Wisconsin Medicaid and BadgerCare Information for Providers

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PHC 1724

One percent reimbursement increase for noninstitutional services - Effective July 1, 2000

To:
AODA Counselors
Ambulances
Anesthetists
Audiologists
Blood Banks
Chiropractors

DME Vendors
Family Planning Clinics
Federally Qualified Health
Centers
Hearing Instrument Specialists
HealthCheck Agencies
HealthCheck "Other Services"
Home Health Agencies
Hospices

Independent Laboratories Master's-Level Therapists Mental Health/Substance **Abuse Clinics** Mental Health/Substance Abuse Day Treatment **Providers** Nurse Midwives **Nurse Practitioners** Nurses in Independent Practice Occupational Therapists Opticians Optometrists Orthotists Personal Care Providers **Physical Therapists**

Physician Assistants **Physicians Podiatrists Prosthetists** Portable X-Ray Providers Prenatal Care Coordination **Providers** Psychologists, Ph.D.s Rehabilitation Agencies Respiratory Therapists Rural Health Clinics Speech and Hearing Clinics Speech Language Pathologists **SMV Transportation Providers** Therapy Groups HMOs and Other Managed Care **Programs**

Effective for dates of service on or after July 1, 2000, maximum allowable fees for the services listed in the Attachment of this *Update* will increase 1%, as authorized by provisions of 1999 Wisconsin Act 9, the biennial budget.

The information in this *Update* applies to feefor-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for rate information. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements. Providers may obtain updated maximum fee schedules from Wisconsin Medicaid. Refer to the All-Provider Handbook for ordering instructions. Provider handbooks, *Updates*, and maximum allowable fee schedules can be downloaded from the Medicaid Web site at *www.dhfs.state.wi.us/medicaid/*.

Recipient copayment

For those services that require recipient copayment, the copayment amount for a particular service may change if the Medicaid maximum allowable fee for that service increases to the next highest copayment level.

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Providers should verify that they are charging the correct copayment amount for each service. Generally for most services, the following copayment chart applies.

Each service costing:

Up to \$10.00 \$0.50 copayment
From \$10.01 to \$25.00 \$1.00 copayment
From \$25.01 to \$50.00 \$2.00 copayment
Over \$50.00 \$3.00 copayment

For more detailed information about copayments (including copayment guidelines and exceptions), refer to *Medicaid Update* 98-26.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.

ATTACHMENT One Percent Reimbursement Increase for Services

Provisions of 1999 Wisconsin Act 9, the biennial budget, authorized a 1% increase in reimbursement for the following services for dates of service on or after July 1, 2000.

Physician and Related Services

Anesthesiology.

Family planning services.

Laboratory services (not to exceed Medicare Part B

rates).

Nurse practitioner services.

Physician services.

Physician assistant services.

X-ray services.

Home Health and Related Services

Home health services.

Personal care supervisory visits.

Private-duty nursing services.

Respiratory care services.

Medical Equipment, Supplies, and Related Services

Disposable medical supplies.

Durable medical equipment.

Hearing aids.

Mental Health, Substance Abuse (Alcohol and Other Drug Abuse), and Related Services

Adult mental health day treatment.

Substance abuse day treatment.

Child/Adolescent day treatment.

Clozapine management.

In-home psychotherapy for children.

In-home psychotherapy for children with severe emotional

disturbance.

Mental health/Substance abuse evaluation and

psychotherapy services.

Therapy and Related Services

Audiology services.

Occupational therapy.

Physical therapy.

Rehabilitation agency services.

Speech-language pathology services.

Other Services

Chiropractic services.

Dental services.

HealthCheck Services.

HealthCheck "Other Services."

Immunization administration fees.

Laboratory handling fees.

Podiatry services.

Prenatal care coordination (including Milwaukee Child

Care Coordination).

Transportation services.

Tuberculosis-related services.

Vision services.