

2001 Medicaid/BadgerCare managed care forums offered

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The Division of Health Care Financing (DHCF) Bureau of Managed Health Care Programs (BMHCP) hosts managed care forums at locations around the state throughout the year. Any health care professional or other interested party who works with the Medicaid/BadgerCare HMO program may attend the forums.

Forums address Medicaid/BadgerCare HMO issues

Staff members from the Bureau of Managed Health Care Programs (BMHCP) host managed care forums for all interested parties who work with the Medicaid/BadgerCare HMO program. The mission of the forums is to:

- Inform the community about current issues and recent developments in the Medicaid/BadgerCare HMO program.
- Facilitate communication among all groups affected by the Medicaid/BadgerCare HMO program.
- Provide a platform for suggestions from the community to the Division of Health Care Financing about the Medicaid/BadgerCare HMO program.
- Exchange information on effective strategies for enhancing health care delivery.

Managed care forums are scheduled in five different Department of Health and Family

Services regions and in Milwaukee. Health care professionals or other interested parties are encouraged to attend a forum that is convenient for them. Many of the forum agenda items are general information topics.

Topics may include:

- Medicaid/BadgerCare program updates.
- Medicaid/BadgerCare HMO exemptions.
- Explanation of the grievance process by the Medicaid/BadgerCare HMO Ombudsmen.
- Information and assistance offered by the Medicaid/BadgerCare HMO enrollment broker.
- Regional HealthCheck issues.
- Presentation by the Division of Public Health's regional office.

Additionally, each region will have one forum, slightly longer in length, devoted to the Covering Kids program.

How to attend a forum

No registration or fee is necessary to attend these managed care forums. In case of inclement weather, please contact the BMHCP at (608) 266-7894 from 7:45 a.m. to 4:30 p.m. for information on delays or cancellations.

Refer to the Attachment to this *Update* for a complete list of the dates, times, and locations

of upcoming forums. If you, or someone you know, would like to suggest a forum topic or would like to be on the mailing list to receive a forum agenda, please contact Cindy Spratt at (608) 261-7834. ✦

The importance of distributing *Updates*

Wisconsin Medicaid encourages providers to distribute *Wisconsin Medicaid and BadgerCare Updates* to the appropriate staff within their organization.

When *Updates* are distributed everyone is kept informed

Wisconsin Medicaid and BadgerCare Updates are the first source of program policy and billing information for Wisconsin Medicaid providers. While *Updates* are intended primarily for providers, it is important that the information is shared with other staff. Some examples of affected staff include:

- Billing personnel.
- Department heads.
- Other medical professionals.

To ensure that *Updates* reach *all* affected staff, Wisconsin Medicaid encourages providers to distribute *Updates* as appropriate. Providers can download and print additional hard copies of *Updates* from the Wisconsin Medicaid Web site at www.dhfs.state.wi.us/medicaid/. Electronic versions of *Updates* from the Web can also be sent by e-mail to affected staff.

Providers without Internet access can call Provider Services at (800) 947-9627 or (608) 221-9883 to request additional copies of *Updates*.

Since *Updates* contain new and revised policy and billing information, providers should keep a copy of each for reference until a handbook containing the information is issued. ✦

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:

- February 2001 *Wisconsin Medicaid and BadgerCare Update*.
- Maximum allowable fee schedules for some providers.
- Updated Medicaid and BadgerCare caseload statistics.

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

To ensure that *Updates* reach *all* affected staff, Wisconsin Medicaid encourages providers to distribute *Updates* as appropriate.

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/.

Identifying Family Care members

It is very important for Medicaid fee-for-service providers to identify Family Care members because services covered by Family Care require Care Management Organization (CMO) authorization. Family Care is currently being piloted in Fond du Lac, Portage, La Crosse, Milwaukee, and Richland counties. This article provides information about identifying Family Care members and verifying eligibility through the Automated Voice Response (AVR) system or through eligibility verification technology supplied by a commercial eligibility verification vendor.

Services covered by Family Care require Care Management Organization authorization

If a Family Care member requires services covered under the Family Care benefit package, contact the Care Management Organization (CMO) to determine how the CMO will handle referrals and arrange for services. Contacting the CMO may be particularly important for physicians who may be prescribing/ordering services included in the Family Care benefit package (such as physical, occupational, or speech therapy, or durable medical equipment) because only the CMO can authorize those services. The CMO's telephone number will be given by the Automated Voice Response (AVR) system or a commercial eligibility verification vendor.

If a Family Care member requires services *not* covered under the Family Care benefit package, primary care providers should continue to provide these services to Family Care members and bill the services to:

1. Commercial insurance, if applicable.
2. Medicare, if eligible.
3. Wisconsin Medicaid fee-for-service, if eligible.

If the individual is not eligible for Medicaid, the provider should first bill the individual's commercial health insurance and Medicare, if applicable, and then submit the bill to the individual.

Family Care members who are eligible for Medicaid

Identification

Medicaid-eligible Family Care members receive Wisconsin Medicaid Forward cards. Since members can enroll in or disenroll from a CMO *at any time* during the month, providers should *always* verify member eligibility before providing services. Providers may access eligibility information through the AVR system or through a commercial eligibility verification vendor. Refer to the Provider Resources section of the All-Provider Handbook for detailed information on the methods of verifying eligibility.

Verification through the Automated Voice Response system

The AVR system will respond, "From <date> to <date>, recipient is enrolled in the Family Care program; this is not an HMO. The phone number is <CMO's phone number>. For additional assistance in determining Family Care benefits, press 0." During regular business hours, this connects providers to Wisconsin Medicaid's Provider Services.

Verification through commercial eligibility verification vendors

Wisconsin Medicaid certifies several commercial eligibility verification vendors to sell

If a Family Care member requires services covered under the Family Care benefit package, contact the Care Management Organization (CMO) to determine how the CMO will handle referrals and arrange for services.

real-time eligibility verification technology (e.g., magnetic stripe readers, computer software) and other services (e.g., Internet) to providers. When an individual is enrolled in Family Care, commercial eligibility verification vendors will provide:

1. The CMO's name and telephone number.
2. The Managed Care Program (MCP) code (57, 58, or 59). (The MCP code refers to the level of care the member qualifies for—intermediate, comprehensive, or grandfathered.)
3. The message "Family Care Program."

Family Care members who are not eligible for Medicaid

Identification

Not all Family Care members are eligible for Medicaid. Family Care members who are not eligible for Medicaid will be assigned an identification number but will *not* receive a Forward card. However, members who were previously eligible for Medicaid could still have a Forward card and may present it to providers. Therefore, the presentation of a Forward card does not necessarily indicate eligibility for Medicaid or enrollment in Family Care.

If a member does not present a Forward card, the provider may verify Family Care enrollment through the AVR system or a commercial eligibility verification vendor by entering the member's identification number into the system.

To obtain the identification number for a member who does not have or present a Forward card, the provider may do any of the following:

- Ask the member if he or she has a Family Care card from the CMO. (Some CMOs issue Family Care cards to their members.)

- Contact Wisconsin Medicaid's Provider Services (telephone correspondents) at (800) 947-9627 or (608) 221-9883.
- Contact the member's CMO.

Verification through the Automated Voice Response system

The AVR system will state, "From <date> to <date>, recipient is eligible only for services provided by the Family Care program. No Medicaid card services are available. For this period, recipient is enrolled in the Family Care program; this is not an HMO. The phone number is <CMO's phone number>. For additional assistance in determining Family Care benefits, press 0." During regular business hours, this connects providers to Wisconsin Medicaid's Provider Services.

Verification through commercial eligibility verification vendors

When an individual is enrolled in Family Care, commercial eligibility verification vendors will provide:

1. The message: "Services through Family Care prog. Not eligible for Medicaid card services."
2. The CMO's name and telephone number.
3. The MCP code (57, 58, or 59).
4. The message, "Family Care Program."

More information

For more general information about Family Care, refer to previous *Wisconsin Medicaid and BadgerCare Updates*. These can be found in the "Provider Publications" section of the Medicaid Web site at www.dhfs.state.wi.us/medicaid/. For more detailed information about Family Care, refer to the Family Care Web site at www.dhfs.state.wi.us/LTCare/. ✦

If a member does not present a Forward card, the provider may verify Family Care enrollment through the AVR or a commercial eligibility verification vendor by entering the member's identification number into the system.

ATTACHMENT

2001 Medicaid/BadgerCare Managed Care Forums

Forum	Dates	Time	Location
Southern	02/14/01 05/23/01* 08/15/01 11/14/01	9:30 a.m. - noon	Monona Terrace Community and Convention Center 1 John Nolen Drive Madison, WI (608) 261-4000
Western	02/28/01 05/16/01* 08/29/01 11/28/01	9:30 a.m. - noon	Ramada Inn 1202 West Clairemont Avenue Eau Claire, WI (715) 834-3181
Northern	03/14/01* 06/27/01 09/19/01 12/05/01	9:30 a.m. - noon	The Pointe 8269 South Hwy 51 Minocqua, WI (715) 356-4431
Southeastern	03/28/01*	9:30 a.m. - noon	Racine Marriott 7111 West Washington Avenue Racine, WI (262) 886-6100
	06/06/01 10/17/01		Country Inn Hotel 2810 Golf Road Waukesha, WI (262) 547-0201
Northeastern	04/04/01* 07/18/01 10/03/01	9:30 a.m. - noon	Radisson Inn 2040 Airport Drive Green Bay, WI (920) 494-7300
Milwaukee	04/19/01* 08/02/01 11/01/01	9:30 a.m. - 12:30 p.m.	Italian Community Center 631 East Chicago Street Milwaukee, WI (414) 223-2180
*Please note: These longer forums (9:00 a.m. - 12:30 p.m.) will be devoted to the Covering Kids program			
In case of inclement weather, please call the Bureau of Managed Health Care Programs at (608) 266-7894 to check on the status of the meeting.			