

## Notify Wisconsin Medicaid when changing addresses

Providers are required to notify Wisconsin Medicaid when they change their physical and/or payee addresses.

### Change in address

Wisconsin Medicaid requires that providers send written notice of address changes immediately after moving. Because of the amount of information required to change an address, Wisconsin Medicaid strongly urges providers to use the Wisconsin Medicaid Provider Change of Address or Status Form. This form is located in the Provider Certification section of the All-Provider Handbook and on the Medicaid Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/) (refer to the sidebar for instructions on how to access the form from the Web).

The provider's signature is required on all requests to change the provider file. Entering the new address information on a claim form or prior authorization request is *not* notification of change. Failure to properly notify Wisconsin Medicaid of an address change may result in:

- Misdirected payment.
- Claim denial.
- Suspension of payment in the event provider mail is returned to Wisconsin Medicaid for lack of a current address.

*Notify the Bureau of Quality Assurance of physical address changes*

Providers who are also licensed by the Department of Health and Family Services, Division of Supportive Living, Bureau of Quality Assurance (BQA) are also required to notify the BQA of any changes in physical address and/or provider status. Wisconsin Medicaid will not change a provider's physical address and/or provider status until the provider has notified BQA. For more information about BQA notification, please call (608) 266-3024 between 7:45 a.m. and 4:30 p.m., Monday through Friday.

### Questions

For questions regarding the Wisconsin Medicaid Provider Change of Address or Status Form, contact Provider Services at (800) 947-9627 or (608) 221-9883. ✦

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To access the Wisconsin Medicaid Provider Change of Address or Status Form from the Medicaid Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/):

1. Select Provider Handbooks from the main menu.
2. Choose to view either the interactive, text-only, or PDF version of the All-Provider Handbook.
3. Select the Provider Certification section.  
Select "Appendix 1: Wisconsin Medicaid Provider Change of Address or Status Form."

# Always check a pregnant woman's Medicaid eligibility for HMO enrollment

This *Update* article reminds providers to check a woman's Medicaid eligibility for HMO enrollment *at each appointment* throughout her pregnancy. To ensure continuity of care, some recipients may qualify for an HMO exemption.

## Check eligibility for HMO enrollment

It is important for providers to verify Medicaid eligibility for HMO enrollment every time care is provided to a pregnant woman because most Medicaid-eligible pregnant women will be required to choose an HMO. For example, a provider who verifies a woman's eligibility early in her pregnancy may find that she is a Medicaid fee-for-service recipient. However, by the time she is ready to deliver her baby, she may be enrolled in an HMO, which would then be responsible for her care. In this situation, the HMO may deny payment to the provider for care unless the provider is part of the HMO's provider network or has received written approval from the HMO to treat the recipient.

## Temporary HMO exemptions for qualifying pregnant women

Some pregnant women may qualify for a temporary HMO exemption. Exemptions allow recipients to complete a course of treatment with a provider who is not contracted with the recipient's HMO. For example, women in high-risk pregnancies or women who are in their third trimester of pregnancy *may* qualify for an exemption.

Providers with exemption questions should call a Medicaid HMO Contract Monitor at (800) 760-0001. Recipients with any questions regarding Medicaid HMOs should call a Medicaid Enrollment Specialist at (800) 291-2002. ✦

# Medicare managed care services not reimbursable by Wisconsin Medicaid

Providers have asked whether or not Wisconsin Medicaid will provide additional reimbursement for services first paid by a *Medicare* managed care program. According to 49.46(2)(c)2, Wis. Stats., Wisconsin Medicaid is *not* responsible for any additional reimbursement for services that were first paid by a *Medicare* managed care program. *Note:* Providers may not hold recipients responsible for *Medicare* copayment amounts, but recipients are responsible for Medicaid copayments as noted in the All-Provider Handbook.

The *Medicare* managed care programs in Wisconsin and the insurance companies they are associated with are included in the Attachment to this *Update*.

Wisconsin Medicaid will continue to process *Medicare* crossover claims for coinsurance and deductibles for dual entitlements having *Medicare* Part A, Part B, or both. Refer to the Coordination of Benefits section of the All-Provider Handbook for more information on billing for recipients eligible for both *Medicare* and Wisconsin Medicaid and for correct disclaimer usage.

Refer to the sidebar for program definitions. ✦

**Medicaid**  
Medicaid is a joint federal/state program established in 1965 under Title XIX of the Social Security Act to pay for medical services for people with disabilities, people 65 years and older, children and their caretakers, and pregnant women who meet the program's financial requirements.

**Medicare**  
Medicare is a national health insurance program for people 65 years of age and older, certain younger people with disabilities, and people with kidney failure.

# Reminder: HIPAA information-sharing sessions scheduled for May and June

In the March 2001 *Wisconsin Medicaid and Badger Care Update*, we told you about the information-sharing sessions that the Wisconsin Division of Health Care Financing (DHCF) has scheduled for May and June. These sessions are designed to introduce the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA). During these sessions we will also discuss ways in which HIPAA will change the way you exchange health care information with DHCF-administered health care programs, both electronically and on paper. The same information will be covered during each session.

The information-sharing sessions are free of charge and open to billing vendors, Medicaid HMOs and other managed care programs, as well as providers participating in the following Wisconsin health care programs:

- Medicaid/BadgerCare.
- Health Insurance Risk Sharing Plan (HIRSP).

**P**roviders can now search for a key word or words within the Medicaid Web site, including provider *Updates* and handbooks.

## ATTENTION!

### HIPAA information-sharing sessions location change

The location for the Green Bay sessions scheduled for May 22 and 23 has changed.

The new location is:

Regency Suites and Conference Center  
333 Main Street  
Green Bay, Wisconsin  
(920) 432-4555

Seating is limited to a maximum of 200 seats per session at most sites, so please come early to the session you choose to attend. In an effort to accommodate everyone who

wishes to participate, the DHCF will sponsor multiple sessions each day. To minimize the effects of the seating limitations, the DHCF asks that no more than two representatives from each facility attend.

For a complete list of dates, times, and locations of upcoming sessions, please refer to the *March Update* or go to the Medicaid Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/). ✦

## 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/](http://www.dhfs.state.wi.us/medicaid/).

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

- April 2001 *Wisconsin Medicaid and BadgerCare Update*.
- Updated Medicaid and BadgerCare caseload statistics.
- The ability to search the Medicaid Web site for a key word or words, including provider *Updates* and handbooks.

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

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/](http://www.dhfs.state.wi.us/medicaid/).

## ATTACHMENT

### Associations between Medicare managed care programs and insurance companies

Medicare managed care program	Insurance company
Medicare Blue	Blue Cross/Blue Shield
DeanCare Gold	Dean Health Plan, Inc.
G L Senior	Gundersen Lutheran Health Plan, Inc.
Medicare Advantage	Medical Associates Clinic Health Plan
Community Senior Plan & Network Senior Plus	Network Health Plan of Wisconsin, Inc.
United HealthCare	United HealthCare, Inc.
PrimeCare Gold	PrimeCare, Inc.