

Provider **BULLETIN**

Issue 4 | 2025



Time is Running Out to Enroll with Medicaid using the ForwardHealth Portal by January 1, 2026

2026 is closer than it seems! We urge all our providers delivering Medicaid waiver authorized services to enroll with Wisconsin Medicaid through the ForwardHealth Portal right away.

Enrolling now will help you avoid disruptions in the new year. That's important for both you and the Medicaid members you serve!

If you haven't already, start your Wisconsin Medicaid provider enrollment application today at https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Certification/EnrollmentCriteria.aspx Enrolling now will ensure that you:

- Get paid in 2026. You won't get paid for delivering Medicaid services in homes or communities if you don't enroll by January 1, 2026. Keep in mind, you can't backdate your enrollment to a date before you submitted your application, and Medicaid members and families cannot be held liable for paying for Medicaid services you don't get reimbursed for.
- **Help the people you serve get seamless care.** Medicaid members depend on service providers like you to get vital care. Staying on with them means they won't have to find new service providers next year.
- **Join more than 2,000 other providers who've already enrolled.** Our goal is 100% enrollment by the new year, but time is running out.

Find everything you need to enroll at <u>forwardhealth.wi.gov/WIPortal/cms/public/ltc/provider_enrollment.htm</u> —on-demand trainings, resources, help, and more.

Make sure to subscribe to the Adult LTC Waiver Provider email list by going to www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Subscriptions.aspx—you'll get updates, reminders, and resources sent right to your inbox.

An Article From ForwardHealth: Adult Long-Term Care --Everyone living their best life

Do you need help completing a Wisconsin Medicaid provider enrollment application on the ForwardHealth Portal? Join us for in-person support.



If you are an adult long-term care (LTC) waiver services provider, the deadline to submit your Wisconsin Medicaid application through the ForwardHealth Portal (the Portal) is coming soon! It is important to enroll with Wisconsin Medicaid as soon as possible to make sure you continue to be paid by managed care organizations (MCOs) or IRIS (Include, Respect, I Self-Direct) fiscal employer agents (FEAs).

If you are looking for someone to help you enroll, the Wisconsin Department of Health Services (DHS) is hosting six in-person support sessions throughout the State of Wisconsin.

Find an in-person support session near you.

Check out the table below to find the dates and locations for each support session. Sessions are from 8 a.m.— 5:30 p.m. and each session is one hour.

Sign up for an in-person support session.

www.iCareHealthPlan.org ProviderRelationsSpecialist@iCareHealthPlan.org

Date	County	Address
December 3, 2025	Dane	ForwardHealth Gainwell Building 313 Blettner Blvd Madison, WI 53784
December 4, 2025	Eau Claire	Holiday Inn 4751 Owen Ayres Ct Eau Claire, WI 54701
December 10, 2025	Brown	Hyatt Regency 333 Main St Green Bay, WI 54301
December 11, 2025	Marathon	Jefferson Street Inn 201 Jefferson St Wausau, WI 54403
December 17, 2025	Milwaukee	Comfort Suites 6362 South 13th St Oak Creek, WI 53154
December 18, 2025	Waukesha	The Ingleside Hotel 2810 Golf Rd Pewaukee, WI 53072

What do you need to bring?

- Any ownership or controlling interest information related to the adult LTC provider (Refer to ForwardHealth Online Handbook Terminology to Know for Provider Enrollment topic #14317 for definitions of ownership or controlling interest.)
- Criminal conviction and termination disclosure information
- Address information, including Practice Location, Mailing Location, 1099 Mailing Location, and a valid email address
- All tax information, including Taxpayer Identification Number (TIN) and TIN effective dates
- License and certification information
- Your own laptop, if you have one available

Additional enrollment resources

- The <u>enrollment checklist (PDF)</u> has step-bystep instructions to walk you through the process.
- The Adult LTC: Waiver Service Provider Enrollment recorded training demonstrates how to enroll.
- The <u>Provider Enrollment for Adult Long-Term Care</u> page of the Portal has additional trainings and more information about provider enrollment.
- The ForwardHealth Provider Services call center can help with any additional questions you have.
 Call 800-947-9627 and say "LTC Waiver" at the menu prompt. Representatives are available
 Monday-Friday, 7 a.m.-6 p.m. Central Time.
- The ForwardHealth Portal offers many additional resources.

Compliance Requirement

*i*Care is implementing the CMS Prior Authorization (PA) Final Rule, which requires managed care organizations to process urgent authorization requests within 72 hours and standard authorization requests within 7 calendar days.

CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F) | CMS

Effective Date:

These changes will take effect on October 27, 2025, to ensure compliance prior to January 1, 2026.

Programs Impacted:

The CMS PA Final Rule applies to all Medicare and Medicaid services that require prior authorization. Specifically, this affects BadgerCare, SSI, and the Medicare Special Needs Plans (SNP). For Family Care Partnership, only Medicare and Medicaid services that require prior authorization are impacted.

Process Changes:

*i*Care will closely align with Humana's prior authorization procedures, including the following updates:

- For authorization requests submitted without complete clerical information (e.g., missing service code, member name), *i*Care will make one outreach using two modalities to request the necessary details. This outreach will be conducted via phone and fax.
- For requests lacking complete clinical information (e.g., lab values, imaging summaries), *i*Care will make one outreach using two modalities for additional information, also via phone and fax. Providers will have 24 hours to respond to requests for additional clinical information.

Provider and Member Contact Information:

Providers or members who have questions may contact Customer Care:

Phone: 1-800-777-4376TTY: 1-800-947-3529

Office Hours: Monday - Friday, 8:30 a.m. - 5:00 p.m.

Medicare Coverage Policy and Prior Authorization (PAL) Updates - December 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.

*i*Care's Clinical Coverage Policies are also available at https://www.icarehealthplan.org/Members/ Member-Documents.htm.

Virtual Credit Card Payments

In the near future, *i*Care 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: https://www.icarehealthplan.org/Provider-Documents.htm for updates to the Medicare Coverage Policy and https://www.icarehealthplan.org/Prior-Authorization.htm for updates to the PAL
- 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.

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ForwardHealth Updates

<u>Forwardhealth Vaccine Coverage: New Sources of Vaccine Recommendations and Revised Billing for COVID-19</u>, Influenza, and Measles, Mumps, Rubella, and Varicella Vaccines

Billing Reminders for Personal Care Agencies

When submitting claims on the UB04:

- Do not use an ADMIT Type (Box 14), it is only required for Inpatient Claims.
- If Admission Source is unknown (Box 15), Use 9, do not use 0 (zero) or leave blank.

Annual Reminders:

Model of Care

It is important for providers to review iCares Model of Care on an annual basis. This can be found on our website: https://www.icarehealthplan.org/Education/Resources.htm

Cultural Competency Training

Cultural competency training should be completed annually. Please see our website under Training and Resources to view iCare's training on inclusion, Health Equity and Cultural competency. https://www.icarehealthplan.org/Education/Resources.htm

Fraud, Waste and Abuse

Review our Fraud, Waste and Abuse information which can found on our website: https://www.icarehealthplan.org/Education/Resources.htm



Thank you for your partnership in 2025

As an *i*Care provider, you play a key role in our success. We share many of the same goals when it comes to serving our members, your patients. Thank you for your commitment to providing the utmost of care to those we serve. We value your partnership and look forward to working with you in the coming year! We wish you and yours a happy holiday season with good health, much happiness, and joyful service to others. All the best in 2026!

www.iCareHealthPlan.org
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