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ForwardHealth UPDATE
Wisconsin serving you

Your First Source of ForwardHealth Policy and Program Information



OVER-THE-COUNTER DRUG COVERAGE AND POLICY CLARIFICATIONS FOR HEALTHCHECK "OTHER SERVICES"

This ForwardHealth Update clarifies over-the-counter (OTC) drug policies under HealthCheck "Other Services" for providers.

HealthCheck "Other Services" Overview

Federal law requires states to provide people under age 21 with additional health care services that are covered under Wisconsin Medicaid and are found to be medically necessary to treat, correct, or reduce illnesses and conditions. The State of Wisconsin refers to services provided under this requirement as HealthCheck "Other Services."

Covered Over-the-Counter Drugs

ForwardHealth covers certain OTC drugs when the manufacturer has signed a rebate agreement with the Centers for Medicare & Medicaid Services (CMS); **these covered OTC drugs do not require**

AFFECTED PROGRAMS
BadgerCare Plus, Medicaid

TO
Pharmacies, Pharmacists, HMOs and Other Managed Care Programs

QUICK LINKS
- Drug Search Tool
- Over-the-Counter Drugs Covered by HealthCheck "Other Services"
- Forms page

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prior authorization (PA). Pharmacy providers may bill for these products on a noncompound drug claim form. ForwardHealth requires a prescription for all OTC drugs (even when PA is not required). Providers can review the Over-the-Counter Drugs Covered by HealthCheck "Other Services" data table on the Pharmacy Resources page of the ForwardHealth Portal to determine if a certain OTC drug is covered.

> **ForwardHealth requires a valid prescription for coverage of all OTC drugs, even when PA is not required.**

Providers can review specific OTC coverage using the Drug Search Tool. This tool is a searchable database that includes detailed OTC information, such as covered National Drug Codes. The Drug Search Tool can be used to determine if a manufacturer has signed a rebate agreement with CMS.

HealthCheck "Other Services" Prior Authorization for Over-the-Counter Drugs

ForwardHealth requires PA for OTC drugs when the manufacturer does not have a signed rebate agreement with CMS. These OTC drugs are not billable on a noncompound drug claim form.

When a PA is required for a HealthCheck "Other Services" OTC drug, pharmacy providers are required to complete the following two forms:

- Prior Authorization Request Form (PA/RF), F-11018 (05/2013)
- Prior Authorization/Drug Attachment (PA/DGA), F-11049 (01/2024)

Providers can find these forms by searching for the form number on the Forms page of the Portal.

Providers must include the following information with the PA request:

- Medical records that document the condition being treated
- Clinical rationale supporting the medical necessity of the requested drug and reasons why other covered OTC drugs are not appropriate
- Clear documentation of the quantity, requested dose, and duration

If appropriate, providers should also submit documentation to support the use of a noncovered product over a covered product. ForwardHealth may request a current invoice for the noncovered OTC drug if current pricing information is not available for the requested drug. Attachment A to this Update includes a provider reference sheet with more information.

REMINDER

For additional OTC covered items refer to the Over-the-Counter Drugs Covered (BadgerCare Plus and Medicaid) data table on the Pharmacy Resources page of the Portal.

REMINDER

Providers should refer to the Prior Authorization/Drug Attachment topic (#15937) of the ForwardHealth Online Handbook for more information on completing the PA/DGA form.

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A PA request may be returned to the provider when forms are incomplete, inaccurate, or require additional clinical information or corrections. When this occurs, the provider will receive a review letter that addresses their PA request.

Claims Submission

For OTC drugs covered **without** PA, pharmacy providers must submit a pharmacy claim in one of the following ways:

- The real-time point-of-sale system using the National Council for Prescription Drug Programs Telecommunication Standard
- Direct Data Entry on the Portal
- Provider Electronic Solutions claims submission software
- On a noncompound drug claim form

For noncovered OTC drugs **with an approved PA**, pharmacy providers must submit a professional claim in one of the following ways:

- The 1500 Health Insurance Claim Form (02/12)
- The 837 Health Care Claim: Professional transation
- Direct Data Entry on the Portal
- Provider Electronic Solutions claims submission software

Pharmacy providers must refer to the PA approval message to obtain the approved procedure code (usually an S code) and pricing information that should be indicated on the claim.

Member Information

Attachment B includes a member flyer that explains steps to take to get a non-billable OTC drug covered. Pharmacies may print and distribute this flyer to members as needed.

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 the Wisconsin Department of Health Services (DHS) upon request. Per Wis. Stat. § 49.45(3)(f), providers of services shall maintain records as required by DHS for verification of provider

NEVER MISS A MESSAGE

Stay current on policies and procedures by signing up for Portal text messages or email alerts! These alerts let providers know when there is a new secure Portal message. Go to the **Message Center** on the secure Portal and click **Notification Preferences**.

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claims for reimbursement. DHS may audit such records to verify the actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to members enrolled in the Family Care, Family Care Partnership, BadgerCare Plus, and SSI Medicaid managed care programs because pharmacy services for members of these programs are provided on a fee-for-service basis. Pharmacy services for Medicaid members enrolled in the Program of All-Inclusive Care for the Elderly (PACE) are provided by the member's managed care organization.

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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/.

ATTACHMENT A
Provider Reference Sheet

(A copy of the Provider Reference Sheet can be found on the following pages.)

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HealthCheck "Other Services" OTC Drug Coverage

ForwardHealth has clarified the processes for how members can get over-the-counter (OTC) drugs covered for children under the age of 21.

Over-the-Counter Drugs

ForwardHealth requires a prescription for OTC drugs with or without prior authorization (PA).

- ForwardHealth covers certain OTC drugs under the HealthCheck "Other Services" benefit.
- Pharmacy providers can review covered OTC drugs on the ForwardHealth Portal Pharmacy page under the "Over-the-Counter Drugs" header. Drug categories on this list have National Drug Codes (NDC) available for billing on a pharmacy claim without PA.

Drug Search Tool

Pharmacy providers and ForwardHealth members can use the Drug Search Tool (DST) for OTC coverage information and to find the specific NDC of products available for coverage without PA.

Prior Authorization

ForwardHealth requires PA for certain OTC drugs. If an OTC drug does not appear on the list of covered drugs in the DST, the pharmacy should submit a request to be reviewed for coverage under a HealthCheck "Other Services" PA. Here's how it works:

- The pharmacy provider sends a HealthCheck "Other Services" PA request to the prescriber.
- The prescriber completes the information and sends the PA, medical records, and any additional documentation supporting medical necessity back to the pharmacy.
- The pharmacy completes the PA request form and submits the form and documentation to ForwardHealth.

Please note: A returned PA is not a denial. Pharmacy providers should review the PA response and provide the additional information requested to keep the PA request moving through the review process.

Billing Information

Providers can find billing information for OTC drugs approved under a HealthCheck "Other Services" PA on an approved PA request or under the HealthCheck "Other Services" Over-the-Counter Drug Information topic (#23377).

Provider Resources

Providers can search by topic in the Online Handbook. Providers can also contact Provider Services at 800-947-9627 for support.

For more information, pharmacy providers may refer to the specific Online Handbook topics below:

- Prior Authorization Request Form Completion Instructions for Prescribers for Drugs (#7797)
- Prior Authorization/Drug Attachment (#15937)
- HealthCheck "Other Services" (#23377)



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ATTACHMENT B
Member Flyer

(A copy of the Member Flyer can be found on the following page.)

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ForwardHealth may cover your child's over-the-counter medicine.



Make sure to ask your health care or pharmacy provider to check to see if your child's over-the-counter (OTC) medicine is covered under the HealthCheck "Other Services" health care benefit.

What you need to know:

What is HealthCheck?

Your child's ForwardHealth plan has a Medicaid benefit called HealthCheck, a benefit created for children and young adults under the age of 21. This benefit can help pay for some OTC medicines prescribed by your child's doctor or health care provider.

Your health care provider and pharmacist can help.

Your health care provider or pharmacy can help you find out if an OTC medicine is covered. Make sure to ask them to check for the medicine under HealthCheck "Other Services."

Do I need a prior authorization?

You will need a prior authorization (PA) if your pharmacist tells you your child's OTC medication is not covered. Ask your pharmacist to submit a HealthCheck PA request for your child's OTC medicine.



Questions?

Call ForwardHealth Member Services at 800-362-3002 or go to dhs.wi.gov/healthcheck to learn more about your child's HealthCheck benefits.

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