

Medicaid Eligibility

Medicaid Certification, Renewal and Cancellation process is automated based on the entry of Out of Home Placement, Subsidized Guardianship Agreement, and Adoption Assistance Agreement data.

- A new MA Certification will be generated on the approval of a new or subsequent placement or agreement.
- A nightly process will check for any child who has not been discharged from placement with active MA expiring in the next 5 days and automatically send the renewal certification.
- Upon discharge from Out of Home Care or termination of an agreement, a cancellation certification will automatically be sent with an end date as the last day of the month, 11 months from the original certification from date, or to the last day of the month, 3 months from the current date if the child is within the last 3 months of their original 12-month certification period.
- Children/youth with an active Subsidized Guardianship service documented who have a Provider with an out-of-state address will have a cancellation certification automatically sent with an end date as the last day of the current month of the address change.
- An update certification will be sent any time the child's address changes.

Note: Once a IV-E determination or redetermination, Subsidized Guardianship Funding Determination, or Adoption Funding Determination is completed, the Med Stat Code is updated on the Medicaid Certification and the updated Medicaid Certification is sent to ForwardHealth. The updates can be viewed on the Medicaid Updates page.

If a Medicaid Certification needs to be created or canceled manually, an assignment to the case is needed.

Creating a Medicaid Eligibility Record

1. From the desktop, go to the Cases tab and click the Create Case Work hyperlink [Create case work](#) or select Create Case Work from the Actions drop-down next to the specific case to open the Create Case Work page.

Create Case Work - Internet Explorer

eWiSACWIS

Print Help

Create Case Items

- Administration
- Adoption
- Agreements/Notices
- Assessment
- Case/Perm Plan
- Education
- Eligibility **Medicaid Eligibility**
- ICPC
- ICWA
- Imaging
- Legal
- Narrative
- Payment
- Permanency Consult
- Placement/Services

Cases

- Applebee, Anna (9221939)
- Appleseed, Mother (9224116)
- Appleton, Claire (9220002)
- Appleton, Claire (9222806)
- Appleton, Mother (9224016)

Case Participants

- Applebee, Anna, Reference Person (9223734)
- Applebee, Antonia, Biological Child (9233959)
- Applebee, Danny, Biological Child (9223735)

Create Close

- On the Medicaid Eligibility Determination page, the MA Number (MCI) will be automatically pre-filled and the MA State will default to Wisconsin. If the child does not already have an MCI ID number displayed on his/her Person Management record, the system automatically generates a temporary ID number and displays it in the MA Number (MCI) field (in Production, the auto generated number begins with 91000...). Click the Save button. This will create the Medicaid record.

Basic Information

Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility [Benefit History](#)

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

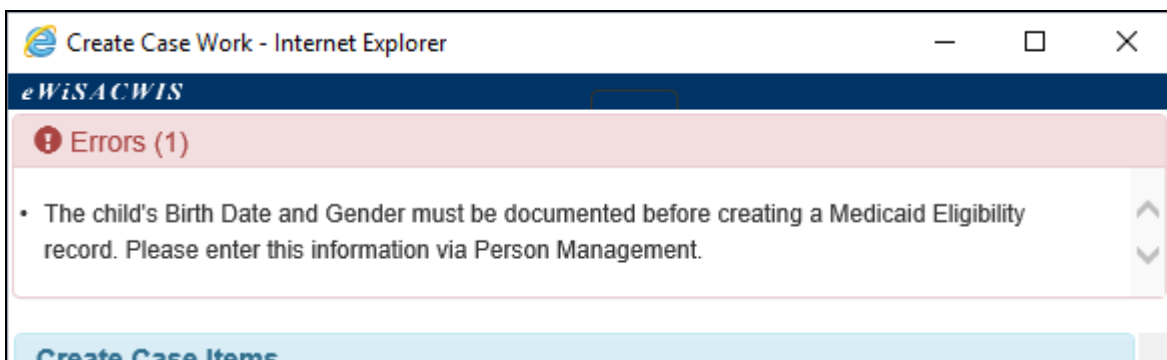
MA Number (MCI): 123457550 Request Replacement Card Reason: [Details](#)

Medicaid History

Action:	Created On:	Status:	Worker:
Insert			

[Save](#) [Close](#)

Note: In order to create a Medicaid record, the child's Birth Date and Gender must be documented on the child's Person Management page.



- The Benefit History tab displays information from Forward Health regarding current and previous Medicaid benefits for the child. The Current Medicaid Benefits include only the Medicaid benefits which either start at the time of (or after) the child's most recent removal and/or which started earlier but have not ended. The Previous Medicaid Benefits include only the Medicaid benefits for which the period overlaps the day prior to the most recent removal. The status field will indicate if the most recent Benefit Plan is Active or Inactive.

Basic Information

Child Name: Applebee, Antonia (9233959) DOB: 07/01/2007 Age: 14

Medicaid Eligibility Benefit History

Current Medicaid Benefits

Medicaid Benefit Plan	Begin Date	End Date
FSTMA	02/22/2019	09/30/2038
Managed Care Program Plan: CARE4KIDS	02/22/2019	
Managed Care Provider Name: CHILDRENS COMMUNITY HEALTH PLAN INC		
Managed Care Exemption Code:		
Managed Care Exemption Description:		
Status: Active		

Previous Medicaid Benefits

Previous Benefits are specific to the Medicaid Benefit Plans in place the day prior to the child's current Out of Home Care episode.

Medicaid Benefit Plan	Begin Date	End Date
BCSP	09/11/2017	09/30/2019

Save Close

Documenting a Medicaid Certification record

1. On the Medicaid Eligibility Determination page, Medicaid Eligibility tab, click the Insert button in the Medicaid History group box . Clicking Yes to the save pop-up, will open the Medicaid Certification page.
2. On the Medicaid Certification page, the Certification Type will default to Certification. The Agency field will default to your county. If the Medicaid certification is for another county, update the Agency field.

The screenshot displays the 'Medicaid Certification' form in the eWISACWIS system. The form is divided into several sections:

- Basic Information:** Child Name: Applebee, Antonia (9233959); DOB: 07/01/2007; DOD: (blank); Gender: Female.
- Certification Information:** Certification Type: Certification (highlighted with a red box); Update; Cancel.
- Address:** C/O: (blank); Street: (blank); Apt: (blank); WI City: (blank); State: (blank); City: (blank); Zip: (blank); Country: (blank); County of Residence: (blank).
- Agency:** Milwaukee (highlighted with a red box); Med Stat Code: (blank); Certification From: 00/00/0000; Certification To: 00/00/0000; MCI ID: 123457551; Temporary Number: ; Cancel Date: 00/00/0000; Remove DOD from MMIS: .
- FAST Unit Status:** Unit Status: Pending; Completed; Dt Fast Cmpl: 00/00/0000; Worker Name: (blank).
- Approval Status:** State/County Approval Status: Pending; Approved; Not Applicable; Date of Approval: 00/00/0000; Worker Name: (blank).
- MMIS Interface Status:** Approval In-Progress; Ready to Send; Sent to MMIS.

Buttons for 'Save' and 'Close' are located at the bottom right of the form.

3. Enter the applicable Certification From date.
4. Once the Certification From date has been entered, the Address group box will update with the provider's information from the most recently approved placement.

Basic Information
 Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 DOD: Gender: Female

Certification Information
 Certification Type: Certification Update Cancel

Address
 C/O:
 Street: 20 Forest Ave Apt:
 WI City: Fairchild, 54741 State: WI
 City: Fairchild
 Zip: 54741 Country: United States
 County of Residence:

Agency: Milwaukee
 Med Stat Code: 34 [Details](#)
 Certification From: 06/23/2022 Certification To: 00/00/0000
 MCI ID: 123457551 Temporary Number
 Cancel Date: 00/00/0000
 Remove DOD from MMIS

FAST Unit Status
 Unit Status: Pending Completed
 Dt Fast Cmpl: 00/00/0000
 Worker Name:

Approval Status
 State/County Approval Status: Pending Approved Not Applicable
 Date of Approval: 00/00/0000
 Worker Name:

MMIS Interface Status
 Approval In-Progress
 Ready to Send
 Sent to MMIS

Save Close

- The Med Stat Code defaults based on the child’s placement phase and Title IV-E Status. The Details flare identifies what each code is for.

The following chart identifies the Med Stat Code that corresponds to a combination of the child's Placement Phase and Title IV-E Status. If you do not know the child's Title IV-E status (or it has not yet been determined), select the "All Other IV-E Statuses" value (34, 3P, 5A, or KG) for the associated Placement Phase.

Placement Phase	Title IV-E Status	
	IV-E reimbursable (Eligible and Reimbursable)	All Other IV-E Statuses (Pending; Eligible, Not Reimbursable; Ineligible)
Out of Home Care	33	34
Pre-Adoptive (Post TPR)	37	3P
Adoptive Home	56	5A
Subsidized Guardianship	KC	KG

- Enter the Certification To date and update any other applicable data.
- Depending on your agency, you will need to complete either the FAST Unit Status group box or the Approval Status group box. In the FAST Unit Status group box, select the Completed

radio button. In the Approval Status group box, select the Approved radio button. The MMIS Interface Status group box has been updated to “Ready to Send.”

The screenshot shows the 'Medicaid Certification' form for child Applebee, Antonia (DOB: 07/01/2007). The form is divided into several sections:

- Basic Information:** Child Name: Applebee, Antonia (9233959); DOB: 07/01/2007; DOD: ; Gender: Female.
- Certification Information:** Certification Type: Certification (selected), Update, Cancel.
- Address:** C/O: ; Street: 20 Forest Ave; Apt: ; WI City: Fairchild, 54741; State: WI; City: Fairchild; Zip: 54741; Country: United States; County of Residence: Milwaukee.
- Agency:** Milwaukee.
- Med Stat Code:** 34.
- Certification From:** 06/23/2022; **Certification To:** 05/31/2023.
- MCI ID:** 123457551; Temporary Number.
- Cancel Date:** 00/00/0000.
- Remove DOD from MMIS.

At the bottom, three status sections are visible, each with a red box highlighting a radio button:

- FAST Unit Status:** Unit Status: Pending, Completed. Dt Fast Cmpl: 06/23/2022. Worker Name: Caitlin C. Cake.
- Approval Status:** State/County Approval Status: Pending, Approved, Not Applicable. Date of Approval: 06/23/2022. Worker Name: Caitlin C. Cake.
- MMIS Interface Status:** Approval In-Progress, Ready to Send, Sent to MMIS.

Buttons for 'Save' and 'Close' are located at the bottom right of the form.

- Click the Save button. When the MMIS Interface Status group box is updated to “Ready to Send.”, the nightly batch will send the information to MMIS.
- Click the Close button to return to the Medicaid Eligibility Determination page, Medicaid Eligibility tab where the new certification type displays in the Medicaid History group box.

Medicaid History				
Action:	Created On:	Status:	Worker:	
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C.	Edit

[Insert](#)

Canceling a Medicaid Certification

1. On the Medicaid Eligibility Determination page, Medical Eligibility tab, click the Insert button in the Medical History group box. This will open the Medicaid Certification page.
2. On the Medicaid Certification page, the Certification Type will default to Certification. Select the Cancel radio button.

The screenshot displays the 'Medicaid Certification' form in the eWISACWIS system. The form is for a child named Applebee, Antonia (DOB: 07/01/2007, Gender: Female). The Certification Type is set to 'Cancel'. The Address field is populated with '20 Forest Ave, Fairchild, WI 54741'. The Agency is 'Milwaukee'. The Certification From and Certification To dates are both '06/30/2022'. The Cancel Date is also '06/30/2022'. The FAST Unit Status, Approval Status, and MMIS Interface Status sections are visible at the bottom.

Note: If a Death Date has been documented on the child's Person Management record and a new Medicaid certification record is created, the system will automatically open the Medicaid Certification page with the Certification Type = Cancel and all buttons will be disabled. The Certification From, Certification To, and Cancel Date fields will default to the Death Date documented on the person record and will be disabled.

3. The Agency field will default to your county. If the Medicaid Certification is for another county, update the Agency field. If a Death Date has been documented on the child's Person Management record the Agency field will be disabled.
4. The Certification From, Certification To, and Cancel Date fields will automatically pre-fill with the date that is the last day of the current month and will be disabled.
5. Enter any other applicable data.
6. Depending on your agency, you will need to complete either the FAST Unit Status group box or the Approval Status group box. In the FAST Unit Status group box, select the Completed

radio button. In the Approval Status group box, select the Approved radio button. The MMIS Interface Status group box has been updated to “Ready to Send.”

7. Click the Save button. The nightly batch will send the information to MMIS.

The screenshot displays the 'Medicaid Certification' web application interface. The browser tabs show 'eWISACWIS' and 'Medicaid Eligibility Determination'. The application header includes 'Print' and 'Help' icons. The main content area is divided into several sections:

- Basic Information:** Child Name: [Applebee, Antonia \(9233959\)](#), DOB: 07/01/2007, DOD: , Gender: Female.
- Certification Information:** Certification Type: Certification, Update, Cancel.
- Address:** C/O: , Street: 20 Forest Ave Apt: , WI City: Fairchild, 54741, State: WI, City: Fairchild, Zip: 54741, Country: United States, County of Residence: Milwaukee.
- Agency:** Milwaukee.
- Med Stat Code:** 34 (Details).
- Certification Dates:** From: 06/30/2022, To: 06/30/2022.
- MCI ID:** 123457551, Temporary Number: .
- Cancel Date:** 06/30/2022.
- Remove DOD from MMIS:** .

At the bottom, three status sections are visible, each with a red border:

- FAST Unit Status:** Unit Status: Pending, Completed. Dt Fast Cmpl: 06/23/2022. Worker Name: Caitlin C. Cake.
- Approval Status:** State/County Approval Status: Pending, Approved, Not Applicable. Date of Approval: 06/23/2022. Worker Name: Caitlin C. Cake.
- MMIS Interface Status:** Approval In-Progress, Ready to Send, Sent to MMIS.

Buttons for 'Save' and 'Close' are located at the bottom right of the application.

10. Click the Close button. You will then be brought back to the Medicaid Eligibility Determination page. The new eligibility will now display in the Medicaid History group box.

eWISACWIS Medicaid Eligibility Determination

eWISACWIS Print Help

Basic Information

Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility **Benefit History**

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

MA Number (MCI): 123457550 Request Replacement Card Reason: [Details](#)

Medicaid History

Action:	Created On:	Status:	Worker:	
Cancel	06/23/2022 15:12:43	Approved	Cake, Caitlin C.	Edit
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C.	Edit

[Insert](#)

[Save](#) [Close](#)

To Request a Replacement Card

- From the desktop, expand your Cases icon and expand the folder icon for the case you are working with. Expand the Eligibility icon and click on the Medicaid Eligibility Determination hyperlink for the child you wish to work with.

Applebee, Anna (9221939)

Case details:
CPS Family - Initial Assessment
Milwaukee-Region 1

Case address:
20 Forest Ave
Fairchild, WI 54741

Primary worker:
Daisy, Dan'i (Supervisor)
(440) 943-7690
dan.daisy@wisconsin.gov

View case information

Access Reports Agreements and Notices Assessments

Assignments Eligibility Legal

Related People Safety Services

Eligibility

[Medicaid Eligibility Determination](#) 06/23/2022 Applebee, Antonia Approved

- On the Medicaid Eligibility Determination page, select the appropriate value from the Request Replacement Card Reason drop-down.

eWISACWIS Medicaid Eligibility Determination

eWiSACWIS Print Help

Basic Information

Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility Benefit History

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMIS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

MA Number (MCI): 123457550 Request Replacement Card Reason: Details

Medicaid History

Action:	Created On:	Status:	Worker:
Cancel	06/23/2022 15:12:43	Approved	Cake, Caitlin C. Edit
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C. Edit

- Click the Save button. When Close is selected to return to the Medicaid Eligibility Determination, the Medicaid History group box will display the Replacement Card Request.

eWISACWIS Medicaid Eligibility Determination

Basic Information
 Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility [Benefit History](#)

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

MA Number (MCI): 123457550 Request Replacement Card Reason: [Details](#)

Medicaid History

Action:	Created On:	Status:	Worker:	
Cancel	06/23/2022 15:12:43	Approved	Cake, Caitlin C.	Edit
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C.	Edit
Replacement Card Request	06/21/2022 11:31 AM	Accepted (Never Received)	Cake, Caitlin C.	

[Insert](#) [Save](#) [Close](#)

Note: The status of the replacement card request will display on the Desktop for the case/child's Medicaid Eligibility Determination.

Note: A replacement card can only be requested every 7 days.

Applebee, Anna (9221939)

Case details: CPS Family - Initial Assessment Milwaukee-Region 1 Case address: 20 Forest Ave Fairchild, WI 54741 Primary worker: Daisy, Dan'i (Supervisor) (440) 943-7690 dan.daisy@wisconsin.gov

View case information

[Access Reports](#) [Agreements and Notices](#) [Assessments](#)

[Assignments](#) **Eligibility** [Legal](#)

[Related People](#) [Safety](#) [Services](#)

Eligibility

[Medicaid Eligibility Determination](#) 06/23/2022 Applebee, Antonia Accepted (Never Received)

MMIS Interface

1. On the Medicaid Eligibility Determination page, click the MMIS Interface hyperlink to have eWiSACWIS send a call to MMIS. The call will request a list of matched people based upon specific criteria [Last Name, Medicaid ID, Social Security Number, Date of Birth, and Master Client Index (MCI) ID].

Basic Information
 Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility [Benefit History](#)

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMIS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

MA Number (MCI): 123457550 Request Replacement Card Reason: [Details](#)

Medicaid History

Action:	Created On:	Status:	Worker:	
Cancel	06/23/2022 15:12:43	Approved	Cake, Caitlin C.	Edit
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C.	Edit
Replacement Card Request	06/21/2022 11:31 AM	Accepted (Never Received)	Cake, Caitlin C.	

[Insert](#) [Save](#) [Close](#)

2. Clicking the MMIS Interface hyperlink will launch the MMIS Results Request page if more than one match is found from MMIS. To see the MMIS Client Info, select the radio button for one of the results and click the Continue button.
3. If only one person matches the request, the MMIS Client Info page will automatically open displaying demographic, address, and current Medicaid Eligibility information for the child., this page.

MMIS Client Info [Print](#) [Help](#)

Child Information

Last Name: APPLEBEE First Name: ANTONIA Middle Initial: Suffix:

Gender: F DOB: 07/01/2007

Medicaid ID: 123-45-6789-0 MCI ID: 9426505296 Effective Date: 06/23/2022 End Date: 12/31/2022

Address Information

Number: C/O LYNN APPLEBEE Address: 20 FOREST AVE Apt: 54741

City: FAIRLIFE State: WI

Phone: (608) 999-9999

[Close](#)

4. The Close button will return user to the Medicaid Eligibility Determination page where the MA Number (MCI) field in the Eligibility Information group box will be updated with the MCI ID from MMIS. After clicking the Edit hyperlink for a current Medicaid History row, the temporary Current MA ID on the Medicaid Certification page will update with the MCI ID from MMIS.

Medicaid Updates

Once a IV-E determination or redetermination, Subsidized Guardianship Funding Determination, or Adoption Funding Determination is completed, the Med Stat Code is updated on the Medicaid Certification and the updated Medicaid Certification is sent to ForwardHealth. The updates can be viewed on the Medicaid Updates page.

1. To access the Medicaid Updates page, access the Medicaid Eligibility Determination page from the desktop.
2. On the Medicaid Eligibility tab, click on the [View Updates](#) hyperlink.

Basic Information

Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Eligibility Benefit History

Eligibility Information

IV-E Eligibility Status: N/A Effective Date: [MMIS Interface](#)

Child Receives MA Child Receives SSI

MA State: Wisconsin AA State:

MA Number (MCI): 123457550 Request Replacement Card Reason: [Details](#)

Medicaid History

Action:	Created On:	Status:	Worker:	
Cancel	06/23/2022 15:12:43	Approved	Cake, Caitlin C.	Edit
Certification	06/23/2022 12:08:56	Approved	Cake, Caitlin C.	Edit
Replacement Card Request	06/21/2022 11:31 AM	Accepted (Never Received)	Cake, Caitlin C.	

[View Updates](#) [Insert](#)

[Save](#) [Close](#)

3. The Medicaid Updates page displays the updates.

Basic Information

Child Name: [Applebee, Antonia \(9233959\)](#) DOB: 07/01/2007 Age: 14

Medicaid Updates

From	To	Stat Code	C/O Address	Date Created	Updated By	Agency	MMIS Status
06/29/2021	05/31/2022	33	Antonia Applebee 20 Forest Ave Fairchild, WI 54741	12/22/2021	Cake, Caitlin C.	Milwaukee	Sent to MMIS
06/02/2021	06/28/2021	33	Antonia Applebee 20 Forest Ave Fairchild, WI 54741	12/22/2021	Cake, Caitlin C.	Milwaukee	Sent to MMIS
06/29/2021	05/31/2022	33	Antonia Applebee 20 Forest Ave Fairchild, WI 54741	07/02/2021	Cake, Caitlin C.	Milwaukee	Sent to MMIS
06/01/2021	06/28/2021	33	Antonia Applebee 20 Forest Ave Fairchild, WI 54741	07/02/2021	Cake, Caitlin C.	Milwaukee	Sent to MMIS

[Close](#)