

Update
June 2014

No. 2014-36

Affected Programs: BadgerCare Plus, Medicaid **To:** All Providers, HMOs and Other Managed Care Programs

ForwardHealth Is Postponing Implementation of New Reimbursement Policy for Certain Claims and Claim Adjustments with Other Commercial Health Insurance Indicated

ForwardHealth is postponing implementation of the new reimbursement policy for certain claims and claim adjustments with other commercial health insurance indicated, which was announced in the March 2014 ForwardHealth Update (2014-23), titled "New Reimbursement Policy for Certain Claims and Claim Adjustments with Other Commercial Health Insurance Indicated." The new policy, which would have been effective for claims and adjustments submitted on and after June 16, 2014, is being postponed pending further review.

This postponement does **not** impact implementation of the new requirements for submitting other insurance information at the detail level, which were announced in the May 2014 *Update* (2014-34), titled "New Requirements for Certain Claims and Claim Adjustments with Other Commercial Health Insurance Indicated."

ForwardHealth is postponing implementation of the new reimbursement policy for certain claims and claim adjustments with other commercial health insurance indicated, which was announced in the March 2014 ForwardHealth Update (2014-23), titled "New Reimbursement Policy for Certain Claims and Claim Adjustments with Other Commercial Health Insurance Indicated." The new policy, which would have been effective for claims and

adjustments submitted on and after June 16, 2014, is being postponed pending further review.

Update 2014-23 announced that a new reimbursement calculation would be used for all professional, institutional, and dental claims and adjustments submitted electronically via the ForwardHealth Portal or using an 837 Health Care Claim transaction when other commercial health insurance was indicated on the claim or adjustment. ForwardHealth is continuing to assess the potential impacts of this change to providers. Providers should watch for future Updates announcing changes to reimbursement and other policies for claims with other commercial health insurance indicated.

Impact of Postponement on Use of Adjustment Reason Code 45 and New Explanation of Benefits Code 3032

Due to the postponement of the new reimbursement policy for claims and adjustments with other commercial health insurance indicated, the following additional changes announced in *Update* 2014-23 will **not** be implemented at this time:

ForwardHealth will not begin using Health Insurance
Portability and Accountability Act of 1996 (HIPAA)
claim adjustment reason code 45 (Charge exceeds fee
schedule/maximum allowable or contracted/legislated
fee arrangement) to interpret other insurance discounts

- and determine reimbursement. Providers should continue to submit claim adjustment reason code 45, as well as other claim adjustment reason codes, as appropriate and as required by HIPAA.
- ForwardHealth will not be introducing new explanation
 of benefits code 3032 (Pricing Adjustment —
 Reimbursement reduced by the TPL contractual
 discount) to indicate that the reimbursement amount
 on a claim or adjustment has been adjusted due to
 other insurance discounts.

No Impact to New Requirements for Submitting Other Commercial Insurance Information at the Detail Level

The postponement of the implementation of the new reimbursement policy for claims and adjustments with other commercial health insurance indicated does **not** impact implementation of other new requirements for these types of claims and adjustments. As announced in the May 2014 *Update* (2014-34), titled "New Requirements for Certain Claims and Claim Adjustments with Other Commercial Health Insurance Indicated," claims and adjustments submitted via the Portal or Provider Electronic Solutions software on and after June 16, 2014, must include detail-level information for other insurance if they were processed at the detail level by the primary insurance. Providers should refer to *Update* 2014-34 for additional information about these new requirements.

Services Not Requiring Commercial Health Insurance Billing

As a reminder, providers are not required to bill commercial health insurance sources before submitting claims to Wisconsin Medicaid and BadgerCare Plus for the following:

- Case management services.
- Community Recovery Services.
- Community support program services.
- Comprehensive community services.
- Crisis intervention services.
- Family planning services.
- Prenatal care coordination services.

- Preventive pediatric services.
- Specialized medical vehicle services.

Information Regarding Managed Care Organizations

This *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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