

Adult Long-Term Care

UPDATE

Everyone living their best life



Adult Long-Term Care Provider Enrollment: Termination Policies

This Adult Long-Term Care Update is part of a series of Updates for all providers of home and community-based services delivered under one of Wisconsin's adult long-term care (LTC) waiver programs. As a provider of home and community-based services under an adult LTC waiver program, you will be required to enroll with Wisconsin Medicaid through the ForwardHealth Portal (referred to as the Portal for the remainder of this Update). For an introduction to the new requirements and the Update series, you should refer to Update [LTC 2024-01](#), "Adult Long-Term Care Provider Enrollment: Overview."

Note: The way you currently bill and submit claims for Family Care, Family Care Partnership, Program of All-Inclusive Care for the

Affected Groups

- Family Care
- Family Care Partnership
- Program of All-Inclusive Care for the Elderly (PACE)
- IRIS (Include, Respect, I Self-Direct)

This Adult Long-Term Care Update is for adult long-term care waiver program providers in Family Care, Family Care Partnership, PACE, and IRIS.

The information provided in this Adult Long-Term Care Update is published in accordance with Wis. Admin. Code § DHS 108.02.

Elderly (PACE), and IRIS (Include, Respect, I Self-Direct) services will stay the same.

This Update covers provider termination policies. Your enrollment as a provider in Wisconsin Medicaid may be ended in one of two ways:

- Voluntary termination
- Involuntary termination

Voluntary Termination

If you no longer want to provide services to Medicaid members, you may choose to end your enrollment as a provider with Wisconsin Medicaid as specified in Wis. Admin. Code § [DHS 106.05](#).

If you choose to stop being a Medicaid provider, you must notify Wisconsin Medicaid in writing at least 30 days in advance.

You must adhere to program policy and notify members, participants, managed care organizations, and/or IRIS fiscal employer agents that you will no longer provide adult LTC waiver services funded by Wisconsin Medicaid.

You should mail your written notice of termination to Wisconsin Medicaid to the following address:

Wisconsin Medicaid
Provider Enrollment
313 Blettner Blvd
Madison WI 53784

You must specify the exact date when you want your enrollment as an adult LTC waiver service provider to end in your written notice. **If you do not include a date, your enrollment will end on the date the notice is received.** This is important because you will no longer receive payment for services provided on or after the date your enrollment ends.

Involuntary Termination

The Wisconsin Department of Health Services reserves the right to end your enrollment in Wisconsin Medicaid if you do not meet

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You can find the complete list of published Updates on the [Adult Long-Term Care Updates](#) page of the Portal.

SCAN HERE

To View the Portal



Refer to the [Attachment](#) to this Update for instructions on how to use QR codes.

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the provider requirements as outlined in Wis. Admin. Code § [DHS 106.06](#).

Your enrollment as a Medicaid provider may be terminated for reasons including:

- You have a criminal conviction.
- You have failed to comply with your Wisconsin Medicaid Provider Agreement and Acknowledgement of Terms of Participation Standard Agreement/Acknowledgement for Home and Community-Based Waiver Service (Adult Long-Term Care) Providers, F-00180C.
- Your licensure, certification, or authorization has been suspended, restricted, terminated, expired, or revoked.
- You submitted an inaccurate license, certification, or authorization.
- You have been terminated from Medicare or another states' Medicaid program.

Depending on the reason for the termination, your enrollment as a provider may be terminated at the service level, program level, or Medicaid level.

Appeal Rights

If you do not agree with your termination from Wisconsin Medicaid, you may appeal the decision. According to Wis. Admin. Code § [DHS 106.12\(4\)](#), you may submit an appeal **within 15 days of receiving the appeal notice** by submitting a **written** hearing request to the Wisconsin Department of Administration (DOA), Division of Hearings and Appeals (DHA). The appeal must include both:

- A brief statement regarding the basis for contesting the action
- A copy of the termination letter

Hearing requests may be submitted by fax to 608-264-9885, by sending an email to DHAMail@wisconsin.gov, or by mail to the following address:

Division of Hearings and Appeals
PO Box 7875
Madison WI 53707-7875

For more information about DHA's process, visit the [hearings and appeals page](#) of the DOA website.

Project Portal Page

You can find helpful project information on the [New Provider Enrollment System for Adult Long-Term Care](#) page of the Portal.



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Resources to Help You Stay Informed

Check Out the ForwardHealth Online Handbook

Information regarding the provider enrollment process will be stored in the Family Care, Family Care Partnership, PACE, and IRIS program areas of the [ForwardHealth Online Handbook](#). This is your online resource for adult LTC waiver provider-related policy. Provider enrollment-related policy will be available starting in September 2024 when Medicaid enrollment through the Portal becomes available for adult LTC waiver providers.

Note: Updates introduce new policy information. A new Update could revise policy published in a previous Update. The Online Handbook contains up-to-date policy information and serves as a resource.

In the Know

Stay current by [signing up](#) for ForwardHealth's email subscription service. Select from a list of service areas to receive policy, training, and benefit information specific to those areas.



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Adult Long-Term Care Updates announce changes in policy, contract amendments, waiver updates, and other program information.

Family Care, Family Care Partnership, the Program of All-Inclusive Care for the Elderly (PACE), and IRIS (Include, Respect, I Self-Direct) are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS).

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

ATTACHMENT

How to Use QR Codes

TWO EASY STEPS TO ACCESS THE ONLINE PORTAL



1.

OPEN YOUR CAMERA APP

Open your smartphone's camera app and hold it over the QR code so you see the QR code as if you were taking a picture of it. A prompt to follow a link should appear on your screen.



2.

CLICK THE LINK

If it does not, you can download a QR code reader from your app store, for free, to then scan and open the QR code's hyperlink. Open the QR code reader, hold it over the QR code, and it will help you open the link.

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