In the september 2005 • No. 2005-46

To: Federally Qualified Health Centers Home Health Agencies Nurse Practitioners Nursing Homes Occupational Therapists Physical Therapists Physician Assistants Physician Clinics Physicians Podiatrists Rehabilitation Agencies Therapy Groups HMOs and Other Managed Care Programs

Wisconsin Medicaid No Longer Reimbursing for Procedure Code 97010

Effective for dates of service (DOS) on and after October 1, 2005, Wisconsin Medicaid will no longer separately reimburse providers for procedure code 97010 (Application of a modality to one or more areas; hot or cold packs). The provision of hot or cold packs is included in the reimbursement of other therapeutic services. Claims submitted with procedure code 97010 for DOS on and after October 1, 2005, will be denied. Effective immediately, prior authorization requests will no longer be approved for procedure code 97010.

Information Regarding Medicaid HMOs

This *Wisconsin Medicaid and BadgerCare Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements. 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 *dhfs.wisconsin.gov/medicaid/*.

PHC 1250