

Medicaid

update

department of health and family services

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POH 1675

To:

School-based services federal matching share reduced

SBS Providers
HMOs and Other
Managed
Care
Programs

Effective for claims processed on and after October 1, 1999, Wisconsin Medicaid's federal matching share for school-based services (SBS) has been reduced from 58.85% to 58.78%. This proportionately reduces the Medicaid reimbursement an SBS provider receives and increases the amount the SBS provider must obtain from local matching funds.

Refer to Attachment 1 of this Update for SBS rates for claims paid on and after October 1, 1999.

The Wisconsin Medicaid Update is the first source for provider information including Medicaid policy and billing information.

Wisconsin Medicaid is administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For provider questions, call the Medicaid fiscal agent at (800) 947-9627 or (608) 221-9883 or visit our web site at www.dhfs.state.wi.us/medicaid.

Attachment 1
Wisconsin Medicaid Fee Schedule
School-based Services
Effective for Claims Processed on and after October 1, 1999

This is your Wisconsin Medicaid Fee Schedule. Wisconsin Medicaid-certified providers will be reimbursed the rates listed on this schedule for covered services provided to Medicaid recipients.

The fee schedule does not address the various coverage limitations routinely applied by Wisconsin Medicaid before final payment is determined (e.g., recipient and provider eligibility, billing instructions, frequency of services, third party liability, age restrictions, etc.). Refer to Part A, the all-provider handbook, Part X, the school-based services handbook, and Medicaid Updates for information about coverage limitations. The fee schedule contains the following information:

Procedure Code—The procedure code recognized by Wisconsin Medicaid to identify the service provided.

Description—An abbreviated description of the procedure code.

Unit Rate—The unit rate established for the service.

Reimbursement—The Wisconsin Medicaid reimbursement rate (60% of federal share) per unit of service for the listed procedure.

This information is intended to help you understand the Wisconsin Medicaid fee schedule. If you have questions about the fee schedule, please call Provider Services at (800) 947-9627 or (608) 221-9883. If you have questions about the rates, please contact the Division of Health Care Financing by writing to:

School-Based Services Policy Analyst
Division of Health Care Financing
P.O. Box 309
Madison, WI 53701-0309

**Wisconsin Medicaid Fee Schedule
School-Based Services
Effective for Dates of Service on and after October 1, 1999**

Procedure Code	Procedure Code Description	Unit Rate	Reimbursement (60% of Federal Share)
W6050	Individual Education Program (IEP) speech, language, audiology and hearing services: individual	\$24.44	\$8.62
W6051	IEP speech, language, audiology and hearing service: group	\$8.07	\$2.85
W6052	Speech, language, audiology and hearing service: face-to-face M-Team assessment and IEP plan development	\$24.44	\$8.62
W6053	IEP occupational therapy service: individual	\$21.16	\$7.46
W6054	IEP occupational therapy service: group	\$6.98	\$2.46
W6055	Occupational therapy: face-to-face M-Team assessment and IEP plan development	\$21.16	\$7.46
W6056	IEP physical therapy service: individual	\$24.50	\$8.64
W6057	IEP physical therapy service: group	\$8.09	\$2.85
W6058	Physical therapy: face-to-face M-Team assessment and IEP plan development	\$24.50	\$8.64
W6059	IEP psychological service: individual	\$21.83	\$7.70
W6060	IEP psychological service: group	\$7.20	\$2.54
W6061	Psychological service: face-to-face M-Team assessment and IEP plan development	\$21.83	\$7.70
W6062	IEP counseling service: individual	\$20.94	\$7.39
W6063	IEP counseling service: group	\$6.91	\$2.44
W6064	Counseling: face-to-face M-Team assessment and IEP plan development	\$20.94	\$7.39
W6065	IEP social work service: individual	\$21.05	\$7.42
W6066	IEP social work service: group	\$6.95	\$2.45
W6067	Social work: face-to-face M-Team assessment and IEP plan development	\$21.05	\$7.42
W6068	IEP nursing service: care and treatment	\$11.76	\$4.15
W6069	Nursing: face-to-face M-Team assessment and IEP plan development	\$11.76	\$4.15
W6070	Face-to-face M-Team assessment and IEP plan development: other staff	\$21.91	\$7.73
W6072	Durable medical equipment	Individually priced	
W6073	Special transport, per mile	\$2.22	\$0.78