April 2000 PHC 1715

Wisconsin Medicaid and BadgerCare Information for Providers

Providers are to bill Wisconsin Medicaid their usual and customary charges

This *Update* topic only affects the providers listed below.

To:

Ambulance Providers

Anesthetists

Ambulatory Surgical Centers

Audiologists **Blood Banks**

Case Management Providers

Chiropractors **Dentists DME Vendors**

End-Stage Renal Disease Providers

Family Planning Clinics

Hearing Instrument Specialists

HealthCheck Agencies Home Health Agencies

Laboratories (Independent)

Mental Health/Substance Abuse

Clinics

Mental Health/Substance Abuse

Day Treatment Providers Nurse Anesthetists (CRNA)

Nurses in Independent Practice

Nurse Midwives **Nurse Practitioners** Occupational Therapists

Opticians Optometrists Orthotists

Personal Care Agencies

Pharmacies

Physical Therapists

Physicians

Physician Assistants

Podiatrists Prosthetists

Prenatal Care Coordinators

Psychiatrists

Psychologists

Psychotherapists Rehabilitation Agencies

Respiratory Therapists Rural Health Clinics

Speech and Hearing Clinics

Speech and Language Pathologists

Specialized Medical Vehicle Providers

Substance Abuse Providers Therapy Groups

X-Ray Providers (Portable)

Providers are required to bill their usual and customary charges for services provided. The following Update serves to reiterate current billing requirements and Terms of Reimbursement.

Wisconsin Medicaid's billing requirements reviewed

Providers listed above are required to bill Wisconsin Medicaid their usual and customary charge. The usual and customary charge is the provider's charge for providing the same service to persons not entitled to Medicaid benefits. For providers using a sliding fee scale for specific services, the usual and customary charge is the median of the individual provider's charge for

the service when provided to non-Medicaid patients. Under section 49.43(1m), Wis. Stats., "charge" means "the customary, usual and reasonable demand for payment as established prospectively, concurrently or retrospectively," which may not "exceed the general level of charges by others who render such services or care, or provide such commodities, under similar or comparable circumstances within the community in which the charge is incurred."

For providers that have not established usual and customary charges, Medicaid charges should be reasonably related to the provider's cost to provide the services.

Inside this Update:

Phone number correction

Reporting suspected recipient misuse or abuse of Wisconsin Medicaid benefits

List of agencies and the special managed care program(s) they support

What's new on the Medicaid Web site

Wisconsin Medicaid and BadgerCare Update sent to recipients

Terms of Reimbursement agreement

As part of Wisconsin Medicaid certification, providers sign an agreement to:

- Bill Wisconsin Medicaid in accordance with Wisconsin Medicaid requirements, including billing usual and customary charges by most providers.
- Accept Wisconsin Medicaid's Terms of Reimbursement.

Medicaid payment

Wisconsin Medicaid reimburses fee-for-service providers the lesser of the following:

- Medicaid's maximum allowable fee for the service.
- 2. The provider's usual and customary charge.

This *Update* applies to fee-for-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for more information about their billing procedures. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements. •

Phone number correction

The February 2000 *Wisconsin Medicaid and BadgerCare Update*, Attachment 1, listed an incorrect phone number for the St. Croix County Human Services transportation contact.

The correct phone number for St. Croix County Human Services is (715) 246-8337.

Wisconsin Medicaid and BadgerCare regrets any confusion this may have caused. +

Reporting suspected recipient misuse or abuse of Wisconsin Medicaid benefits

Providers who suspect recipient misuse or abuse of Wisconsin Medicaid benefits are required to report the behavior to the Division of Health Care Financing (DHCF). This Update describes the law regarding the release of patient health care records for this purpose. Wisconsin Medicaid supports recipient rights regarding the confidentiality of health care records and is releasing this Update to ensure protection of such rights.

Recipient misuse or abuse of Wisconsin Medicaid benefits

Section 49.49, Wis. Stats., defines actions that represent recipient misuse or abuse of Wisconsin Medicaid benefits and the resulting sanctions that may be imposed. A list of actions considered misuse or abuse are included in HFS 104.02(5), Wis. Admin. Code, and can be found on the Wisconsin Legislature Web site at www.legis.state.wi.us/. Some examples of recipient misuse or abuse are:

- Duplicating or altering prescriptions.
- Knowingly misrepresenting material facts as to medical symptoms for the purpose of obtaining any covered services.
- Knowingly obtaining duplicate services through more than one provider for the same health care condition, excluding confirmation of diagnosis or a second opinion on surgery.

Recipients who misuse or abuse Medicaid benefits may have their choice of providers restricted (Recipient Lock-In Program) or may have their benefits limited or terminated.

Continued on page 5

ecipients who

misuse or

abuse Medicaid

have their choice

(Recipient Lock-

In Program) or

may have their

terminated.

benefits limited or

benefits may

of providers

restricted

List of agencies and the special managed care program(s) they support

If you are not part of (a special managed care program) provider network, contact the respective agency prior to providing services to an enrollee.

In addition to state-contracted HMOs that serve over 185,000 low-income children and families, Wisconsin Medicaid also has seven special managed care programs that provide services to over 4,800 individuals. (Refer to the October 1998 Wisconsin Medicaid Update for more information.)

The following is a list of agencies that operate the Medicaid special managed care programs. Providers may use Wisconsin Medicaid's Eligibility Verification System (EVS) to determine if a recipient is enrolled in a special managed care program. If you are not part of its provider network, contact the respective agency prior to providing services to an enrollee.

Agency: Community Care Organization, Inc.

Programs: Community Care for the Elderly

(CCE) - PACE

Community Care for the Elderly

(CCE) – Partnership

Address: Community Care Organization, Inc.

1555 South Layton Boulevard

Milwaukee, WI 53215

Phone: (414) 385-6600

Target population: People with disabilities, age

55 or above.

Medicaid services covered: All Medicaid

services.

County served: Milwaukee Managed care code: 65

Agency: Community Health Partnership

Program: Wisconsin Partnership

Address: Community Health Partnership

2240 East Ridge Center Eau Claire, WI 54701

Phone: (715) 838-2900

Target population: People with physical disabilities, who are age 18 to 64, and people, with or without disabilities, over age

65.

Medicaid services covered: All Medicaid services.

Counties served: Chippewa, Dunn, Eau Claire

Managed care code: 67

Agency: Community Living Alliance, Inc.

Program: Wisconsin Partnership

Address: Community Living Alliance, Inc.

1310 Mendota Street Madison, WI 53714

Phone: (608) 242-8335

Target population: People with physical disabilities, who are age 18 to 64.

Medicaid services covered: All Medicaid

services.

County served: Dane Managed care code: 63

Agency: Dane County Department of

Human Services

Program: Children Come First (CCF)Address: Dane County Human Services

Children Come First Program

1202 Northport Drive Madison, WI 53704-2092

Phone: (608) 242-6206

Target population: Medicaid recipients through age 18 with a diagnosis of severe emotional disturbance and who are at risk of institutional placement.

Medicaid services covered: Mental health, alcohol and other drug abuse treatment, and targeted case management. All other Medicaid services remain billable as fee-for-service.

County served: Dane Managed care code: 64 Agency: Elder Care of Dane County, Inc.

Programs: Elder Care Options (ECO) -

PACE

Elder Care (EC) – Partnership

Address: Elder Care of Dane County, Inc.

2802 International Lane Madison, WI 53704

Phone: (608) 240-0020

Target population: People with disabilities, age 55 or above, and people, with or without

disabilities, over age 65.

Medicaid services covered: All Medicaid

services.

County served: Dane Managed care code: 69

Agency: Humana

Programs: Independent Care (I-Care)

Address: Independent Care

1555 N. RiverCenter Drive,

Suite 202A

Milwaukee, WI 53212-3958

Phone: (414) 223-4847

Target population: SSI and SSI-related Medicaid recipients over age 15.

Medicaid services covered: All Medicaid services including care coordination.

Prenatal care coordination, school-based,

targeted case management, and chiropractic services are billable as fee-for-service.

County served: Milwaukee Managed care code: 66

Agency: Milwaukee County Mental Health Division

Programs: Wraparound Milwaukee (WAM)

Address: Wraparound Milwaukee

Milwaukee County Mental Health 9501 W. Watertown Plank Road

Wauwatosa, WI 53226

Phone: (414) 257-6847

Mobile Urgent Treatment Team - (414) 257-7621 (24 hours, for youth

up to age 18)

Target population: Medicaid recipients through age 18 with a diagnosis of severe emotional disturbance and who are at risk of institutional placement.

Medicaid services covered: Mental health, alcohol and other drug abuse treatment, and targeted case management services. All other Medicaid services remain billable as

fee-for-service.

County served: Milwaukee Managed care code: 62 +

Reporting suspected recipient misuse or abuse

Continued from page 2

Laws regarding the release of patient health care records

Section 146.82, Wis. Stats., states "All patient health care records shall remain confidential. Patient health care records may be released only (to designated persons) with the informed consent of the patient or of a person authorized by the patient."

However, a health care provider is required under section 146.82 (2)(a)5, Wis. Stats., to release patient health care records without informed consent if a written request is made to the provider by any federal or state governmental agency to perform a legally authorized function, such as program monitoring and evaluation. This clause, in conjunction with this *Update* (as the written request), makes it mandatory for providers to report suspected misuse or abuse of Medicaid benefits as well as release patient health care records without informed consent.

Notify the Division of Health Care Financing

Providers are required to notify the Division of Health Care Financing (DHCF) regarding suspected cases of recipient misuse or abuse of Wisconsin Medicaid benefits. Referrals may be made by calling Provider Services at either (800) 947-9627 or (608) 221-9883 or by writing the following office:

Division of Health Care Financing Bureau of Health Care Program Integrity P.O. Box 309 Madison, WI 53701-0309 +

What's new on the Medicaid Web site

The Wisconsin Medicaid Web site includes provider and recipient publications, Medicaid contacts and statistics, and eligibility and benefit information. You may visit the Medicaid Web site at www.dhfs.state.wi.us/medicaid/.

The following is a list of what has recently been added to the Medicaid Web site:

- April 2000 Wisconsin Medicaid and BadgerCare Update.
- Wisconsin Medicaid and BadgerCare
 Update titled "New ADA claim form and Medicaid billing instructions."
- Wisconsin Medicaid and BadgerCare Update titled "School-based services transportation coverage changes."
- HealthCheck Screening Services provider handbook.
- Replacement pages for the Pharmacy Services provider handbook.
- Wisconsin Medicaid Purchase Plan publications.
- Updated Medicaid and BadgerCare caseload statistics.
- County and tribal transportation coordinator phone number information.

Keep in mind that if you do not have a computer with Internet access, many libraries have access available. +

roviders are

required to

of Health Care

notify the Division

Financing (DHCF)

Wisconsin Medicaid and BadgerCare Update sent to recipients

Wisconsin Medicaid recently sent a special edition of the *Wisconsin Medicaid and BadgerCare Update* to all Medicaid recipients. The *Update* featured articles regarding Medicaid programs as well as a special insert to those recipients most affected by recent changes made to the Estate Recovery Program.

For a copy of this recipient publication, refer to the Recipient Publications page of the Medicaid Web site at www.dhfs.state.wi.us/medicaid/requbs/.

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/.



Dept. of Health & Family Services Division of Health Care Financing 1 West Wilson Street PO Box 309 Madison, WI 53701-0309

BULK RATE US Postage PAID Madison, WI 53713 Permit No. 2836