

PUBLIC NOTICE
Department of Health Services
(Medicaid Reimbursement for Dental Services)

The State of Wisconsin reimburses providers for services provided to Medical Assistance recipients under the authority of Title XIX of the Social Security Act and ss. 49.43 to 49.47, Wisconsin Statutes. This program, administered by the State's Department of Health Services (the Department), is called Medical Assistance (MA) or Medicaid. In addition, Wisconsin has expanded this program to create the BadgerCare Plus programs under the authority of Title XIX and Title XXI of the Social Security Act and s. 49.471 of the Wisconsin Statutes. Federal statutes and regulations require that a state plan be developed that provides the methods and standards for reimbursement of covered services. A plan that describes the reimbursement system for the services (methods and standards for reimbursement) is now in effect.

Change in Payment Methods

As directed by the state legislature in the 2017-19 biennial budget (2017 Wisconsin Act 59), the Department shall provide enhanced MA reimbursement rates for dental services rendered by providers that provide at least 90% of their dental services to individuals with cognitive and physical disabilities. The enhanced MA reimbursement rate would equal 200% of the MA reimbursement rate that would otherwise be paid for these dental services

This is a renotification of changes affecting MA dental reimbursement rates. The original was published on December 3, 2018. The effective date has changed. The current intended effective date is January 1, 2019 and will apply to claims with dates of service on or after that date. The change to Medicaid, BadgerCare, and BadgerCare Plus is projected to result in an increased annual expenditure of \$1.7 million All funds (AF), composed of \$986,000 federal match (FED) and \$714,000 state funds/general purpose revenue (GPR), effective 01/01/2019.

Copies of Changes

Copies of the State Plan Amendment, Attachment 4.19-B Section 20, may be obtained free of charge by calling or writing as follows:

Regular Mail:

Karl Hauth
Bureau of Benefits Management
Division of Medicaid Services
P.O. Box 309
Madison, WI 53701-0309

Fax:

(608) 266-1096
Attention: Karl Hauth

Telephone:

Karl Hauth
Bureau of Benefits Management
(608) 266-5209

E-Mail:

DHSDMSSPAPublicFeedback@dhs.wisconsin.gov

Copies of the state plan change will be made available for review at the main office of any county department of social services or human services.

Written Comments

Written comments are welcome. Written comments on the proposed changes may be sent by FAX, e-mail, or regular mail to the Division of Medicaid Services. The FAX number is (608) 266-1096. The e-mail address is DHSDMSSPAPublicFeedback@dhs.wisconsin.gov. Regular mail can be sent to the above address. All written comments will be reviewed and considered.

The written comments will be available for public review between the hours of 7:45 a.m. and 4:30 p.m. daily in Room 350 of the State Office Building, 1 West Wilson Street, Madison, Wisconsin. Revisions may be made in the proposed methodology change based on comments received.