

ForwardHealth **UPDATE**

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COVID-19 UNWINDING: COVID-19 VACCINES, TREATMENTS, AND LABORATORY SERVICES

During the federal COVID-19 public health emergency (PHE), the federal government allowed the Wisconsin Department of Health Services (DHS) to implement temporary changes to some policies to facilitate the protection of member health.

The federal government announced that the COVID-19 PHE would end on May 11, 2023. As of May 12, in some cases, the return to routine operations may have involved a return to policies from before the PHE. In other cases, temporary changes may have turned into permanent policies that have become part of routine operations. There are also situations where the temporary policy will continue beyond May 12, 2023, with additional guidance to follow at a later date. **This ForwardHealth Update provides information about ForwardHealth coverage of COVID-19 vaccines, treatments, and laboratory services after the end of the COVID-19 PHE.**

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

All Providers, HMOs and Other Managed Care Programs

QUICK LINKS

- [ForwardHealth Update 2023-14, "Important Information Regarding the End of the COVID-19 Public Health Emergency"](#)
- [COVID-19: ForwardHealth News and Resources page](#)
- [COVID-19 Unwinding Resources for Providers page](#)

The information provided in this ForwardHealth Update is published in accordance with Section 319 of the Public Health Service Act (42 U.S.C. § 247d) and the federal Consolidated Appropriations Act, 2023.

Temporary Policies That Became Permanent Policies as of May 12, 2023

Related to Alert [046](#): New Procedure Codes for COVID-19 Monoclonal Antibody Infusion (9/24/21) and Alert [057](#): New Procedure Codes for Remdesivir COVID-19 Treatment and COVID-19 Monoclonal Antibodies (2/4/22)

As of May 12, 2023, ForwardHealth continues to cover monoclonal antibody infusion codes authorized for use in treating COVID-19.

Authorization for monoclonal antibodies will continue to change based on the prevalent variants of COVID-19. Providers are encouraged to review the most up-to-date authorization information of monoclonal antibodies from [Centers for Medicare & Medicaid Services](#). For ForwardHealth-specific coverage information, refer to the [interactive maximum allowable fee schedules](#) on the ForwardHealth Portal.

Related to Alert [050](#): Procedure Codes for Vaccine Counseling and COVID-19 Vaccine Home Administration (12/15/21)

As of May 12, 2023, ForwardHealth continues to cover the following procedure codes for vaccine counseling and home administration of COVID-19 vaccines until future notice:

- 99401 (Preventive medicine counseling)
- M0201 (COVID-19 vaccine home administration)

Related to Alert [055](#): ForwardHealth Will Reimburse Place of Service Code 17 on Claims for COVID-19 Vaccination (1/26/22)

As of May 12, 2023, ForwardHealth will continue to cover administration of COVID-19 vaccines administered in walk-in retail clinics.

Related to Alert [058](#): Coverage Reminder for At-Home, Rapid COVID-19 Tests and for COVID-19 Vaccines Administered by Pharmacies (3/1/22) and Update [2022-06](#): ForwardHealth Coverage of At-Home, Rapid COVID-19 Test Kits (02/01/22)

As of May 12, 2023, ForwardHealth continues to cover at-home, rapid COVID-19 tests and COVID-19 vaccines administered by pharmacies.

Related to Update [2020-34](#): Ensuring Appropriate COVID-19 Testing (8/7/20)

As of May 12, 2023, ForwardHealth guidance regarding diagnostic testing for COVID-19 continues as outlined in Update 2020-34.

THE KEY MESSAGE

This Update provides information about ForwardHealth coverage of COVID-19 vaccines, treatments, and laboratory services after the end of the COVID-19 PHE.

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Related to Alerts and Updates Regarding COVID-19 Vaccines

As of May 12, 2023, COVID-19 vaccines and associated policies outlined in the following Alerts and Updates continue to be covered by ForwardHealth:

- Alert [034](#): New Procedure Codes for Johnson & Johnson Single-Dose COVID-19 Vaccine Effective February 27, 2021 (3/9/21)
- Alert [039](#): Reimbursement Resumed for Administration of Johnson & Johnson COVID-19 Vaccine (5/4/21)
- Alert [041](#): Pfizer Vaccine Approved for Members Aged 12 to 15 (5/17/21)
- Alert [045](#): Administration of an Additional Dose of COVID-19 Vaccine (9/21/21)
- Alert [056](#): Expanded Coverage for COVID-19 Vaccines (1/26/22)
- Alert [059](#): New Procedure Codes for COVID-19 Vaccine and Vaccine Administration (3/16/22)
- Alert [062](#): Coverage of Second COVID-19 Vaccine Booster Dose and Access to Therapeutics (4/28/22)
- Alert [063](#): Pfizer-BioNTech Booster Dose Approved for Members Aged 5 to 11 (5/24/22)
- Alert [065](#): Coverage of Novavax COVID-19 Vaccine (7/28/22)
- Alert [066](#): Coverage of Moderna COVID-19 Vaccine for Members Aged 6 Through 17 Years (8/22/22)
- Alert [067](#): Coverage of Novavax COVID-19 Vaccine for Members Aged 12 Through 17 Years (8/31/22)
- Alert [069](#): Changes to Coverage of Monovalent COVID-19 Vaccine Booster Doses for Members Aged 12 Years and Older and Coverage of Bivalent COVID-19 Vaccine Booster Doses (10/11/22)
- Alert [072](#): Revised Procedure Code Descriptions for COVID-19 Vaccines Approved for Members Aged 6 Months Through up to 5 Years (2/17/23)
- Update [2021-01](#): COVID-19 Vaccine Billing and Reimbursement (1/7/21)
- Update [2021-09](#): COVID-19 Vaccine Policy and Coverage Clarifications (3/4/21)

For more information regarding ForwardHealth-covered COVID-19 vaccines and vaccine administration codes, refer to the [interactive fee schedules](#).

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Temporary Policies to Continue Until Future Notice

Related to Alert [040](#): COVID-19 Vaccine and COVID-19 Vaccine Administration Coverage Under Tuberculosis-Related Medicaid and Family Planning Only Limited Benefit Plans (5/11/21)

As of May 12, 2023, COVID-19 vaccine and vaccine administration will continue to be a covered benefit under the Tuberculosis-Related Medicaid limited benefit plan and the Family Planning Only limited benefit plan until future notice.

Related to Update [2022-35](#): Prior Authorization and Utilization Management Exceptions for COVID-19-Related Medical Services (9/26/22)

As of May 12, 2023, ForwardHealth's guidance regarding requesting exceptions to limits on the amount, duration, or scope for services to treat a COVID-19-related medical condition will continue until future notice. Providers requesting medical services or items above current caps or exclusions for services requiring prior authorization (PA) should indicate this information in the Additional Comments section of the service-specific PA form. Providers who need to request a COVID-19-related treatment exception to current caps or exclusions for medical services or items that do not typically require PA should submit a PA request to dhscovidtreatmentrequest@dhs.wisconsin.gov.

Related to Update [2022-36](#): Prior Authorization and Utilization Management Exceptions for Drugs and COVID-19-Related Treatment (9/26/22)

As of May 12, 2023, ForwardHealth continues PA and utilization management exception policies for drugs and COVID-19-related treatment without member cost sharing as outlined in Update 2022-36 until future notice. This includes specialized equipment, therapies (including preventive therapies), treatment of any condition that may seriously complicate the treatment of COVID-19, treatment for individuals diagnosed with or presumed to have COVID-19, and treatments for post-COVID-19 conditions, often called "long COVID."

Note: Temporary emergency supply options outlined in Update 2022-36 ended on dates of service (DOS) on and after December 1, 2022. More information is available in Update [2022-46](#), "Return to Certain Pre-COVID-19 Pharmacy Policies Effective December 1, 2022."

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Assisting Members During Unwinding

During routine operations, DHS asks members to provide updated information about themselves once a year and renew their participation in Medicaid if they still qualify. During the COVID-19 PHE, temporary policy was enacted so states would keep people enrolled unless they died, moved out of state, or asked to be removed from their program. The federal Consolidated Appropriations Act, 2023, passed in December 2022, ended that policy.

In April 2023, Wisconsin began a year-long process of updating information from each member and determining if they meet the rules for their current program or if they will need to transition to another kind of coverage. This is called a renewal. Members received a letter in March or April telling them when their renewal is due in the next 14 months. Then, 45 days before their due date, they will get a renewal packet with further instructions.

Note: Members should not renew until they receive their renewal packet. Under federal guidelines, DHS must keep members covered until their next renewal. Renewing early could result in members losing coverage earlier than their assigned renewal date.

The [COVID-19 Unwinding Resources for Providers](#) Portal page includes resources for providers to share with members during the renewal process. Providers are encouraged to check this page often for up-to-date information regarding the member renewal process.

COVID-19 Unwinding Resources

For more information regarding COVID-19 Unwinding, refer to the following resources:

- ForwardHealth Update [2023-14](#), “Important Information Regarding the End of the COVID-19 Public Health Emergency”
- The [COVID-19: ForwardHealth News and Resources page](#) of the ForwardHealth Portal (includes all Unwinding provider communications)
- The [COVID-19 Unwinding Resources for Providers page](#) of the Portal (provider resources for assisting members through Unwinding)

Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to DHS upon request. Per Wis.

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Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by DHS for verification of provider claims for reimbursement. DHS may audit such records to verify the actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to COVID-19 vaccines, treatments, and laboratory services that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.