

# ForwardHealth UPDATE

Wisconsin serving you

Your First Source of ForwardHealth Policy and Program Information



## POLICY CHANGE RELATED TO EVALUATION AND MANAGEMENT VISITS PER DAY

Effective for dates of service (DOS) on and after September 1, 2024, evaluation and management (E&M) visits will be reimbursed based on the rendering provider ID, rather than the billing provider ID.

Refer to the ForwardHealth Online Handbook Office and Other Outpatient Visits topic [#491](#) for more information.

National Correct Coding Initiative (NCCI) limits remain in effect for services with the same provider on the same day. Providers must continue to follow official guidance when submitting claims that include multiple E&M visits in a single day.

## Examples of Evaluation and Management Visits Affected by This Change

Examples of multiple visits on the same DOS to different rendering providers under the same billing provider could include:

- A family practice provider and a nurse practitioner of a different specialty.

## AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

## TO

Family Planning Clinics, HealthCheck “Other Services” Providers, HealthCheck Providers, Hospital Providers, Nurses in Independent Practice, Nurse Midwives, Pharmacists, Physician Assistants, Physician Clinics, Physicians, Podiatrists, HMOs and Other Managed Care Programs

## QUICK LINKS

Office and Other Outpatient Visits topic [#491](#)

---

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code § DHS 107.06.



- A family practice provider and a nephrology provider.
- A family practice provider and a pulmonary medicine provider.
- A hematology or oncology provider and a physician assistant of a different specialty.
- An oncology provider and a nurse practitioner of a different specialty.

## Claims Submission for Multiple Evaluation and Management Visits on the Same Day

Now that E&M visits will be reimbursed based on the rendering provider ID, providers should ensure they meet all requirements for proper billing and reimbursement.

Providers must follow Current Procedural Terminology (CPT) and NCCI guidance when submitting claims for members with multiple E&M visits on the same date:

- Services must meet the necessary standard for each code and be supported by the correct documentation.
- Billing providers must identify the rendering provider who provided the service on the claim, per Wis. Admin. Code § [DHS 106.03\(5\)\(b\)](#).

**“E&M visits will be reimbursed based on the rendering provider ID, rather than the billing provider ID.”**

Note: Multiple E&M visits only apply to CPT codes within the ranges of 99202–99205 and 99211–99215.

## 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 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.

---

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code § DHS 107.06.

## Information Regarding Managed Care Organizations

This ForwardHealth Update applies to E&M services that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

---

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code § DHS 107.06.

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/](http://www.forwardhealth.wi.gov/).