

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Dentists, Federally Qualified Health Centers, HealthCheck Providers, Nurse Practitioners, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

## Targeted Reimbursement Rate Increase for Certain Dental Services Provided in Four Counties

In accordance with a provision of the 2015-17 biennial state budget (2015 Wisconsin Act 55), ForwardHealth will be implementing a targeted reimbursement rate increase for pediatric dental care and certain adult dental services rendered in designated counties for dates of service on and after October 1, 2016.

### Background

In accordance with a provision of the 2015-17 biennial state budget (2015 Wisconsin Act 55), ForwardHealth will be implementing a targeted reimbursement rate increase for pediatric dental care and certain adult dental services rendered in Brown, Marathon, Polk, and Racine counties effective for dates of service (DOS) on and after October 1, 2016. These counties were identified in the 2015-17 biennial state budget.

### Targeted Counties and Providers

The reimbursement rate increase will apply to all Medicaid-enrolled provider types eligible to render dental services and will apply for services rendered in Brown, Marathon, Polk, and Racine counties. In accordance with a provision of the 2015-17 biennial state budget, the reimbursement rate increase will not apply to dental services billed through a federally qualified health center. The reimbursement rate increase will apply to services provided fee-for-service and via managed care. Currently, BadgerCare Plus and Supplemental Security Income managed care organizations (MCOs) only provide dental coverage in Racine County.

Dental providers contracted with MCOs in Racine County will receive the additional reimbursement rate increase directly from the MCO.

The rendering provider's practice location is considered the county where services are rendered, not the county of the billing provider or the member. If the rendering provider practices in both a target county and a non-target county, the rendering provider is required to obtain separate Medicaid enrollments for the target county and non-target county. The address of the rendering provider should be indicated in the appropriate field on submitted claims, including the ZIP code matching the Medicaid enrollment address. Rendering providers who practice in both a target county and a non-target county are encouraged to contact ForwardHealth Dental Provider Services to further discuss the process for obtaining a separate Medicaid enrollment and for submitting claims. ForwardHealth Dental Provider Services can be reached at 800-947-9627, option #4.

### Covered Services Eligible for the Reimbursement Rate Increase

The targeted reimbursement rate increase will apply to pediatric dental care services and certain adult dental services.

## ***Pediatric Dental Care Services***

Pediatric dental care services are defined as services provided to members 0–20 years of age that are submitted on claims using a *Current Dental Terminology* (CDT) procedure code.

## ***Certain Adult Dental Services***

The targeted reimbursement rate increase will apply to certain adult dental services that are commonly provided as emergency services. For the targeted rate increase, adults are defined as members 21 years of age and older. Refer to the Attachment of this *ForwardHealth Update* for a list of CDT procedure codes for adult dental services eligible for the reimbursement rate increase. While these services are commonly provided as emergency services, the reimbursement rate increase will also apply when the service is not provided as an emergency service as long as the service is rendered in a target county.

## **Policy and Billing Information**

Current policies are not changing as a result of the targeted reimbursement rate increase. Providers should refer to the ForwardHealth Online Handbook for their policy and billing information. The Online Handbook is linked from the ForwardHealth Portal home page under Providers on the left side of the page. A secure Portal account is not required to use the Online Handbook.

## **Claim Submission**

Claims for dental services must be submitted with ForwardHealth-allowable CDT procedure codes.

## **Reimbursement**

ForwardHealth will reimburse the lesser of the provider's billed amount or the increased reimbursement rate. The maximum daily reimbursement rate policy will continue to apply for services eligible for the rate increase.

ForwardHealth has established a Targeted Reimbursement Rate Maximum Allowable Fee Schedule for all impacted ForwardHealth-allowable CDT procedure codes for DOS on and after October 1, 2016. These rates are **not** part of ForwardHealth's interactive fee schedule. The Targeted Reimbursement Rate Maximum Allowable Fee Schedule is

published on the Resources for Dental Service Providers in Brown, Marathon, Polk, and Racine Counties page of the Portal. This page is linked from the Provider home page under What's New? and from other designated provider-specific resources pages. Providers should refer to the Targeted Reimbursement Rate Maximum Allowable Fee Schedule for current rates.

## ***Copayments***

Member copayments will not be impacted by the targeted reimbursement rate increase.

## **Limiting the Number of Served Members**

Dental providers may limit the number of Medicaid and BadgerCare Plus members they accept. However, dental providers are prohibited from limiting their acceptance of Medicaid and BadgerCare Plus members in a way that discriminates against a protected class, as defined in federal and state anti-discrimination laws.

Dental providers can use the demographic maintenance tool to indicate whether or not they are accepting new patients. Dental providers who indicate they are not accepting new patients will **not** appear on the ForwardHealth provider directory. A dental provider's eligibility to receive the increased reimbursement rates will not be affected by the provider's indication that he or she is not accepting new patients.

## **To Update Information via the Demographic Maintenance Tool**

Dental providers should log in to their secure Portal account and verify that their Accepting New Patients panel information is current. Providers can access their Accepting New Patients panel by:

1. Clicking the Demographic Maintenance link located in the Home Page box on the right of the secure Provider page.
2. Clicking Accepting New Patients from the navigation links menu.
3. Selecting Yes, No, or Limited from the Are you accepting new patients? drop-down menu to update information.

Refer to the ForwardHealth Portal Demographic Maintenance Tool User Guide, available via the Portal User Guides page of the Portal at [www.forwardhealth.wi.gov/WIPortal/content/Provider/userguides/userguides.htm.spage](http://www.forwardhealth.wi.gov/WIPortal/content/Provider/userguides/userguides.htm.spage), for more information about using the demographic tool.

Providers who are also contracted with an MCO should work directly with the MCO to update information in the MCO's provider directory, as needed.

## Enrollment

To be reimbursed for services provided to Medicaid or BadgerCare Plus members, including members enrolled in an MCO, providers are required to be enrolled in Wisconsin Medicaid as described in Wis. Admin. Code ch. DHS 105.

*Note:* Providers in target counties who are already enrolled in Wisconsin Medicaid will not need to re-enroll to be eligible for the increased reimbursement rates.

### **Medicaid Enrollment Process**

Providers are required to complete the online Portal application to enroll in Wisconsin Medicaid. To access the Medicaid enrollment application on the Portal, providers should follow these steps:

1. Access the Portal at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).
2. Select the Become a Provider link in the Provider box on the left side of the Portal home page. The Provider Enrollment Information home page will be displayed.
3. On the upper left side of the Provider Enrollment Information home page, select the Start or Continue Your Enrollment link.
4. In the To Start a New Medicaid Enrollment box, select the Medicaid/Border Status Provider Enrollment Application link.

After accessing the enrollment application on the Portal, providers will be guided through a series of panels on which they will be asked to complete or verify specific information based on their provider type. On the Type of Enrollment panel, providers should select Initial Enrollment, even if they are already enrolled in Wisconsin Medicaid.

At the end of the enrollment application, providers will be required to do the following:

1. Upload any additional supporting documents (e.g., licenses or certifications).
2. Select the Submit link to submit the enrollment application.
3. Print and maintain the enrollment documents in compliance with record retention requirements per Wis. Admin. Code § DHS 106.02(9).

## Resources

Providers may refer to the following resources for additional information:

- The Resources for Dental Service Providers in Brown, Marathon, Polk, and Racine Counties page of the Portal. This page is linked from the Provider home page under What's New? and from other designated provider-specific resources pages. It contains links to the fee schedule, enrollment resources, and other resources.
- The Provider Enrollment Information page of the Portal. This page can be accessed by clicking the Become a Provider link on the Portal home page. Select the Information for Specific Provider Types link and scroll to the provider type drop-down menu to view provider-specific eligibility criteria.
- ForwardHealth Dental Provider Services at 800-947-9627, option #4.
- Email subscription service. Providers and other interested parties may register to receive email notifications from ForwardHealth. Refer to the ForwardHealth Portal Email Subscription User Guide, which is accessible via the Portal User Guides link on the Provider home page of the Portal, for instructions on how to sign up for email subscription.

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 website at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

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# ATTACHMENT

## Procedure Codes for Adult Dental Services Eligible for Targeted Reimbursement Rate Increase

Effective for dates of service on and after October 1, 2016, the reimbursement rate increase will be applied to the following *Current Dental Terminology* (CDT) procedure codes submitted on claims for eligible adult dental services rendered in Brown, Marathon, Polk, and Racine counties.

The Targeted Reimbursement Rate Maximum Allowable Fee Schedule for all impacted ForwardHealth-allowable CDT procedure codes is published on the Resources for Dental Service Providers in Brown, Marathon, Polk, and Racine Counties page of the ForwardHealth Portal. This page is linked from the Provider home page under What's New and from other designated provider-specific resources pages.

Procedure Code	Description
D0140	Limited oral evaluation — problem focused
D0220	Intraoral-periapical-first radiographic image
D0230	Intraoral-periapical-each additional radiographic image
D0330	Panoramic radiographic image
D3221	Pulpal debridement, primary and permanent teeth
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7210	Surgical removal of erupted tooth requiring removal of bone and/or section of tooth, and elevation of mucoperiosteal flap
D9110	Palliative (emergency) treatment of dental pain-minor procedures