

## **Contract Amendment for Foster Care Medical Home Services**

This agreement entered into for the period of January 1, 2020 through December 31, 2021 between the State of Wisconsin acting by or through the Department of Health Services, hereinafter referred to as the “Department” and Children’s Hospital and Health System, a Prepaid Inpatient Health Plan with a certificate of authority to do business in Wisconsin for the Foster Care Medical Home Program hereinafter referred to as the “PIHP”, is hereby amended as follows:

### **1. Article V, A**

#### **Amend to read as follows:**

##### **A. Use of ForwardHealth Enrolled Providers**

Except in emergency situations, the PIHP must use only Wisconsin ForwardHealth enrolled providers for the provision of covered services. The Department reserves the right to withhold from capitation rate development and reconciliation the costs related to services provided by non-enrolled providers, at the FFS rate for those services, unless the PIHP can demonstrate that it reasonably believed, based on the information provided by the Department, that the provider was ForwardHealth enrolled at the time the PIHP reimbursed the provider for service provision. The Wis. Adm. Code, Ch. DHS 105 and the ForwardHealth Handbook, contains information regarding provider certification requirements. The HMO must require every physician providing services to members to have a Provider Number or National Provider Identifier (NPI). The Department requires that Medicaid-enrolled providers undergo periodic revalidation. During revalidation, providers update their enrollment information with ForwardHealth, and sign the Wisconsin Medicaid Provider Agreement and Acknowledgement of Terms of Participation. Providers who fail to revalidate are terminated from Wisconsin Medicaid.

### **2. Article XVI, B**

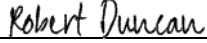
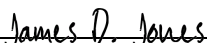
#### **Amend to read as follows:**

##### **B. Coordination of Benefits (COB), and Third Party Liability (TPL)**

In order to maintain the confidentiality of children in out-of-home care and consistent with Medicaid policy, the PIHP is not required to coordinate benefits.

For purposes of both COB and TPL, and pursuant to the federal Deficit Reduction Act (P.L. 109-171, Sec. 6035), the PIHP shall use cost avoidance when possible, except as otherwise permitted herein. Specifically, the PIHP is prohibited from referring members to publicly supported health care resources in order to avoid costs. While the PIHP cannot recoup payment pending third party liability recovery, it may request additional information from a provider or member prior to payment.

All terms and conditions of the January 1, 2020 through December 31, 2021 contract and any prior amendments that are not affected by this amendment shall remain in full force and effect.

<b>PIHP Name</b>	<b>Department of Health Services</b>
<b>Care4Kids</b>	
Official Signature	Official Signature
DocuSigned by:  <small>3D62F652925447F...</small>	DocuSigned by:  <small>7BD4E56017A7425...</small>
Printed Name	Printed Name
Robert Duncan	James D. Jones
Title	Title
President - CCHP	State Medicaid Director
Date	Date
6/1/2020 <a href="#">Click here to enter a date.</a>	6/8/2020 <a href="#">Click here to enter a date.</a>