



Update

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Affected Programs: BadgerCare Plus, Medicaid
To: Dentists, HMOs and Other Managed Care Programs

Dental Claims and Adjustments Using the ForwardHealth Portal

This *ForwardHealth Update* introduces a new claims submission option for dentists that may be completed via the secure Provider area of the ForwardHealth Portal.

The ForwardHealth Portal at www.forwardhealth.wi.gov/ is a Web site where providers, trading partners, managed care programs, and partners have access to both public and secure information. The secure Portal allows all providers to conduct business and exchange electronic transactions with ForwardHealth. The public Portal contains general information accessible to all users.

The Portal offers providers a more convenient way to submit, adjust, and correct claims, among other claim functions. Dental providers can now use the new claim features on the Portal to do the following:

- Submit dental claims electronically.
- Submit adjustments for claim details that have been paid by ForwardHealth using the “**adjust**” button.
- Correct errors on claims submitted to ForwardHealth and resubmit them.
- Copy a previously submitted claim, alter it to reflect the new data, and resubmit it as a new claim.
- Search for and view status of all claims submitted to ForwardHealth.
- Void claims as a way to return overpayments to ForwardHealth.

Dental Claims on the Portal

Providers are able to submit dental claims to ForwardHealth via Direct Data Entry (DDE) on the Portal. Direct Data Entry is an online application that allows providers to submit claims directly to ForwardHealth.

When submitting claims via DDE, required fields are indicated with an asterisk next to the field. If a required field is left blank, the claim will not be accepted and a message will appear prompting the provider to complete the required field(s). Portal help is available for each online entry screen. In addition, search functions accompany certain fields so providers do not need to look up information in secondary resources.

On dental DDE claims on the Portal, providers may search for and select the following:

- Procedure codes.
- Rendering providers.
- Area of the oral cavity.
- Place of service.

Submitting Claim Adjustments

Providers are able to submit claim adjustments via the Portal. Providers may use the search function to find the specific claim they would like to adjust. Once found, the provider can alter the claim to reflect the desired change and resubmit it to ForwardHealth. Any claim ForwardHealth has paid can be

adjusted on the Portal and resubmitted, regardless of how the claim was originally submitted.

Correct Errors on Claims and Resubmit to ForwardHealth

Providers are able to view Explanation of Benefits (EOB) codes and descriptions for any claim that is in a pay or denied status. The EOBs will be useful for providers to determine why a claim did not process successfully, so the provider may correct the error online and resubmit the claim. The EOB will appear on the bottom of the screen and will reference the applicable claim header or detail.

For example, the provider might see on his or her Remittance Advice (RA) that detail 1 of the claim was denied with the EOB code indicating that the detail on the claim was not processed due to an error. The provider may then correct the error on the claim via the Portal online screen application and resubmit the claim to ForwardHealth.

Searching for and Viewing All Claims

All claims are available for viewing on the Portal.

To search and view claims on the Portal, providers may do the following:

- Go to the ForwardHealth Portal at www.forwardhealth.wi.gov/.
- Log in to the secure Provider area of the Portal.
- The most recent claims processed by ForwardHealth will be viewable on the provider's home page or the provider may select "claim search" and enter the applicable information to search for additional claims.
- Select the claim the provider wants to view.

Voiding Claims

Providers may void claims on the ForwardHealth Portal to return overpayments. This way of returning overpayments may be a more efficient and timely way for providers as a voided claim is a complete recoupment of that claim payment. Once a claim is voided, the claim can no longer be adjusted; however, the services provided and indicated on the voided claim may be resubmitted on a new claim. If a

provider returns an overpayment by mail, then the voided claims will have internal control numbers (ICNs) beginning with 67. Overpayments that are adjusted on the Portal will have ICNs beginning with 59.

Other Business Enhancements Available on the Portal

The secure Provider area of the Portal also enables providers to do the following:

- Verify member enrollment.
- View RAs.
- Designate which trading partner is eligible to receive the provider's 835 Health Care Claim Payment/Advice.
- Update and maintain provider file information.
- Receive electronic notifications and provider publications from ForwardHealth.

Further Assistance

For questions about dental claim processes and procedures, providers may call Provider Services at (800) 947-9627 or contact Provider Services through the secure Portal by selecting the "Contact Us" link and entering the relevant inquiry information, including selecting the preferred method of response (i.e., telephone call or e-mail). Provider Services will respond to the inquiry within five business days.

Providers may also contact the Portal Helpdesk at (866) 908-1363 for assistance with user accounts and passwords.

A dental claims user guide will also be available on the Portal in the near future. Portal fundamentals trainings for dentists will also be offered in the near future. Look for future *ForwardHealth Updates* for specific training for dentists on the Portal. For additional assistance, contact Joan Buntin, Professional Relations Representative, at (715) 675-3190 or at Joan.Buntin@wisconsin.gov.

Information Regarding Managed Care Organizations

This *Update* contains fee-for-service policy and applies to members who receive their dental benefits on a fee-for-service basis. For managed care policy, contact the appropriate managed care organization. Managed care

organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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 www.forwardhealth.wi.gov/.

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