

To: Blood Banks, Dispensing Physicians, Federally Qualified Health Centers, Pharmacies, Rural Health Clinics; HMOs and Other Managed Care Programs

Temporary Claim Submission Procedures Ending February 4, 2008, for Medicare Part D Dual Eligibles

Wisconsin Medicaid implemented temporary claim submission procedures for claims received on and after July 2, 2007, for Medicare Part D dual eligibles. The procedures were outlined in the June 2007 *Wisconsin Medicaid and BadgerCare Update* (2007-44), titled "Modification of Temporary Claim Submission Procedures for Medicare Part D Dual Eligibles." Claim submission procedures, which were effective through December 31, 2007, will now be ending for claims received on and after February 4, 2008.

Providers should continue to work with the recipient's Medicare Part D Prescription Drug Plan (PDP) to correctly process pharmacy claims. For questions regarding a member's specific PDP or drug coverage, contact the PDP directly. Pharmacy providers may also contact Medicare by calling 1-800-MEDICARE or visiting the Web site at www.medicare.gov/.

The *BadgerCare Plus Update* is the first source of program policy and billing information for providers. All information applies to Medicaid and BadgerCare Plus unless otherwise noted in the *Update*.

Wisconsin Medicaid and BadgerCare Plus are administered by the Division of Health Care Access and Accountability, 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/.

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