

This Update has been revised since its original publication. Revised information appears in red text on pages 1 and 2.

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ForwardHealth UPDATE

Wisconsin serving you

Your First Source of ForwardHealth Policy and Program Information



PROLONGED STAY POLICY COVERAGE

Effective for dates of service (DOS) on and after December 1, 2021, ForwardHealth will temporarily cover nursing facility level care provided by hospitals for Wisconsin Medicaid members who require such care after hospital discharge and for whom the hospital is unable to locate a suitable **nursing** facility. This policy will continue through the last date of the federal COVID-19 public health emergency.

Reimbursement to hospitals for a prolonged stay is distinct from the temporary swing bed care authorized under 2021 Wisconsin Act 10 as described in ForwardHealth Update [2021-16](#), titled “Temporary Coverage Policy and Process for Swing Bed Care Provided by Hospitals.” Hospitals will not be reimbursed for both temporary swing bed care and a prolonged stay for the same member on the same DOS. As a reminder, reimbursement to hospitals for swing bed care is available for DOS through December 31, 2021.

Prior Authorization

Prior authorization (PA) is required for a hospital to receive reimbursement for a prolonged stay. PA is also required for

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

Hospital Providers, HMOs and Other Managed Care Programs

QUICK LINKS

- Update [2021-16](#), “Temporary Coverage Policy and Process for Swing Bed Care Provided by Hospitals”
- [ForwardHealth Forms page](#)
- [UB-04 \(CMS 1450\) Claim Form Instructions for Inpatient Hospital Services topic \(#3448\)](#)

The information provided in this ForwardHealth Update is published in accordance with Wis. Stat. § 49.45(3)(e)7.

reimbursement for a prolonged stay when such care is provided to a member enrolled in a managed care program. PA approves reimbursement for up to 14 days. Additional days will require a renewal.

Hospitals may request backdated PA for prolonged stays for DOS on and after December 1, 2021. Backdated PA requests must be submitted on or before January 31, 2022. Hospitals that have already received PA for swing bed care described in Update 2021-16 for DOS on and after December 1, 2021, do not need a new PA to submit a claim for a prolonged stay.

Prior Authorization Process

To request PA for a prolonged stay, hospital providers are required to submit all of the following by fax to ForwardHealth at 608-266-1096 (Note: This is the same fax number as the swing bed fax number):

- A completed Prior Authorization for Hospital Prolonged Stay Fax Cover Sheet, F-02815A (01/2022)
- A completed Prior Authorization for Hospital Prolonged Stay form, F-02815 (01/2022) (Both PA for Hospital Prolonged Stay forms are available on the [Forms page](#) of the ForwardHealth Portal.)
- Updated plan of care
- Physician, physician assistant, or nurse practitioner order indicating level of care
- Case management notes that include documentation of the following:
 - Reasons discharge from the hospital cannot be completed
 - Up to three referrals attempted or reasons why referrals were not attempted
 - The hospital's plan to discharge the patient to a **skilled-nursing suitable** facility as soon as practicable and medically appropriate

Prior Authorization Decisions

A decision will be made regarding a provider's PA request as soon as possible after ForwardHealth has received all required information. After processing the PA request, the hospital will receive a decision notice letter or a returned provider review letter:

- A decision notice letter will indicate the PA request was approved, approved with modifications, or denied.
- A returned provider review letter will indicate corrections or additional information is required.

Note: This PA submission will be reviewed outside of the ForwardHealth Portal system. Letters will be manually generated and sent to providers and members.

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Once a PA request is approved, hospitals may submit claims for reimbursement for providing a prolonged stay. Hospitals are required to submit a separate PA request for each additional 14 days of a prolonged stay.

Claims Submission

Claims for a prolonged stay must be submitted on a paper hospital UB-04 claim form, per the instructions below. Claims submitted electronically will be denied. A prolonged stay is reimbursed separately from acute care and should not be billed on the same claim as a member's inpatient stay. Prolonged stay claims will be reimbursed on a fee-for-service basis. If a member is enrolled in a managed care organization (MCO), inpatient care remains the responsibility of the MCO, and hospitals are required to submit such claims to the MCO. Prolonged hospital stays may not be billed to managed care entities and must be submitted to ForwardHealth since the care is separate from the inpatient care that an MCO covers.

Claims Submission Instructions

When completing the UB-04 claim form for a prolonged stay, hospitals are required to enter the appropriate type of bill code in Form Locator 4. The appropriate type of bill codes begin with 018, with the fourth digit representing billing frequency:

- 0181 (Swing Bed – Admit through discharge claim)
- 0182 (Swing Bed – Interim, first claim)
- 0183 (Swing Bed – Interim, continuing claim)
- 0184 (Swing Bed – Interim, last claim)

For these claims, the leading zero is required when indicating the type of bill code.

The claim must indicate:

- Revenue code 0169 (Room & Board – Other)
- The number of hospital accommodation days or units of service on the line for revenue code 0169 (This must not exceed the number of days authorized on the PA.)

For instructions on completing other UB-04 claim form fields, refer to the UB-04 (CMS 1450) Claim Form Instructions for Inpatient Hospital Services topic ([#3448](#)) of the ForwardHealth Online Handbook.

Once the claim for a prolonged stay is completed, hospitals are required to:

- Submit claims to ForwardHealth, separate from other hospital claims. (If submitting multiple prolonged stay claims, hospitals may submit all claims in one envelope.)

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- Complete and include a Written Correspondence Inquiry form, F-01170 (07/2012), selecting “Other” in the Reason for Inquiry section with “a prolonged stay” as the explanation. (Include only one copy of this form per envelope of claims.)
- Mail completed claims to ForwardHealth:
ForwardHealth
Claims and Adjustments
313 Blettner Blvd
Madison WI 53784

Reimbursement

Claims submitted for a prolonged stay will be processed manually on a monthly basis.

Hospitals will be reimbursed on a fee-for-service basis for approved prolonged stays at a per diem rate of \$193.06. Reimbursement for a prolonged stay will not appear on the 835 Health Care Claim Payment/Advice transaction due to the manual processing of these claims. Payments will include a memo indicating that payment is for a prolonged stay and the date range covered.

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.

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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 Medicaid Services within the 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 within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.