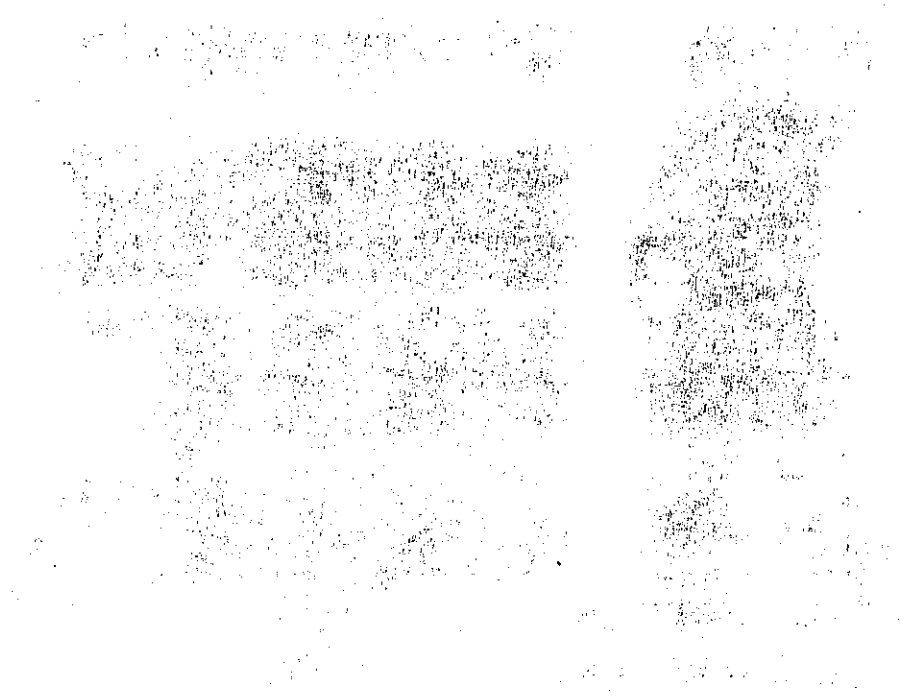


MEDICAID FOR MIGRANTS

Resource ID# 5174

Medicaid for Migrants





Statistics indicate a very small percentage of potentially eligible migrants have actually applied for and been found eligible for Medicaid. A variety of reasons have been cited, including language and transportation problems. Agricultural migrant work is conducive to injury and illness because of daily exposure to pesticides and herbicides. Wisconsin has some policies in place to reflect our efforts to meet the health and access problems faced by migrants.

**Simplified Application for Medicaid Processing –
Reference. MA Handbook, Appendix 19.8.0**

Use the simplified application processing for migrant workers and their families who:

- 1.a. Have current MA eligibility from another state that includes at least months 1 and 2 of the application process.
- b. Or had eligibility in Wisconsin that was certified through month 1 and 2 of the application and it ended only because the family left Wisconsin.
2. They have the same members or fewer in the case as there were when the case had eligibility in the other state.

Procedure:

1. Verify the current eligibility and the end date from the other state. Verify this by copying the out-of-state MA card or by contacting the other state.

If they were previously eligible in Wisconsin, find the CARES closure code and date.
2. Verify the same number of members or fewer in the case as there were in the other state or when on MA in Wisconsin.
3. Collect and verify all non-financial information.
4. Do not collect any financial information.
5. Certify MA benefits for the migrant family until the end of the out-of-state Medicaid certification period.
6. On the review date, verify all non-financial and financial information.

For migrant families who have been certified through the simplified process, the first review coincides with the date out-of-state eligibility ends. The next review is 12 months from the first review.

Income is always annualized.

If migrant workers and their families have no current MA eligibility or if there are additional family members who were not eligible in the prior state, process the case as a regular MA application, with the following exceptions:

1. Use annualized income. This is a prospective monthly estimate of earned income based on the estimated total gross annual earnings divided by 12. The estimate can be based on the past 12 months of the migrant family's income if it is anticipated the last year's income is the best estimate of the current year's income.
2. Certify for a 12 month period.

Migrants are not enrolled in HMO's. Be sure to answer "Y" to the migrant question on ANDC for all family members. This action includes the family on a report to EDS to identify migrant families that will not be enrolled in an HMO.

Special Status – Tuberculosis – **Reference MA Handbook, Appendix 19.7.0**

Non-Financial Requirements

MA applicants who are infected with Tuberculosis are non-financially eligible for MA services, even if they are not blind, disabled or over age 65. "Infected with TB" means that a physician has examined them and found that 1 or more of the following diagnosis apply to them:

1. Infected with latent or active TB.
2. Positive TB skin test.
3. Negative TB skin test, but a positive sputum culture for the TB organism.
4. Negative TB test, but a physician certifies that they require TB-related drug therapy or surgical therapy or both.
5. A physician certifies that they require testing to confirm the presence or absence of TB.

Accept as verification a physician's or registered nurse's written conformation that the person has 1 or more of the above conditions or a Tuberculosis Information Card.

If the applicant meets the non-financial eligibility requirements, they are then tested against the financial requirements. They are:

Assets. The asset limit for 1 person is \$2000.00. Count the assets the same as for other SSI-related Assistance Groups.

Income The income limit for 1 person is \$1373.33. This is gross income. There is no net income test.

Deductible They cannot become eligible for TB Medicaid by meeting an MA Deductible.

If more than 1 person in the Assistance Group is TB-infected, test each person as a single individual with his/her own fiscal test group. Do not deem any income or assets from any other member of the Assistance Group.

If only 1 person in the AG is TB-infected, use the instructions located in the MA Handbook, Appendix 19.7.2.

- If the person is a TB-infected minor or 18-year-old, test him/her in the Blind/Disabled Minor Unit. Income and assets are allocated from the parents first. Use the \$2000.00 asset limit and the \$1373.33 income limit.
- If the person is a TB-infected adult with assets and/or income and a spouse with no assets and/or income, test the person against the \$2000.00 asset limit and the \$1373.33 income limit.
- If the person is a TB-infected adult with assets and/or income and a spouse with assets and/or income, use the OBD-Related worksheet to determine the spouses' assets and net income. Add this to the TB-infected person's assets and/or income. Compare the total to the \$2000.00 asset limit and the income to the \$1373.33 income limit.
- If the person is a TB-infected adult with no assets and/or income and a spouse with assets and/or income, use the OBD-Related worksheet to determine the spouse's assets and/or income. Compare this to the \$2000.00 asset limit and the \$1373.33 income limit.

CARES Procedures: Reference MA Handbook, Appendix 19.7.7

1. Process the application in CARES. Don't confirm unless there is eligibility for a category of MA that is not QMB, SLMB, or QDWI. QMB, SLMB and QDWI recipients do not automatically qualify for TB-related MA services.
2. If the person is eligible for TB Medicaid, certify him/her with a manual 3070 form using the medical status code of TR. Send him/her a manual positive notice with the effective date of eligibility.
3. If the person is not eligible, send him/her a manual negative notice.

Emergency Services

Reference MA Handbook, Appendix 2.3.0

All migrants who are ineligible aliens, even though they do not qualify for standard Medicaid, are eligible for emergency Medicaid if they meet the other Medicaid eligibility requirements. Sponsored aliens may also qualify for emergency Medicaid.

An emergency means a medical condition, including labor and delivery, which shows acute symptoms of sufficient severity (including severe pain). If the lack of immediate medical attention could result in serious jeopardy to the patient's health, serious impairment to bodily functions or a serious dysfunction of a bodily organ or part, emergency assistance should be used.

Certify emergency assistance manually. Use the AE medical status code. The emergency lasts from the time of the first treatment until the condition is no longer an emergency. The person does not receive an MA card. EDS determine if the situation is an emergency. The ESA does the certification.

The person may become eligible for emergency services by an MA deductible. Apply the same deductible policies to them as to any other applicant.

BadgerCare

BadgerCare adds one more layer to Medicaid. The primary goal of BadgerCare is to improve the health of Wisconsin's low-income families by providing affordable access to health care. It widens the scope of who can be eligible by making some stepparents non-financially eligible and increasing the income limit for parents and children over the age of 6.

BadgerCare is a family-based approach to health care. It builds a bridge between private health insurance and public health care by providing access to health care for all uninsured children and parents in low-income families, without replacing or crowding out employer-provided insurance.

BadgerCare will offer the same benefits and services as the Medicaid program. It will be provided through the Medicaid HMO system that is already in place.

BadgerCare does not require verification of assets. It will not cover adults who do not have minor children (under age 19) living with them or non-legally responsible relative (NLRR) caretakers. BadgerCare eligibility can not be backdated.

Non-Financial Eligibility

BadgerCare will cover children under age 19, parents living with children under age 19 and their spouses when they:

- ✓ Are determined ineligible for Medicaid; and
- ✓ Meet the BadgerCare non-financial tests.
- ✓ Do not have access to an employer's group health care plan in which the employer pays 80% or more of the insurance premium; and/or
- ✓ Are not currently covered by an employer's group health plan in which one of the household family members is the policy owner; and/or
- ✓ Were not covered by an employer's group health insurance plan in the last three months; and/or
- ✓ Do not have access to a State Employee's Health Plan.

Income

Applicants are tested at 185% of FPL. BadgerCare recipients are tested at 200% of FPL. The person is considered an applicant when the group has not been eligible for Medicaid or BadgerCare in the current or previous month.

BadgerCare Income Limits

Test Group Size	185% Limit	Test Group Size	185% Limit
1	\$1270.33	7	\$3878.83
2	1705.08	8	4313.58
3	2139.83	9	4748.33
4	2574.58	10	5183.08
5	3009.33	11	5617.83
6	3444.08	12	6052.58

Test Group Size	200 % Limit	Test Group Size	200 % Limit
1	\$1373.33	7	\$4193.33
2	1843.33	8	4663.33
3	2313.33	9	5133.33
4	2783.33	10	5603.33
5	3253.33	11	6073.33
6	3723.33	12	6543.33

BadgerCare Premiums

BadgerCare eligible groups having income exceeding 150% of FPL will have to pay a premium in order to have coverage through BadgerCare. The premium will be calculated based on the test group's income and will be no more than 3.5% of that income amount. While the size of the BadgerCare Test Group does determine if the group is required to pay a premium, the BadgerCare Test Group size does not impact the amount of the premium.

150% FPL Chart

BadgerCare Test Group Size	Federal Poverty Level 150%
1	\$1030.00
2	1382.00
3	1735.00
4	2087.50
5	2440.00
6	2792.50
7	3145.00
8	3497.50
9	3850.00
10	4202.50
11	4555.00
12	4907.50

Premium Chart

Income		Premium Amount	
\$1000.00	to	\$1499.99	\$35.00
1500.00	to	1999.99	52.00
2000.00	to	2499.99	70.00
2500.00	to	2999.99	87.00
3000.00	to	3499.99	105.00
3500.00	to	3999.99	122.00
4000.00	to	4499.99	140.00
4500.00	to	4999.99	157.00