

Provider **BULLETIN** Issue 3 | 2025



Virtual Credit Card Payments

In the near future, iCare will no longer send payments in the form of paper checks to providers. Future payments from iCare will be sent to you through the mail as Claim Payment Cards unless you register for electronic funds transfer (EFT) and electronic remittance advice (ERA) from InstaMed.

Claim Payment Cards can be processed the same way you process other credit/debit card payments you receive in the mail or over the phone.

Please Note: If you do not enroll for the free EFT, the Claim Payment Cards are subject to your existing merchant processing rates.

To avoid receiving Claim Payment Cards, please visit www.instamed.com/eraeft as soon as possible to register for free ERA/EFT transactions.

Please see our website for important DHS Training for Home & Community-Based Services:

- https://www.icarehealthplan.org/Education/Resources.htm#Training__Resources

Home & Community-Based Services (HCBS) Settings Rule, Department of Health Services:

- Residential - HCBS Settings Rule: Compliance for Residential Service Providers, Wisconsin Department of Health Services
- Non-Residential - HCBS Settings Rule: Compliance for Non-Residential Service Providers, Wisconsin Department of Health Services
- DHS FAQ HCBS Settings Rule: FAQs, Wisconsin Department of Health Services

YouTube Videos:

- HCBS Overview
- HCBS Provider Requirements for Residential Setting
- What does the Rule Guarantee?

HCBS Benchmarks:

- Benchmark Guide for Home and Community-Based Services Settings Rule: Certified 1-2 Bed Adult Family Homes
- Benchmark Guide for Adult Residential Settings: Home and Community-Based Services (HCBS) Settings Rule

Medicare Coverage Policy and Prior Authorization List (PAL) Updates - July 2025

Please see our website (www.icarehealthplan.org/Provider-Documents.htm) for updates to the Medicare Coverage Policies and PAL updates (www.icarehealthplan.org/Prior-Authorization.htm.)

Members and providers may request a copy of the criteria used to make this UM determinations by calling the Prior Authorization Department at 414-299-5539 or 855-839-1032.

iCare's Clinical Coverage Policies are also available at <https://www.icarehealthplan.org/Members/Member-Documents.htm>.



ForwardHealth Updates

New Telehealth Codes - Effective January 1, 2025:

- ForwardHealth covers new CPT codes 98000-98015 for E/M services. Once the systems updates are complete, ForwardHealth will automatically process any suspended claims. No other action is required.
- The AMA end-dated E/M telehealth CPT codes 99441, 99442, and 99443 December 31, 2024.

Per AMA official guidance:

- CPT codes 99202–99205 and 99212–99215 are no longer used with telehealth place of service (POS) codes 02 (Telehealth Provided Other Than in Patient's Home) and 10 (Telehealth Provided in Patient's Home).
- POS codes 02 and 10 for 99202–99205 and 99212–99215 were end-dated December 31, 2024. If a claim was previously denied, providers should refer to the new E/M telehealth CPT codes 98000–98015.
- ForwardHealth has updated coverage policy for office or outpatient E/M services. This mirrors official AMA changes to Appendix P of the 2025 CPT codebook (with CPT codes that may be used for synchronous real-time interactive audio-visual telemedicine services).

Reminder: Policy information for CPT and Healthcare Common Procedure Coding System (HCPCS) procedure codes is subject to change.

Physician Assistants can bill as Separate Providers

For dates of service on or after June 1, 2025, physician assistants can submit claims to ForwardHealth as billing providers. Prior to June 1, 2025, physician assistants were rendering-only providers.

- Physician Assistant Enrollment.
- Physician Assistant Services.
- Practice Policy.
- Claims Submission.

See May 2025 Update No. 2025-13 for more information.

