

For Wisconsin Medicaid-certified providers

Governor announces agreement on BadgerCare

Under the federal waiver, BadgerCare will expand Medicaid coverage for families using a blend of Title XIX (Medicaid) and Title XXI (Child Health Insurance Program).

Governor Tommy G. Thompson recently announced that Wisconsin and the Clinton administration have reached agreement on the major waiver provisions for the governor's groundbreaking BadgerCare program, which will help provide affordable health coverage for 46,000 adults and children in low-income working families.

Governor Thompson directed Department of Health and Family Services Secretary Joe Lekan to take all necessary steps to ensure that BadgerCare is implemented statewide in July 1999, according to the guidelines agreed to with the U.S. Department of Health and Human Services.

"Now we can begin helping low-income workers provide health care for their families, making sure that work does pay for them," Governor Thompson said. "This has taken much longer than we had hoped, but the federal waiver for BadgerCare is approved and that's wonderful news for thousands of Wisconsin's working families."

BadgerCare is a new health insurance program designed to fill the gaps between Medicaid and private insurance by providing Medicaid coverage to children and adults in uninsured families with income below 185 percent of the federal poverty level. It is projected to provide

health care to an additional 46,200 low-income Wisconsin residents, including 23,900 uninsured children and 22,300 parents.

Under the federal waiver, BadgerCare will expand Medicaid coverage for families using a blend of Title XIX (Medicaid) and Title XXI (Child Health Insurance Program). BadgerCare will fund children's health care costs and families who qualify for employer-sponsored coverage through Wisconsin's Title XXI allocation. Parents will be funded through Title XIX. Wisconsin's original waiver request assumed that all BadgerCare enrollees would be funded under Title XXI, which carries a higher federal matching rate than traditional Medicaid.

Governor Thompson noted that under BadgerCare, families with income at and below 150 percent of the federal poverty level will be exempt from cost-sharing. For families earning more than 150 percent, BadgerCare will require a monthly premium of 3.5 percent of family income.

BadgerCare's annual cost is projected at \$71.3 million, of which \$44.6 million is federal, \$21.3 million is State, and \$5.4 million is premium revenue.

Inside this Update:

Governor announces agreement on BadgerCare

Wisconsin Medicaid enhances services for providers

Fixing Y2K - critical to the health of Wisconsin's citizens

Voice mail replaces field reps' answering service

Continued on page 3

Wisconsin Medicaid enhances services for providers

To assist providers in obtaining Medicaid information, Wisconsin Medicaid is improving the Automated Voice Response (AVR) system and reorganizing Provider Services (also known as the Correspondence Unit for Policy/Billing Information).

Automated Voice Response system

Wisconsin Medicaid will complete its enhancements to the Automated Voice Response (AVR) system by March 24, 1999. AVR is a computerized service accessed through touch-tone telephones that gives providers direct access to eligibility information.

The enhanced AVR system will have the following features:

- New, user-friendly voice prompts.
- Additional toll-free lines for a total of 48 lines.
- Access to toll-free lines for out-of-state providers.
- Access to claim status and prior authorization information in addition to recipient eligibility and checkwrite information.
- Transaction log number for each eligibility inquiry. *Retain this transaction log number. It is proof that you inquired about the recipient's eligibility. The enhanced AVR system will issue a transaction log number for each eligibility inquiry. If you feel a claim was denied in error for eligibility reasons, you can give the transaction log number to Wisconsin Medicaid's fiscal agent's Good Faith Department.*
- Available 24 hours, seven days a week.

- Access to eligibility information for a range of dates up to 365 days in the past through the current date.

To access AVR, call 1-800-WIS-ELIG (947-3544) or (608) 221-4247.

Provider Services

Wisconsin Medicaid will complete enhancements to the Provider Services telephone system on March 24, 1999. The enhanced system will allow providers to call one telephone number rather than two numbers for policy/billing and eligibility information. The new system will include the following features:



- Additional toll-free lines.
- Access to toll-free lines for out-of-state providers.
- Access to both eligibility and policy/billing questions within the same phone call via toll-free lines.
- Automated Provider Service options.

When you call Provider Services, you will be asked to select from one of the following:

- Press "1" for recipient eligibility information.
- Press "2" for policy/billing information relating to pharmacy services.
- Press "3" for all other inquiries.
- To repeat the menu, press "0."

For providers who do not have touch-tone telephones, stay on the line and a correspondent will assist you.

AVR is a computerized service accessed through touch-tone telephones that gives providers direct access to eligibility information.

The telephone numbers for Provider Services are: (800) 947-9627 and (608) 221-9883.

Hours for recipient eligibility information and all other provider service inquiries (except pharmacy):

- 8:30 a.m. to 4:30 p.m. Monday, Wednesday, Thursday, and Friday.
- 9:30 a.m. to 4:30 p.m. on Tuesdays.

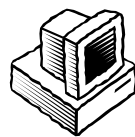
Hours for policy/billing information relating to pharmacy services:

- 8:30 a.m. to 9:00 p.m. Monday, Wednesday, Thursday, and Friday.
- 9:30 a.m. to 9:00 p.m. on Tuesdays.
- 9:00 a.m. to 5:00 p.m. on Saturdays.

The enhancements to Provider Services follow the Department of Health and Family Services (DHFS) implementation of the new Forward recipient ID cards and the pharmacy Point of Sale (POS) electronic claims management system for fee-for-service Medicaid recipients. ✦

Fixing Y2K – critical to the health of Wisconsin's citizens

It is vital that your computers and electronic health care equipment function properly.



Recently you received a letter from Joe Leean, the Secretary of the Department of Health and Family Services (DHFS). In it, he stressed it is critical for providers and patients alike that the technology that Wisconsin citizens depend on for their health care services be prepared for the year 2000. It is vital that your computers and electronic health care equipment function properly. So it is impor-

tant that everyone who provides health and family services gives serious attention to this issue. Your organization's continued viability, as well as the health and well-being of Wisconsin's citizens, depend on these actions.

You can find valuable information about Y2K, including Secretary Leean's letter and the Y2K brochure, on the DHFS web site, <http://www.dhfs.state.wi.us/y2k/>. ✦

BadgerCare

Continued from page 1

BadgerCare benefits will be identical to the comprehensive package of benefits and services covered by Wisconsin Medicaid. BadgerCare services provided by Medicaid-certified providers will be reimbursed at Medicaid rates. The service delivery system for BadgerCare is built on Wisconsin's existing Medicaid HMO managed care program, including provisions for quality assurance and improved health outcomes.

The governor noted that, if BadgerCare enrollment is projected to exceed budgeted enrollment levels, a new enrollment eligibility threshold will be established for new applicants.

This provision allows Wisconsin to continue to afford BadgerCare should demand suddenly rise, Governor Thompson said. He added that, in this situation, families already enrolled in BadgerCare would not be terminated from the program as long as they meet the eligibility criteria in effect at the time of their enrollment. ✦

Voice mail replaces field reps' answering service

Providers may now leave more detailed messages for provider relations representatives.

The Medicaid fiscal agent will implement a voice mail message system for its provider relations representatives, replacing the existing answering service. The voice mail system will answer all calls beginning April 1, 1999.

Provider relations representatives, also known as field representatives, answer complex billing and claims processing questions. Field representatives also assist in provider training activities.

Information to include when calling

You can leave detailed messages on the voice mail system, allowing field representatives to research your concerns before returning your telephone call. By including some specific information in your message, you will help your field representative efficiently research your concerns. Please include the following information:

- Your name.
- Your provider number.
- Your telephone number.
- A concise statement outlining your concern.

If you have a question about a specific claim, please include the following information:

- The recipient's name.
- The recipient's identification number.
- Claim number.
- Dates of service.

New telephone numbers

To implement this change, the field representatives' telephone numbers have been changed.

The new telephone numbers are listed on the map attached to this Update. To determine which field representative serves your geographic area, please consult the map.

Provider Services

If you have questions about information in the provider materials or concerns about basic issues, please call Provider Services. Refer to the article "Wisconsin Medicaid enhances resources for providers" in this Update.

For Medicaid managed care billing issues, contact your managed care organization (MCO) or the managed care contract monitor. See your Managed Care Guide for more information. ✦

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.

Wisconsin Medicaid Professional Relations Representatives Map

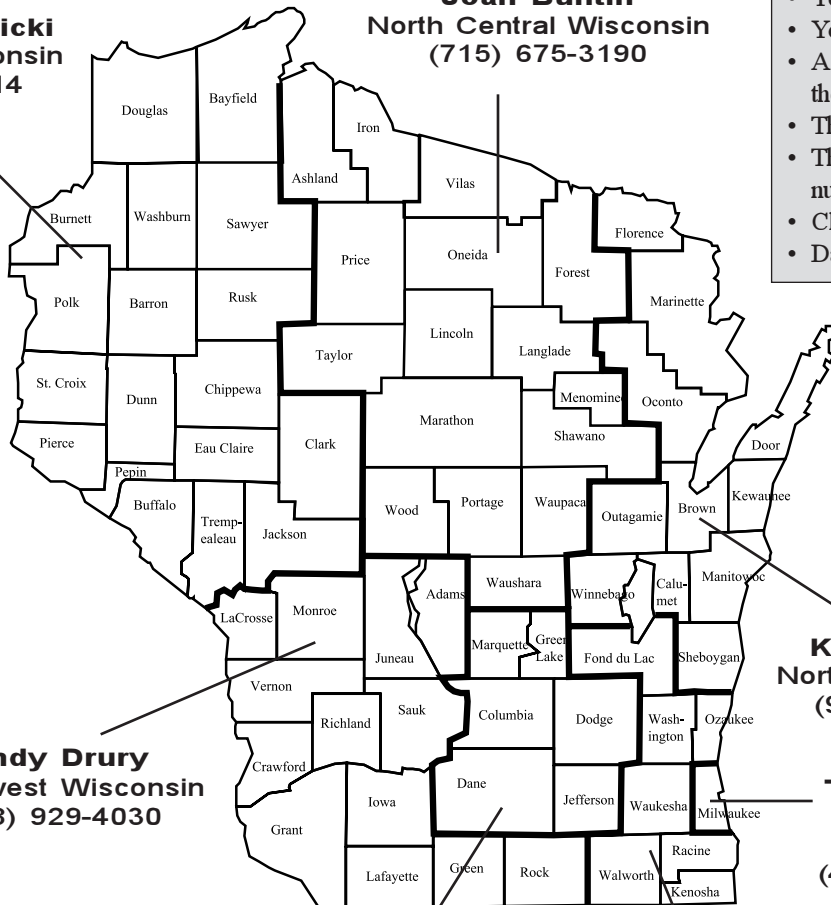
David Miess, Director
(608) 221-4746

When you call your representative, be prepared to provide the following information:

- Your name.
- Your provider number.
- Your telephone number.
- A concise statement outlining the situation you face.
- The recipient's name.
- The recipient's identification number.
- Claim number.
- Dates of service.

Denise Kruswicki
Northwest Wisconsin
(715) 694-2114

Joan Buntin
North Central Wisconsin
(715) 675-3190



Cindy Drury
Southwest Wisconsin
(608) 929-4030

Karen Gordon
Northeast Wisconsin
(920) 465-9425

Tami Radwill
Milwaukee
County
(414) 365-0501

Jude Benish
South Central Wisconsin
(608) 836-9428

Vicky Murphy
Southeast Wisconsin
(608) 756-1422

Teresa Miller
Milwaukee Family Project
(414) 227-4256

Questions from Recipients about Medicaid Eligibility and Services?

Providers may refer recipients who have questions about their Medicaid eligibility to the Recipient Services hotline. This hotline is not for provider use.

- **Recipient Services (*recipient use only*)**
(800) 362-3002
Hours: 8:00 a.m. to 4:30 p.m., Monday–Friday



Dept. of Health & Family Services
Division of Health Care Financing
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