

ForwardHealth Updates	Affected Programs*					
	ADAP	BC+	Med	SC	WCDP	WWWP
Ambulatory Surgical Center Access Payments Discontinued for Fiscal Year 2016 (2016-29)		✓	✓			
Managed Care Program Length-of-Stay Policy Change for Institutions for Mental Disease (2016-27)		✓	✓			
Prior Authorization No Longer Required for Cochlear Implant and Bone-Anchored Hearing Device Implant Surgeries (2016-28)		✓	✓			
Pharmacy Policy Changes Effective August 1, 2016 (2016-30)		✓	✓	✓		
Policy Regarding Submission of Hospital Claims for Births (2016-31)		✓	✓			
Revised Prior Authorization Forms and Changes to Pharmacy Policies for Hepatitis C Agents Effective August 1, 2016 (2016-32)		✓	✓	✓		

### Managed Care Program Length-of-Stay Policy Change for Institutions for Mental Disease

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Institutions for Mental Disease, Nursing Facilities, HMOs and Other Managed Care Programs

On May 6, 2016, the Centers for Medicare and Medicaid Services (CMS) published the Medicaid and Children's Health Insurance Program (CHIP) Managed Care Final Rule (CMS 2390-F), which impacts Wisconsin Medicaid and BadgerCare Plus managed care programs. As a result of the Final Rule, ForwardHealth is changing its managed care program policy regarding length of stays at institutions for mental disease in lieu of traditional psychiatric intervention, effective July 5, 2016. This *Update* communicates initial information about the policy change while further guidance from CMS is pending.

**Update number:**  
2016-27

**\*Affected Programs Key:**

ADAP = Wisconsin AIDS Drug Assistance Program  
BC+ = BadgerCare Plus  
Med = Medicaid  
SC = SeniorCare  
WCDP = Wisconsin Chronic Disease Program  
WWWP = Wisconsin Well Woman Program

### Ambulatory Surgical Center Access Payments Discontinued for Fiscal Year 2016

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Ambulatory Surgery Centers, HMOs and Other Managed Care Programs

The Department of Health Services is discontinuing ambulatory surgical center (ASC) access payments for ASC claims received and processed on and after July 8, 2016, for dates of service from July 1, 2015, through June 30, 2016.

**Update number:**  
2016-29

### Policy Regarding Submission of Hospital Claims for Births

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Hospital Providers, HMOs and Other Managed Care Programs

Effective for hospital claims with "To" dates of service and dates of discharge on and after July 29, 2016, when a woman gives birth, the hospital provider is required to submit separate claims for the hospital stay of the woman and the hospital stay of her newborn. In addition, the newborn's birth weight must only be recorded on the newborn's claim using Value Code 54.

**Update number:**  
2016-31

### Pharmacy Policy Changes Effective August 1, 2016

**Affected Programs:** BadgerCare Plus, Medicaid, SeniorCare

**To:** Blood Banks, Dentists, Federally Qualified Health Centers, Hospital Providers, Nurse Practitioners, Nursing Homes, Pharmacies, Physician Assistants, Physician Clinics, Physicians, Podiatrists, Rural Health Clinics, HMOs and Other Managed Care Programs

This *Update* provides information for prescribers and pharmacy providers about changes to the Preferred Drug List and other pharmacy policy changes effective for dates of service on and after August 1, 2016, unless otherwise noted.

**Update number:**  
2016-30

### Prior Authorization No Longer Required for Cochlear Implant and Bone-Anchored Hearing Device Implant Surgeries

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Ambulatory Surgery Centers, Audiologists, Federally Qualified Health Centers, Hearing Instrument Specialists, Hospital Providers, Individual Medical Supply Providers, Medical Equipment Vendors, Pharmacies, Physician Clinics, Physicians, Rehabilitation Agencies, Speech and Hearing Clinics, Speech-Language Pathologists, Therapy Groups, HMOs and Other Managed Care Programs

Effective for dates of service on and after September 1, 2016, prior authorization will no longer be required for cochlear implant surgery and bone-anchored hearing device implant surgery.

**Update number:**  
2016-28

# Revised Prior Authorization Forms and Changes to Pharmacy Policies for Hepatitis C Agents Effective August 1, 2016

**Affected Programs:** BadgerCare Plus, Medicaid, SeniorCare

**To:** Blood Banks, Dentists, Federally Qualified Health Centers, Hospital Providers, Nurse Practitioners, Nursing Homes, Pharmacies, Physician Assistants, Physician Clinics, Physicians, Podiatrists, Rural Health Clinics, HMOs and Other Managed Care Programs

This *Update* announces revisions to the Prior Authorization Drug Attachment for Hepatitis C Agents form, F-01247 (08/2016), and the Prior Authorization Drug Attachment for Hepatitis C Agents Renewal form, F-01248 (08/2016), to accommodate the revised hepatitis C agents clinical criteria that was published in the July 2016 *ForwardHealth Update* (2016-22), titled “July 2016 Preferred Drug List Review and Other Pharmacy Policy Changes.” In addition, this *Update* provides information for prescribers and pharmacy providers about the following, effective for dates of service on and after August 1, 2016:

- Changes to pharmacy policies for hepatitis C agents
- The addition of Epclusa® as a non-preferred drug to the hepatitis C agents drug class of the Preferred Drug List

**Update number:**

2016-32

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