

Kenosha County Department of Human Services

Medicaid Newsletter

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(262) 697-4648

ForwardHealth **Reference Services/Resources:**

ForwardHealth Provider
Services Call Center: **(800) 947-9627**

WiCall Automated
Call Services: **(800) 947-3544**

ForwardHealth Member
Services: **(800) 362-3002**

ForwardHealth Portal:
www.forwardhealth.wi.gov

The ForwardHealth interchange has brought about a number of changes in the way we do business- some positive and some negative. The positives include a faster way of submitting Prior Authorizations, and an easier way of submitting denied claims. The negative list seems longer. It is harder to access necessary information to submit claims, addresses are not available on the provider portal, finding out dates of enrollment is severely limited and even known Medicaid recipients sometimes do not register with the system. The fact that every MA number is being changed and most people are unaware of the change or have not received the new ForwardHealth cards is adding to the overall confusion.

Please use the 800 numbers and website listed above for more information on ForwardHealth enrollment, claims, prior

authorizations, claims status, billing and more.

Notice to all Providers:

Beginning November 10, 2008, new ForwardHealth identification cards containing new 10 digit Medicaid Identification numbers were distributed to Medicaid members. Kenosha county residents with the Managed Health Services HMO were among the first individuals in Wisconsin to receive the cards. These new ID numbers are the replacement for the old social security based numbers. As of January 2009, all existing members have been sent the new ForwardHealth cards.

At the present time, ForwardHealth will accept either the old MA number or the new MA ID number when submitting bills. However, sometime in the near future, only the new MA ID number will be accepted for claims. (Note: it appears that while both are 10 digit numbers, the older MA#s have a 0 or a 1 as the last digit while most (but not all) of the newer MA ID#s have a higher number as the last digit like a 4,5,7,8 or 9.) According to EDS, the new ID numbers are random and there is no real way to tell the difference from the old numbers.

All providers should begin asking for and compiling, where possible, the new numbers for use in billing. Those providers who submit billing data to Kenosha County can for now submit either MA number in their billing submissions.

The new ID numbers will be on their new ForwardHealth card- see below- which all members will eventually receive.



New Medicaid Benefit

A new Medicaid Benefit will be available sometime after January 1, 2009- the BadgerCare Plus Core Plan for Childless Adults. This program will not be immediately available in Kenosha County and the timeframe for expanding the program will be determined by the Department of Health Services.

The Core Plan is similar to the BadgerCare Plus Benchmark Plan in that they represent an expansion of eligibility for benefits beyond the original BadgerCare Plus Standard Plan.

Like the BadgerCare Plus Benchmark plan, the Core Plan does not cover Case Management or Crisis Intervention, Community Support Program, or Comprehensive Community Services(CCS).

In fact, the Core Plan will only cover Mental Health and Substance Abuse services provided by a psychiatrist only.

Spring TCM reviews

In March 2009, the files from most of the Targeted Case Management (TCM) providers will be reviewed onsite to determine compliance with Medicaid regulations.

Please take time to review existing files to make sure all necessary documentation and signatures are present.

Some of the problems occasionally found and corrected in previous years were billing TCM for children in out of home placements, Plans of Care not updated every six months, ongoing notes not linked to the Plan of Care and billing for non covered services such as missed appointments or left messages.

A list of files to be reviewed will be sent to providers ahead of time.

Please contact me if there are any questions on this or on any other Medicaid related subject.