

ForwardHealth Updates	Affected Programs*					
	ADAP	BC+	Med	SC	WCDP	WWWP
Documentation Requirements for Evaluation and Management Procedure Codes (2016-45)		✓	✓			
ForwardHealth Coverage and Prior Authorization Policy for Personal Continuous Glucose Monitoring Devices and Accessories (2016-48)		✓	✓			
Hospice Reimbursement Rate Changes (2016-47)		✓	✓			
Hospital Access Payments Discontinued for State Fiscal Year 2016 (2016-49)		✓	✓			
Information for Eligible Hospitals Regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program (2016-42)		✓	✓			
Information for Eligible Professionals Regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program (2016-41)		✓	✓			
Inpatient Hospital Pricing Changing to the All Patient Refined Diagnosis Related Group Classification System (2016-43)		✓	✓		✓	
Revised Hearing Aid Contract Models and Pricing Effective September 2016 (2016-46)		✓	✓			
Revised Prior Authorization and Coverage Policy for Bariatric Surgery (2016-44)		✓	✓			

ForwardHealth Coverage and Prior Authorization Policy for Personal Continuous Glucose Monitoring Devices and Accessories

Affected Programs: BadgerCare Plus, Medicaid
To: Federally Qualified Health Centers, Medical Equipment Vendors, Nurse Practitioners, Pharmacies, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

Effective for dates of service on and after January 1, 2017, ForwardHealth will cover personal continuous glucose monitoring devices, transmitters, and sensors in certain circumstances. This *Update* announces the prior authorization and coverage guidelines for personal continuous glucose monitoring devices, transmitters, and sensors.

Update number:
2016-48

***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

Documentation Requirements for Evaluation and Management Procedure Codes

Affected Programs: BadgerCare Plus, Medicaid
To: Adult Mental Health Day Treatment Providers, End-Stage Renal Disease Service Providers, Family Planning Clinics, HealthCheck Providers, HealthCheck “Other Services” Providers, Intensive In-Home Mental Health and Substance Abuse Treatment Services for Children Providers, Narcotic Treatment Services Providers, Nurse Midwives, Nurse Practitioners, Nurses in Independent Practice, Outpatient Substance Abuse Clinics, Physician Assistants, Physician Clinics, Physicians, Podiatrists, Substance Abuse Day Treatment Providers, HMOs and Other Managed Care Programs
 This *Update* announces documentation requirements for evaluation and management procedure codes.

Update number:
2016-45

Hospice Reimbursement Rate Changes

Affected Programs: BadgerCare Plus, Medicaid

To: Hospice Providers, HMOs and Other Managed Care Programs

Effective for dates of service on and after October 1, 2016, Wisconsin Medicaid and BadgerCare Plus hospice reimbursement rates have changed.

Update number:
2016-47

Hospital Access Payments Discontinued for State Fiscal Year 2016

Affected Programs: BadgerCare Plus, Medicaid

To: Hospital Providers, HMOs and Other Managed Care Programs

The Department of Health Services will discontinue providing hospital and critical access hospital access payments for the remainder of state fiscal year 2016. This applies to inpatient and outpatient hospital claims with a date of receipt after October 28, 2016, and dates of service (DOS) between July 1, 2015, and June 30, 2016. Access payments for inpatient and outpatient hospital claims for DOS on and after July 1, 2016, are not affected by this change.

Update number:
2016-49

Information for Eligible Hospitals Regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program

Affected Programs: BadgerCare Plus, Medicaid

To: Hospital Providers, HMOs and Other Managed Care Programs

This *Update* provides information for Eligible Hospitals regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program.

Update number:
2016-42

Information for Eligible Professionals Regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program

Affected Programs: BadgerCare Plus, Medicaid

To: Advanced Practice Nurse Prescribers with Psychiatric Specialty, Dentists, Nurse Midwives, Nurse Practitioners, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

This *Update* provides information for Eligible Professionals regarding Program Year 2016 of the Wisconsin Medicaid Electronic Health Record Incentive Program.

Update number:

2016-41

Inpatient Hospital Pricing Changing to the All Patient Refined Diagnosis Related Group Classification System

Affected Programs: BadgerCare Plus, Medicaid, WCDP-Adult Cystic Fibrosis, WCDP-Chronic Renal Diseases

To: Hospital Providers, HMOs and Other Managed Care Programs

Effective for dates of discharge or “To” dates of service on and after January 1, 2017, ForwardHealth is implementing the All Patient Refined Diagnosis Related Group (APR DRG) classification system for pricing inpatient hospital fee-for-service claims, Medicare crossover claims, and HMO encounters.

Update number:

2016-43

Revised Hearing Aid Contract Models and Pricing Effective September 2016

Affected Programs: BadgerCare Plus, Medicaid

To: Audiologists, Hearing Instrument Specialists, Speech and Hearing Clinics, HMOs and Other Managed Care Programs

Effective for hearing aids dispensed on and after September 1, 2016, ForwardHealth has implemented annual manufacturer revisions on the volume purchase contracts for hearing aids. This *Update* provides information about the hearing aid models and purchase rates now available through the volume purchase contract.

Update number:

2016-46

Revised Prior Authorization and Coverage Policy for Bariatric Surgery

Affected Programs: BadgerCare Plus, Medicaid

To: Hospital Providers, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

Effective for dates of service on and after December 1, 2016, prior authorization (PA) requirements will be revised for bariatric surgery and revision or repeat bariatric surgery. This *Update* outlines the new PA requirements and coverage policy for bariatric surgery and revision or repeat bariatric surgery.

Update number:

2016-44

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