

2025 Q3 State Plan Amendments

#	Name	Summary	Fiscal Impact	Effective	
Programmatic SPAs					
25-0015	Single Case Agreements	When there is no Medicaid rate for a service that is needed for lifesaving care, DHS negotiates special rates with hospitals while the Medicaid member is hospitalized. These are called <i>Single Case Agreements</i> . This SPA clarifies and updates DHS policies for these agreements. It clarifies which hospitals are eligible, and the timing for negotiating single case agreements.	None.	7/1/2025	
25-0016	Hospital Access Payments	DHS collects a fee from Wisconsin hospitals and uses these funds to pay back hospitals for services to Medicaid patients. These payments help keep services accessible for Medicaid members. These are called <i>Hospital Access Payments</i> . This SPA will exempt long-term acute care hospitals from these fees and payments. The SPA will also note that the fee and access payments are increasing.	All Funds: \$201,953,582 GPR: \$79,913,032 FED: \$122,040,550	7/1/2025	
25-0017	Nursing Home Annual Rate Update	DHS is making regular yearly updates to nursing home rates. The SPA will also clarify the independent audit requirement policy for nursing homes. There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.	All Funds: \$482,000 GPR: \$190,000 FED: \$292,000	7/1/2025	
25-0018	Coverage of Services within Provider Scope of Practice	Wisconsin 2017 Act 119 broadens the scope of who may prescribe or order some Medicaid services. This change allows members to see more provider types for some types of care, and Medicaid will pay for these services. This change allows members to see more provider types for some types of care, and Medicaid will pay for these services.	None.	12/1/2025	
25-0021	ACIP Vaccine Coverage	The change would allow Medicaid to cover vaccines recommended by additional governing bodies that offer clinical expertise on vaccines, in addition to Advisory Committee on Immunization Practices.	None.	TBD	
25-0023	Chiropractic Coverage Expansion	If approved, this expansion would allow Medicaid to reimburse for all services that are within the scope of practice for chiropractors under state law. This change is required by the Wisconsin 2025-2027 Biennial Budget.	All Funds: \$2,500,000 GPR: \$1,000,000 FED: \$1,500,000	1/1/2026	

Administrative/Clean Up SPAs				
25-0019	Graduate Medical Education Add-on – Clean Up	DHS provides supplemental payments to hospitals to support graduate medical education. This SPA clarifies that these payments are not limited to the specialty programs currently listed and will clean up typos and outdated references. There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.	None.	7/1/2025
25-0020	Required Clinic Services Template Update	CMS is requiring states to use a new template to describe their covered clinic services. DHS will put existing information about Medicaid-covered clinic services into this template. This SPA will not change any existing policies. There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.	None.	7/1/2025
25-0022	Recovery Audit Contractor Exception	CMS requires states to contract with a recovery audit contractor (RAC) to identify underpayments and overpayments of Medicaid claims. Wisconsin currently has an exception in place and does not have a RAC under contract. This SPA will request a continuation of this exception. There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.	None.	11/1/25

2025 Q3 State Plan Amendment (SPA) Summaries

Programmatic SPA Updates

25-0015: Single Case Agreements

Effective Date: July 1, 2025

When there is no Medicaid rate for a service that is needed for lifesaving care, DHS negotiates special rates with hospitals while the Medicaid member is hospitalized. These are called *Single Case Agreements*. These agreements allow Medicaid to pay for services that aren't normally covered. DHS is changing this section of the State Plan.

Currently, Wisconsin does not allow these payments for in-state hospitals. This SPA will make this clear in the State Plan.

The State Plan also currently allows hospitals to request negotiated payments within 180 days after an inpatient stay. This SPA will remove this language. In the future, requests must generally be made before or during an inpatient stay, with requests after the discharge date approved only at the discretion of DHS.

DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: None.

25-0016: Hospital Access Payments

Effective Date: July 1, 2025

DHS collects a fee from Wisconsin hospitals and uses these funds to pay back hospitals for services to Medicaid patients. These payments are meant to help keep services accessible for Medicaid members. These are called Hospital Access Payments.

This SPA will exempt long-term acute care hospitals from these fees and payments. This SPA will also remove references to children's hospitals to align with rate-setting setting methodology. All Wisconsin children's hospitals are classified as acute care hospitals and will still receive access payments.

This SPA will increase access payment reimbursements using the additional funding available from the increased hospital tax assessment.

DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: The changes to Medicaid and BadgerCare Plus are in total projected to result in increased annual expenditures of \$201,953,582 all funds (AF), composed of \$122,040,550 federal match (FED) and \$79,913,032 state funds/general purpose revenue (GPR).

25-0017: Nursing Home Annual Rate Update

Effective Date: July 1, 2025

DHS is making regular yearly updates to nursing home rates. These changes align with inflation and with the most recent budget act. The SPA will also clarify current policy on the independent audit requirement for nursing homes.

DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: The changes to Medicaid and BadgerCare Plus are in total projected to result in increased annual expenditures of \$482,000 all funds (AF), composed of \$292,000 federal match (FED)

and \$190,000 state funds/general purpose revenue (GPR).

25-0018: Coverage of Services within Provider Scope of Practice

Effective Date: December 1, 2025

DHS will update the State Plan in response to Wisconsin 2017 Act 119. The Act broadens the scope of who may prescribe or order services to "a provider acting within the scope of the provider's practice under statutes, rules, or regulations that govern the provider's practice." Previously, Medicaid could only cover these services if a physician ordered the service.

The SPA will reflect this change in the State Plan. The changes impact several service types, including:

- Hospital services
- Nursing home services
- Outpatient services
- Drugs
- Medical supplies

This change allows members to see more provider types for some types of care, and Medicaid will pay for these services. Previously, Medicaid would only pay for a physician to provide these services. DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal impact: None.

25-0020: ACIP Vaccine Coverage

Effective Date: 7/1/2025

DHS will update the State Plan to respond to changes in vaccine recommendations by the Advisory Committee on Immunization Practices (ACIP). Currently, Medicaid reimburses for vaccines provided to Medicaid members when ACIP recommends these vaccines. The change would allow Medicaid to cover vaccines recommended by more governing bodies that offer clinical expertise on vaccines, in addition to ACIP.

DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: None.

25-0023: Chiropractic Coverage Expansion

Effective Date: 1/1/2026

In alignment with the 2025-2027 Wisconsin Biennial Budget (2025 WI Act 15), DHS will update the state plan to expand coverage of chiropractic services. The expansion allows Medicaid to reimburse for all services that are within the scope of practice for chiropractors under state law. Under federal law, covered chiropractic services are limited to manipulation of the spine. Under state law, chiropractic scope of practice also includes adjustments to skeletal articulations and adjacent tissue. This change will update the state plan to include those services, as well as evaluation, examination, lab analysis, other testing, and exercise rehabilitation and physiotherapy.

Chiropractors enrolled with Medicaid would be able to get reimbursed for providing expanded chiropractic services to Medicaid members. Medicaid members could get these services covered by Medicaid when they are provided by an eligible provider.

Fiscal Impact: The change will be effective 1/1/2026 and will apply to claims with dates of service on or after that date. The change to Medicaid, BadgerCare, and BadgerCare Plus is projected to result in increased annual expenditures of \$2,500,000 all funds (AF), composed of \$1,500,000 federal match (FED) and \$1,000,000 state funds/general purpose revenue (GPR), effective 1/1/2026.

Administrative/Clean Up SPA Updates

25-0019: Graduate Medical Education Add-on Clean Up

Effective Date: July 1, 2025

DHS is adjusting wording in the section of the State Plan that describes the State's Graduate Medical Education Add-on Program. This program makes payments to hospitals that train physicians to practice in Wisconsin. The changes do not affect policy or change the program. These changes will:

- Clarify that hospitals must have one of the specialty programs listed, but that payments are not
 only for those specialties (family medicine, general internal medicine, general surgery, pediatrics,
 psychiatry).
- Clean up typos and outdated references.

There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: None.

25-0020: Required Clinic Services Template Update

Effective Date: July 1, 2025

CMS has given states a new template to describe their covered clinic services. DHS will put existing information about Medicaid-covered clinic services into this template. This SPA will not change any existing policies.

There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: None.

25-0022: Recovery Audit Contractor (RAC) Exception Request

Effective Date: November 1, 2025

CMS requires states to contract with a recovery audit contractor (RAC) to identify underpayments and overpayments of Medicaid claims. Because Wisconsin's existing program integrity initiatives serve this purpose, CMS has historically granted Wisconsin an exception. Wisconsin does not have a RAC. This SPA requests to renew this exception for another two years, which is documented in the State Plan.

There is no member impact. DHS does not believe this change has any particular impact on Tribal members or providers.

Fiscal Impact: None.

2025 Q2 SPA Status Update

#	Name	Brief Summary	Effective	Status		
Programmatic SPAs						
25-0008	Pre-Release Services for Incarcerated Youth (CHIP)	DHS will provide preventive screenings and diagnostic care (EPSDT) and case management services for youth in carceral facilities starting in 2025. This change to the Children's Health Insurance Program (CHIP) follows a similar Q1 2025 SPA for youth enrolled in Medicaid.	1/1/25	Under review by CMS		
25-0009	Suspending Full CHIP Coverage for Incarcerated Youth	DHS will suspend, rather than terminate, children's full CHIP coverage when they are incarcerated. Members will continue to receive inpatient hospital services, and preventive screenings and case management described under SPA 25-0008. This aligns with current Medicaid policy.	1/1/25	Under review by CMS		
25-0010	Access to Health Insurance as CHIP Eligibility Condition	Access to insurance coverage will no longer impact CHIP eligibility – only current enrollment in other insurance coverage.	2/22/25	Under review by CMS		
25-0011	Updating Hospital Inpatient State Plan Outpatient Services	When a member is admitted as an inpatient at one hospital, DHS will directly reimburse outpatient services provided at another hospital. There is no member experience impact.	4/1/25	Under review by CMS		
25-0012	HMO Exemptions for Sickle Cell and Gene Access Model	Provides care to the following member populations in Medicaid fee-for- service and excludes them from BadgerCare Plus and SSI HMO managed care: stem cell or bone marrow transplant recipients, sickle cell disease (SCD) gene therapy recipients.	4/1/25	Approved		
25-0013	Child Care Coordination Managed Care Carve-in	BadgerCare Plus and SSI HMOs cover Child Care Coordination (CCC) services for members who are enrolled in the HMO and eligible for this service.	7/1/25	Approved		
25-0014	School-Based Services	Allows additional types of care plans to demonstrate medical necessity for school-based services and includes some additional service types, such as physician and dental services.	7/1/25	Approved		
Administrative/Clean Up SPAs						
None.						

2025 Q1 SPA Status Update

#	Name	Brief Summary	Effective	Status
Programmatic SPAs				
25-0001	Child Care Coordination Provider Enrollment	Aligns with recent administrative rule updates that enhance enrollment requirements for the new Child Care Coordination (CCC) provider type.	2/1/2025	Approved
25-0002	Inpatient Hospital Rate Increases	Increases rates for several inpatient hospital services. Adds details on the new health information exchange (HIE) pay-for-performance program.	1/1/2025	Approved
25-0003	Outpatient Hospital Rate Increases	Increases the rate for deep sedation provided in outpatient hospitals during dental services. Adds details on the new HIE pay-for-performance program.	1/1/2025	Under Review by CMS
25-0004	Pre-Release Services for Incarcerated Youth (Medicaid)	DHS will provide preventive screenings and diagnostic care (EPSDT) and case management services for youth in carceral facilities starting in 2025.	1/1/2025	Under Review by CMS
25-0005	Disregard cash received with medical or social services as an asset	Exempts cash or other benefits received in conjunction with medical or social services provided under a federal, state, or local program as an asset for Elderly, Blind and Disabled (EBD) Medicaid members.	1/1/2025	Approved
25-0006	Yearly Cost of Living Adjustment Updates	Updates the yearly Cost of Living Adjustment (COLA) per federal guidelines for EBD Medicaid members.	1/1/2025	Approved
		Administrative/Clean Up SPAs		
25-0002	Family Care Partnership	Clean up to remove Wisconsin's authority to operate Family Care Partnership from the state plan. CMS approved Family Care Partnership as an addition to the Family Care Waiver in November 2024. Since WI now gets that authority from the waiver, it can be removed from the state plan.	1/1/2025	Not Submitted
25-0007	Treat-in-Place/No- Transport in Ground Emergency Medical Transport Assessment	Updates the list of services eligible for supplemental reimbursement under the Ambulance Service Provider Fee Reimbursement program to include services provided by emergency medical services providers to members who do not require transportation ("Treat-in-Place/No Transport").	1/1/2025	Approved