FORWARDHEALTH REIMBURSEMENT RATE INCREASES

Effective for dates of service on and after January 1, 2022, ForwardHealth will increase reimbursement rates for certain services as authorized by 2021 Wisconsin Act 58, the 2021–2023 biennial state budget. Many of the impacted services will also receive a 5 percent rate increase for dates of service on and after January 1, 2022, in response to the federal American Rescue Plan Act of 2021 (ARPA). This 5 percent increase will be calculated after the state budget increase has been applied.

Reimbursement Rate Increases

Effective for dates of service on and after January 1, 2022, maximum allowable fees will increase as follows:

- Rates for selected ambulance services will be set to 80 percent of the 2021 Medicare urban rate paid in Wisconsin.
- Rates for hearing aid and audiology services will be set to 75 percent of the 2021 Medicare rate paid in Wisconsin. Medicaid

The information provided in this ForwardHealth Update is published in accordance with 2021 Wisconsin Act 58.
services for which there is no comparable Medicare rate will be increased 19 percent. Select codes within this category will also receive a 5% rate increase in response to ARPA.

• Rates for selected **adaptive behavioral treatment services** will be increased by 15 percent.

• Rates for **child and adolescent day treatment** will be increased by 20 percent.

• Rates for **spinal manipulation** performed by chiropractors will be set to 70 percent of 2021 Medicare reimbursement paid in Wisconsin.

• Rates for selected **dental services** will be increased by 40 percent. Note: This rate increase will not be applied to rates established under the enhanced dental reimbursement pilot program.

• Rates for selected **emergency room physician services** will be increased by 15 percent.

• Rates for selected **nursing care services** in home health agencies that are licensed under Wis. Stat. § 50.49 will be increased 7.95 percent. Select codes within this category will also receive a 5 percent rate increase in response to ARPA.

• Rates for **services by opioid treatment providers** will be increased by 5 percent.

• Rates for evaluation and management services by primary care physicians for **medication-assisted treatment (MAT)** will be increased by $5. For reimbursement at the increased amount, claims must:
  – Include the modifier HG.
  – Indicate an opioid use or opioid disorder/dependence diagnosis code as the primary diagnosis.

• Rates for **outpatient mental health and substance abuse services** will be increased by 15 percent. Select codes within this category will also receive a 5 percent rate increase in response to ARPA.

• The hourly rate for **personal care services** (Healthcare Common Procedure Coding System code T1019 [Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)]) will increase to $20.80. This rate will also receive a 5 percent rate increase in response to ARPA.
• Rates for **physical therapy** will be increased by 5.99 percent. Select codes within this category will also receive a 5 percent rate increase in response to ARPA.

• Rates for **speech-language pathology services** will be set to 75 percent of the 2021 Medicare rate paid in Wisconsin. Select codes within this category will also receive a 5 percent rate increase in response to ARPA.

The **maximum allowable fee schedules** on the ForwardHealth Portal will be updated with the new reimbursement rates by January 3, 2022.

Note: The ForwardHealth claims processing system may not be updated with the new reimbursement rate for **emergency room physician services**, **MAT**, **nursing care services**, and **physical therapy** by the effective date. In that event, claims for services provided on and after January 1, 2022, that were reimbursed at the previous rate will be automatically adjusted. Reimbursement will be adjusted to the maximum amount allowed or the billed amount, whichever is less.

When the adjustments are completed, they will be announced on the banner page of the Remittance Advice. All other policy for the impacted services, including coverage and prior authorization, remains the same. Providers should continue to follow all current coverage and prior authorization policy.

**Documentation Retention**

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § **DHS 106.02(9)**. Providers are required to produce or submit documentation, or both, to ForwardHealth upon request. Per Wis. Stat. § **49.45(3)(f)**, providers of services shall maintain records as required by the Wisconsin Department of Health Services for verification of provider claims for reimbursement. The Department of Health Services may audit such records to verify actual provision of services and the appropriateness and accuracy of claims. ForwardHealth may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from the Medicaid program.
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.