

WISCONSIN KinFACTS: Health Care Coverage

Determining the availability of and access to health care coverage for the child placed in your care is important. Based on your family's situation, the child in your care may be eligible for medical assistance under a Wisconsin Medicaid program or may be added to your private health insurance. **Nothing in this fact sheet should be considered legal advice from the Department of Children and Families (DCF). Please consult with an attorney with any legal questions.**

Wisconsin Medical Assistance

Wisconsin Medicaid is a joint federal and state program that provides high-quality health care coverage, long-term care, and other services to Wisconsin residents under the umbrella of ForwardHealth. There are many different types of Medicaid programs, each with different eligibility criteria based on factors like age, income, and disability status. Children placed with relative caregivers are most commonly eligible for one of two Wisconsin Medicaid programs:

- Title XIX (19) Medicaid, which has no income restrictions (eligibility is based on involvement with the child welfare system), or
- BadgerCare Plus Medicaid, which is income restricted.

What is the difference between Title XIX Medicaid and BadgerCare Plus Medicaid?

BadgerCare Plus provides health care coverage to low-income Wisconsin residents ages 0 to 64 years old. BadgerCare Plus enrollment is managed by county of residence, and children, pregnant women, and adults are all eligible to apply. Copays and premiums are assessed based on income and a Health Maintenance Organization (HMO) is always assigned.

Children placed in out-of-home care, including court-ordered kinship care, and children with an active subsidized guardianship or adoption assistance agreement are categorically eligible for Title XIX Medicaid (often referred to as Foster Care Medicaid or FSTMA) and are enrolled automatically by DCF. Title XIX Medicaid has the same coverage as the BadgerCare Plus Standard Plan, but with no premiums or copays. Title XIX Medicaid recipients also are not enrolled in an HMO. For this reason, Title XIX Medicaid is sometimes called "straight Medicaid" or "straight MA."

- To browse a general list of services covered by BadgerCare Plus and Title XIX Medicaid, visit: <https://www.dhs.wisconsin.gov/badgercareplus/services.htm>.
- To explore providers in your area who take BadgerCare Plus and/or Title XIX Medicaid, visit the ForwardHealth Provider Directory: <https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Public/DirectorySearch.aspx>.
 - Always confirm with a provider prior to scheduling an appointment that they accept your HMO or "straight Medicaid," as applicable.
- To ask whether a specific service can be covered by BadgerCare Plus or Title XIX Medicaid, call Forward Health Member Services: 1-800-947-3544.

How do I know if the child in my home is eligible for Title XIX Medicaid?

If the child is placed in your home under a court order by a Wisconsin child welfare or youth justice agency, or if the child has an active subsidized guardianship agreement or adoption assistance agreement, the child should be eligible for Title XIX Medicaid. DCF will automatically enroll the child in Title XIX Medicaid if the child is eligible. Check to be sure the child in your home has not been enrolled in Title XIX Medicaid and BadgerCare Plus simultaneously.

How do I know if the child in my home is eligible for BadgerCare Plus?

Eligibility for BadgerCare Plus is based on household income. The best way to know if you or someone else in your home is eligible is to apply for BadgerCare Plus by accessing the online application at <https://access.wisconsin.gov/> or by contacting your local Income Maintenance Agency. Income Maintenance Agencies differ by county and region; contact information for your local agency can be found on the Wisconsin Department of Health Services website: www.dhs.wisconsin.gov/forwardhealth/imagency/index.htm. When applying, make sure you have the following information available for each individual in your home:

- Social Security number
- Date of birth
- Address
- U.S. citizenship or immigration status
- Employment information
- Income information (including any assistance payments)
- Housing and utility expenses

My family already receives BadgerCare Plus Benefits, can I add the child to my plan?

If the child is eligible for Title XIX Medicaid, you should not add them to your BadgerCare plan as they can only have one form of Medicaid at a time. If they do not have Title XIX Medicaid, you can add them to your BadgerCare Plus family plan. To add the child to your family's plan, you need to have court-ordered decision making authority for the child. If you do not have this authority, the child will either remain under their birth parents' plan or may be eligible for their own BadgerCare Plus plan, depending on the specific circumstances.

If the child receives Wisconsin Medicaid, can I add them to my private insurance?

Most private health insurance companies will only allow you to add a dependent to your coverage if you have legal decision-making authority for the child through a court-ordered guardianship or a finalized adoption. If you do add the child to your private insurance and the child remains eligible for Wisconsin Medicaid, Wisconsin Medicaid will become the secondary payer and will only be billed for services not covered by your private insurance.

When you initially add your child to your private insurance, be sure to notify your private insurance company that the child is also enrolled in Medicaid. The private insurance company will coordinate billing with ForwardHealth.

How often do I have to re-apply if someone in my household receives Wisconsin Medicaid?

Enrollment in BadgerCare Plus is valid for 12 months. To continue BadgerCare Plus eligibility, you must renew on an annual basis. You will be notified when you need to complete a renewal of your benefits.

Title XIX Medicaid does not require renewal. Children that are eligible for Title XIX Medicaid based on a court-ordered placement, Subsidized Guardianship Agreement, or Adoption Assistance Agreement are automatically re-enrolled annually as long as the placement or agreement remains active.

Wisconsin Medicaid and BadgerCare Plus

How long are youth eligible for BadgerCare Plus if they “age out” of foster care?

If the child you are caring for or previously cared for aged out of out-of-home care or was under a guardianship or subsidized guardianship at age 18, they may be eligible for BadgerCare Plus until age 26 without a financial requirement. Proof of the placement in out-of-home care may be required to qualify. Visit <https://dcf.wisconsin.gov/files/cwportal/policy/pdf/memos/2022-27i.pdf> for more information.

Are there any co-payments or deductibles for services through BadgerCare Plus?

Youth under age 19 enrolled in BadgerCare Plus have no copays. Those over age 19 may be required to pay a copay between \$0.50 and \$3.00 for any given service.

Can I choose to use any provider that accepts Wisconsin Medicaid?

When enrolling in BadgerCare Plus, individuals are assigned an HMO (Health Maintenance Organization) based on location and availability. Members assigned to an HMO are required to utilize health care providers within that HMO. Once an HMO has been assigned, it is often easiest to contact the HMO directly for assistance identifying providers in your area.

Can I take the child to my family health care provider?

Yes, the child in your home can access your family health care provider if they accept Wisconsin Medicaid coverage for services provided. It is usually easiest to contact the provider to ask whether they are within the assigned HMO or take Title XIX Medicaid, as applicable.

Can a health care provider refuse to accept Wisconsin Medicaid?

Yes, each provider determines how many Wisconsin Medicaid patients they are willing to accept. Additionally, if a provider's practice is full, they may refuse to accept any new patients.

What happens if the child in my home needs medical services while we are travelling out of Wisconsin?

Wisconsin Medicaid is generally not accepted in other states. Avoid seeking non-emergency medical care outside of Wisconsin, as it likely will not be covered by Wisconsin Medicaid. There are some providers outside of Wisconsin (particularly in bordering states) that accept Wisconsin Medicaid. Contact ForwardHealth Member Services at 1-800-947-3544, and they may direct you to a provider outside of Wisconsin who accepts Wisconsin Medicaid. Always seek medical care at an emergency facility if needed.

Can the Child in my home get Medicaid coverage if we move out of Wisconsin?

BadgerCare Plus cannot be directly transferred to another state. You will need to contact the local Income Maintenance Agency in Wisconsin to cancel BadgerCare Plus coverage (because an individual cannot be covered by Medicaid in two states at once) and then apply for the new state's own Medicaid program after moving. Note that income criteria differ in every state, and eligibility for BadgerCare Plus does not guarantee eligibility for Medicaid in other states.

If the child in your home receives Title XIX Medicaid, it may be possible for the Title XIX Medicaid to be transferred to a new state through either the Interstate Compact on the Placement of Children (ICPC) or Interstate Compact on Adoption and Medical Assistance (ICAMA). Not all Title XIX Medicaid can be transferred. As soon as you know you will be moving, contact the child's child welfare professional to find out whether the Title XIX Medicaid for the child in your home can be transferred. If it cannot be transferred, you may need to find a different type of medical coverage for the child in your home.

Medical Decision Making

Who is required to consent for medical services for the child in my home?

The child's parent(s) or legal guardian(s) must always consent to any and all medical services provided to the child. In limited circumstances, a court may order that a child receive certain services or transfer medical decision-making authority to another person or agency. Additionally, the child's parent(s) or legal guardian(s) may issue a Power of Attorney or Delegation of Parental Authority that allows someone else to make certain medical decisions for the child.

What if the child in my home needs emergency treatment and their parent(s) or legal guardian(s) is not available?

If the child in your care is in need of emergency treatment, bring the child to the nearest Emergency Department or call 911 and continue to attempt to reach their parent(s) or legal guardian(s).

What if the child's parent(s) or legal guardian(s) does not agree to consent for needed medical services for the child?

The child's parent(s) or legal guardian(s) must always consent to any and all medical services provided to the child. As long as the parent(s) or legal guardian(s) continues to have decision making authority for the child, they have the authority to provide or deny consent for any medical service for the child. If the child's parent(s) or legal guardian(s) denies consent for a medical service, the child cannot receive that service unless a court orders otherwise, or consent is provided later.



The Department of Children and Families is an equal opportunity employer and service provider. If you have a disability and need to access services, receive information in an alternate format, or need information translated to another language, please call the Bureau of Permanence and Out of Home Care or Division of Safety and Permanency at 608-422-7000. Individuals who are deaf, hard of hearing, deaf-blind or speech disabled can use the free Wisconsin Relay Service (WRS) – 711 to contact the department.