

Update
November 2013

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Affected Programs: BadgerCare Plus, Medicaid **To:** Hospice Providers, Nursing Homes, HMOs and Other Managed Care Programs

Reminder: Providers Are Required to Submit Notification of Hospice Benefit Election Form

Providers are reminded that after a member elects or revokes the Medicaid hospice benefit or a dual eligible member elects or revokes the Medicare and Medicaid hospice benefit, the hospice is required to notify ForwardHealth of the status within 30 calendar days by using the Notification of Hospice Benefit Election form, F-1008 (10/08).

Hospice providers are required to submit the Notification of Hospice Benefit Election form, F-1008 (10/08), to notify ForwardHealth when a member elects or revokes the hospice benefit. The use of the Notification of Hospice Benefit Election form is mandatory; substitute forms will not be accepted by ForwardHealth. When a member elects or revokes the hospice benefit, a provider may notify ForwardHealth by doing one of the following:

- Using the paper form located on the Forms page of the ForwardHealth Portal at www.forwardhealth.wi.gov/.
- Using the Portal. Providers can log in to the secure Provider area of the Portal and click the Hospice Election link under the Quick Links box.

If the member electing hospice is currently, or becomes, a resident of a skilled nursing facility, the hospice is required to notify ForwardHealth of the nursing home residency by completing Section II or III on the Notification of Hospice Benefit Election form. Sections II and III of the Notification of Hospice Benefit Election form can only be completed using the paper form and cannot be completed on the ForwardHealth Portal. Hospice claims submitted for nursing home room and board will be denied if

ForwardHealth has not received notice of the member's nursing home residence. A nursing home level of care does not authorize a hospice room and board payment.

Effective on and after December 1, 2013, if a Notification of Hospice Benefit Election form has not been submitted to ForwardHealth for the date(s) of service billed, the claim will be denied.

Information Regarding Managed Care Organizations

This ForwardHealth Update contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. 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 AIDS Drug Assistance Program and the Wisconsin Well Woman Program are 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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