if the family does not pay by the end of the month after the calendar month in which the premium was due, the individuals for whom the premium was owed cannot be restored to benefits until:

- 1. The end of the six month after which benefits were lost, so long as they pay the premium arrears or 12 months after benefits were lost without paying the premium arrears amount;**
- 2. The beginning of the month following an adult caretaker's absence from the home for 30 consecutive days;**
- 3. The beginning of the month in which the family's income dips below the premium requirement limit of 201% of the Federal Poverty Level; or**

4. Immediately, if the reason the premium payment was not made was beyond the control of the family.

Good cause reasons for not paying the BadgerCare Plus premium are:

- **Problems with the financial institution.**
- **System problem.**
- **Local agency problem.**
- **Wage withholding problem.**
- **Fair hearing decision.**

See SPA WI-13-032, Section CS21

Exception to Disenrollment for Failure to Pay Premiums— Beginning March 1, 2020, during the federal COVID-19 public health emergency, non-payment of premiums will not result in a loss of CHIP coverage.

Wisconsin will waive all terminations for failure to pay premiums following the premium grace period, and implementation of the premium lockout period for all enrollees through December 31, 2023. Effective January 1, 2024, the state will resume terminations for failure to pay premiums following the premium grace period, and implementation of the premium lockout period for all enrollees who have had a renewal within the last 12 months, or had an application filed on or after April 1, 2023. The state will resume the implementation of these policies on a rolling basis as renewals are conducted through the state's COVID-19 PHE unwinding period, scheduled to end May 31, 2024. Effective June 1, 2024, the state will resume the standard, approved state plan premium policies.