



EBD Medicaid Overview for Non-Eligibility Workers

Part 1



Introduction

EBD Medicaid is a state/federal program that provides health coverage for Wisconsin residents who are elderly, disabled or blind.

EBD Medicaid is also known as Medical Assistance, MA and Title 19.



Subprograms of EBD MA

There are different subprograms of EBD Medicaid:

- SSI -related Medicaid
- MAPP
- Institutional Long Term Care
- Home and Community Based Waivers Long Term Care
- Family Care Long Term Care
- Partnership Long Term Care
- Program of All-Inclusive Care for the Elderly (PACE)

Subprograms of EBD MA

There are different subprograms of EBD Medicaid (*con't.*):

- Katie Beckett
- Tuberculosis (TB) -related
- Medicare Premium Assistance (MPA): QMB, SLMB, SLMB+, QDWI
- Emergency Medicaid
- SeniorCare
- Wisconsin Well Woman Medicaid (WWWMA)

Non-financial Requirements

To be eligible for EBD Medicaid an individual must first meet the following criteria:

- Be elderly , blind, or disabled
- Be a resident of the state of Wisconsin
- Be a US citizen or Qualifying Immigrant
- Cooperate with medical support liability
- Cooperate with third party liability (TPL)
- Provide SSN or apply
- Pay a premium if required
- Pay a community waiver/FamilyCare cost share if required

Elderly, Blind, Disabled

Elderly: Anyone who is 65 years of age or older.

Disabled: The inability to engage in any substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months.

Disability and Blindness determinations are made by the DDB.

Disability Applications



Disability applications for Social Security, SSI and Medicaid are completed under the same regulations.

Disability Applications

Medicaid Disability Application (MADA)

- For Medicaid eligibility only, no SSA or SSI payment included.
- Must meet MA eligibility criteria to submit.
- Can include Presumptive Disability application.

Residency

A person must be a Wisconsin resident to be eligible for Medicaid. S/he must:

- Be physically present in Wisconsin. There is no required length of time the person has to have been physically present, **and**
- Express intent to reside here.



US Citizens

All U.S. citizens and U.S. nationals are entitled to apply for and receive Medicaid if they provide documentation of their citizenship and identity and meet all other eligibility requirements.

See the [Documentation/Verification Code List](#) for acceptable documents to verify citizenship.

Immigrants

- Immigrants are persons who reside in the U.S., but are not U.S. citizens or nationals.
- Certain immigrants, who apply for Medicaid and meet all eligibility requirements, are entitled to receive Medicaid benefits.
- Immigration status will be verified by the IM Worker processing the application.

See the next slide for the chart for information on immigration status and eligibility.

7.3.4 Immigration Status Chart

CARES TCTZ Code	Alien Status	Arrived Before 08/22/96	Veteran / Amerasian Arrived before 8-22-96	Arrived on or after 8-22-96	Veteran / Amerasian Arrived on or after 8-22-96
01	Lawfully admitted for permanent residence	Eligible	Eligible	Ineligible for 5 years	Eligible
02	Permanent resident under color of law (PRUCOL)	Ineligible	Ineligible	Ineligible	Ineligible
03	Lawfully present under Section 203(a)(7)	Eligible	Eligible	Ineligible for 5 years	Eligible
04	Lawfully present under Section 207(c)	Eligible	Eligible	Eligible	Eligible
05	Lawfully present under Section 208	Eligible	Eligible	Eligible	Eligible
06	Lawfully present under Section 212(d)(5)	Eligible	Eligible	Ineligible for 5 years	Eligible
07	IRCA (No longer valid)	N/A	N/A	N/A	N/A
08	Lawfully admitted - temporary	Ineligible	Ineligible	Ineligible	Ineligible
09	Undocumented Alien	Ineligible	Ineligible	Ineligible	Ineligible
10	Illegal Alien	Ineligible	Ineligible	Ineligible	Ineligible
11	Cuban/Haban Entrant	Eligible	Eligible	Eligible	Eligible
12	Permanent Resident	Ineligible	Ineligible	Ineligible	Ineligible
13	Special agricultural worker under Section 210(A)	Ineligible	Ineligible	Ineligible	Ineligible
14	Additional special agricultural worker under Section 210(A)	Ineligible	Ineligible	Ineligible	Ineligible
15	Withheld deportation - Section 243(h)	Eligible	Eligible	Eligible	Eligible
16	Battered Alien	Eligible	Eligible	Ineligible for 5 years	Eligible
None	Foreign-born American Indian	Eligible	Eligible	Eligible	Eligible

* "Veteran" includes certain veterans and active duty servicemen and women, their spouses, dependent children, or certain surviving spouses.

Medical Support

Medical Support refers to the obligation that a parent has to pay for his or her child's medical care, either through the provision of health insurance coverage or direct payment of medical bills.



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Medical Support

Unless the person is exempt, or has good cause for refusal to cooperate, each applicant /member that is referred, must, as a condition of eligibility, cooperate in:

- Establishing the paternity of any child born out of wedlock for whom Medicaid is requested or received,
and
- Obtaining medical support for the applicant and for any child for whom Medicaid is requested or received.

Failure to cooperate would result in ineligibility for the parent who refuses to cooperate.

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Third Party Liability

Third Party Liability (TPL) refers to the obligation a third party has to pay the bills for a Medicaid member's medical services. Medicaid is the payer of last resort for the cost of medical care.

Third Party Liability

TPL can include:

- Private Health Insurance Plans
- Insurance settlements resulting from an accident
- Court ordered medical support
- Any other third party with a legal obligation to pay for medical services

TPL Cooperation

All Medicaid members must assign to the State of Wisconsin their rights to payments for medical services from third party payers to remain eligible for Medicaid.

This includes assigning payments from Nursing Home and hospital insurance policies and casualty claims.

Social Security Number



Medicaid applicants must provide a Social Security Number (SSN) or be willing to apply for one.

Social Security Number

Medicaid applicants and members who belong to a recognized religious sect that conscientiously opposes applying for or using a social security number are exempt from meeting the SSN requirements.

Social Security Number

A person who refuses to apply for or use a social security number due to religious beliefs must provide verification from a church elder or other official that doing so is against the church doctrine.



Premium or Cost Share Obligation

- Nonpayment of a MAPP premium will result in non-financial ineligibility.
- Nonpayment of a Family Care or Home and Community Based Waivers cost share will result in non-financial ineligibility.

Financial Eligibility

Once a person has met the non-financial eligibility criteria s/he is then tested to determine financial eligibility. This includes testing against both income and asset limits.

The income and assets limits may vary for the different programs of EBD Medicaid.

Income-Fiscal Group

An EBD fiscal group includes the individual who is non-financially eligible for Medicaid and anyone who lives with them, who is legally responsible for them. Spouses who live together are in each other's fiscal group.

Income-Fiscal Group

This means that spouses that live together, the income and assets of both are counted when determining Medicaid eligibility for either or both spouses. The fiscal group size for this situation/living arrangement is **two**.



Income-Fiscal Group

Exceptions

There are some exceptions to this concept which involve the following:

- A blind or disabled minor
- An SSI Recipient Spouse

Income-Fiscal Group

Exceptions

Blind or Disabled Minor

A blind or disabled minor, living with their parents would be a **one** person fiscal group. Income from the parents would be deemed to the minor.

Income-Fiscal Group

Exceptions

An SSI Recipient Spouse

If one spouse is applying for EBD Medicaid and the other spouse is an SSI recipient, the SSI recipient spouse is not included in the other spouse's fiscal group.

Income-Fiscal Group

Exceptions

An SSI Recipient Spouse

In this situation, you would again have a **one** person fiscal group when determining the Medicaid eligibility of the non-SSI spouse.

Income-Fiscal Group

An individual applying for Long Term Care (LTC) Medicaid would be a **one** person fiscal group. There are additional rules under the Spousal Impoverishment policy for counting income and assets when the LTC Medicaid applicant is married.

Availability of Income

General Rules for Counting income:

- 1) Count it if it is available:
 - The person has a legal interest in it, and
 - The person has the legal ability to make it available for support and maintenance
- 2) Always count the gross income
- 3) Disregarded income is not counted

Availability of Income

General Rules for Counting income:

Note: Available income can include more than what a person actually receives if amounts are withheld from earned or unearned income because of a garnishment, or to pay a debt or any other legal obligation.

Unearned Income

- Unearned income is income that is received from sources other than employment. Unless it is disregarded income it is counted when determining financial eligibility.
- The gross amount of the income is counted.
- Allowable income deductions are subtracted from the gross income.

Unearned Income

Some examples of unearned income include:

- Social Security payments
- Income from trusts
- Unemployment Compensation
- Sick Benefits
- Retirement Benefits

Unearned Income

Some examples of unearned income include
(*con't.*):

- Gifts/General Relief/Charity
- Child Support
- Gambling Winnings
- Interest payments on Land Contracts
- Child Support/Alimony

Earned Income

- Earned Income is income from gainful employment.
- The gross amount of income is counted.
- Any allowable income deductions are subtracted from the gross income.

Earned Income

Some examples of Earned Income include:

- In-kind Income
- Contractual Income
- Wages/Wage advances
- Some Rental Income
- Severance Pay



Disregarded Income

- Disregarded income is not counted when calculating the total amount of income a person has received.
- Some income types have only a portion of the payment disregarded.

Disregarded Income Types

Some examples of disregarded income are:

- Adoption Assistance
- Combat Pay
- Foster Care
- Kinship Care
- Some Payments to Native Americans, including a \$500 per month disregard of per capita payments from gambling revenues

Disregarded Income Types

Some examples of disregarded income are (*con't.*):

- Inconsequential income
- Repayments
- Reimbursements
- Some VA allowances (Aid and Attendance/Housebound Allowance/Payments for Unusual Medical Expenses)

Income Deductions

Some expenses are allowed to be deducted from the gross income when determining eligibility or when calculating a cost share.

Income Deductions

These deductions include:

- \$20.00 General Income Disregard
- Special Exempt Income
- Medical and Remedial Expenses
- Impairment Related Work Expenses
- Expenses for Maintaining a Home
- \$65 ½ Earned Income Deduction

Assets

All assets owned by the fiscal group are added together and compared to the asset limit for the specific EBD Medicaid program requested by the applicant.

Assets

The total countable assets must be below the asset limit by the last day of the month in order to determine eligibility for that month.

There are also exempt assets that are not looked at for the eligibility determination.

Asset Availability

An asset is available when:

- It can be sold, transferred, or disposed of by the owner or the owner's representative, and
- The owner has a legal right to the money obtained from sale of the asset, and
- The owner has the legal ability to make the money available for support and maintenance, and
- The asset can be made available in less than 30 days.

Asset Availability

Consider an asset as unavailable if:

- The member lacks the ability to provide legal access to the assets, and
- No one else can access the assets, and
- A process has been started to get legal access to the assets.



Countable Assets

Countable assets include:

- Non-exempt Burial Assets
- Savings/Checking accounts
- Cash
- Stocks, Bonds, CDs, Money Market Accounts
- The Cash Surrender Value of Life Insurance
- Real Property (non-homestead)
- Land Contracts
- Some trusts
- Annuities

Exempt Assets

Some assets are exempt and not counted when determining financial eligibility.



Exempt Assets

Examples of exempt assets include:

- Certain Burial Assets
- Retirement accounts owned by an ineligible spouse
- Homestead property
- Non-homestead property that is listed for sale
- One Vehicle (more than one vehicle can be exempt under certain conditions)
- Assets that have been determined to be unavailable



To Exit

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The EBD Medicaid Overview for Non-Eligibility Workers Training

Click the “X” on the navigation bar to exit properly.

