

Affected Programs: All Programs

To: All Providers, HMOs and Other Managed Care Programs

Interim Payments Available to Providers During the Transition to ForwardHealth interChange

This *ForwardHealth Update* provides information about interim payments available during the transition to ForwardHealth interChange for providers who may experience delays in normal claim payments.

Background

In November 2008, the Department of Health Services (DHS) will implement ForwardHealth interChange, which replaces Wisconsin's existing Medicaid Management Information System (MMIS). ForwardHealth interChange will be supported as part of the State's new fiscal agent contract with EDS. With ForwardHealth interChange, providers and trading partners will have more ways to verify member enrollment and submit electronic claims, adjustments, and prior authorization requests through the secure ForwardHealth Portal. Refer to the March 2008 *ForwardHealth Update* (2008-24), titled "Introducing ForwardHealth interChange, a New Web-Based Information System for State Health Care Programs," for an overview of the implementation and a more detailed outline of the many business process enhancements and added benefits the new system and fiscal agent contract will provide.

This *Update* details the plan for interim payments available during the transition to ForwardHealth interChange for providers who experience delays in payments.

Interim Payments During the Transition to ForwardHealth interChange

During the transition from the existing MMIS to ForwardHealth interChange, some providers may experience slight delays in payment of claims as the DHS, EDS, and providers transition to the new system, and as we all work to ensure that the new system is operating correctly through the validation of the new system. Validating the new system means that all processes and procedures need to be double checked to make sure the system is working properly prior to releasing claim payments.

Effective November 4, 2008, to facilitate continuity of business during the transition, providers who experience delays in their payments due to billing problems, higher than normal denied or suspended claims (e.g., claims showing as suspended), or system validation may request an interim payment by submitting a ForwardHealth interChange Implementation Transitional Payment Request form, F-13622 (10/08). Refer to the Attachment of this *Update* for a copy of the ForwardHealth interChange Implementation Transitional Payment Request. The form is also available on the ForwardHealth Web site at dhs.wisconsin.gov/forwardhealth/ or by calling Provider Services at (800) 947-9627.

Providers will be required to complete the form attesting to the billed amount of submitted claims and the conditions of the transitional payment. The form must be returned to ForwardHealth Financial Services, as detailed on the form, to initiate the transitional payment. Payment will be based on the lesser amount within the following scenarios:

- The amount of 75 percent of the billed sum of claims submitted but not paid.
- The amount of 75 percent of the historical average payment totals for the provider, if available.
- The amount of the requested transitional payment.

A new form must be completed and submitted for each transitional payment.

All payments will be sent to providers in the mail and will not be available for pick-up at the ForwardHealth Provider Services office. Providers should plan accordingly to allow time for processing of the request and mailing of the check.

Interim payments will be automatically recouped when the provider's claims are later processed through the automated claims processing system and must be fully repaid within 60 days of issuance.

Note: Not all providers will experience payment delays during the transition to ForwardHealth. This method of requesting payments is temporary for the transitional period only.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at dhs.wisconsin.gov/forwardhealth/.

P-1250

ATTACHMENT
ForwardHealth interChange Implementation
Transitional Payment Request
(for photocopying)

(A copy of the "ForwardHealth interChange Implementation Transitional Payment Request" form is located on the following page.)

FORWARDHEALTH INTERCHANGE IMPLEMENTATION TRANSITIONAL PAYMENT REQUEST

BILLING PROVIDER AND CLAIM INFORMATION

1. Name — Billing Provider

2. Name — Program

Medicaid WCDP WWWP

4. Type of Provider

3. Program Provider Number or National Provider Identifier

5. Name — Billing Service, Vendor, Trading Partner

6. Type of Media for the Claim Submission

Paper

Portal

PES Software

837 Health Care Claim Electronic Transaction

7. Description of Billing or Processing Issues Causing Delay

8. Provider Information Regarding the Number of Claims (if known) Not Processed or Denied

9. Describe Impact of Payment Delay

10. Transitional Payment Request Amount \$ _____

11. The submission beginning and ending dates for these claims are _____ through _____
(MM/DD/CCYY)

(MM/DD/CCYY)

PROVIDER'S ATTESTMENT

Provider attests that the charges listed above have been submitted and not paid and that the information is truthful and accurate.

Provider attests to, and understands that, the transitional payment will be automatically recouped when the provider's claims are later processed through the automated claims processing system and must be fully repaid within 60 days of issuance.

Provider attests to, and understands, that the appeal rights have been waived for the transitional payment.

SIGNATURE

12. Name — Authorized Person (Print)

13. **SIGNATURE** — Authorized Person

14. Date Signed