

ForwardHealth UPDATE

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SYNAGIS CARVED OUT FOR MANAGED CARE ORGANIZATION MEMBERS

Effective for dates of service on and after October 1, 2020, Synagis will be carved out and reimbursed fee-for-service for members enrolled in BadgerCare Plus and Wisconsin Medicaid, including members enrolled in managed care organizations. All fee-for-service policies apply. Clinical criteria and prior authorization (PA) policy for Synagis remain as described in the [Prior Authorization Requests and Amendments for Synagis](#) topic (#7877) of the ForwardHealth Online Handbook.

For the 2020–2021 respiratory syncytial virus season, ForwardHealth will accept PAs for Synagis from billing providers beginning on October 1, 2020, for dates of service on and after November 1, 2020.

Synagis Coverage

Synagis (palivizumab), a monoclonal antibody, is used as a prophylaxis to reduce lower respiratory tract disease caused by respiratory syncytial virus in high-risk children. Currently, managed care organizations are responsible for reimbursing providers for Synagis. Effective October

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

County Waiver Agencies,
HealthCheck “Other Services”
Providers, Nurse Practitioners,
Pharmacies, Physician Assistants,
Physician Clinics, Physicians,
HMOs and Other Managed Care
Programs

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code § DHS 107.10(2)(d).

1, 2020, Synagis will be carved out consistent with provider-administered drug policy. Providers should refer to the [Provider-Administered Drugs](#) topic (#5697) in the Covered and Noncovered Services section of the ForwardHealth Online Handbook for more information. Providers should bill for Synagis as described in the [Provider-Administered Drugs](#) topic (#4382) of the Claims section of the Online Handbook.

Claims for Synagis must be submitted on a professional claim. Prescribers and pharmacy providers are required to indicate Current Procedural Terminology procedure code 90378 (Respiratory syncytial virus, monoclonal antibody, recombinant, for intramuscular use, 50 mg, each) and the appropriate unit(s) on each claim. To comply with the requirements of the Deficit Reduction Act of 2005, the National Drug Codes of the drug dispensed, the quantity, qualifier, and unit dispensed must also be indicated on claims for Synagis.

Providers must **not** indicate Healthcare Common Procedure Coding System procedure code J3490 (Unclassified drugs) on claims submitted to ForwardHealth for Synagis, as the claim will be denied. Providers should refer to the [Synagis](#) topic (#1951) of the Online Handbook for claim submission information specifically tailored to Synagis.

Synagis Prior Authorization

As a reminder, Synagis requires PA unless it is administered in a hospital. Providers should refer to the Prior Authorization Requests and Amendments for Synagis topic (#7877) of the Online Handbook for complete clinical criteria for Synagis.

PA for Synagis must be requested by prescribers or their designees, **not** pharmacy providers.

Submitting Prior Authorization Requests on the Portal, by Fax, or by Mail

Prescribers or their designees are required to request PA for Synagis using one of the following options:

- Drug Authorization and Policy Override Center
- ForwardHealth Portal
- Fax
- Mail

A prescriber or their designees should have all PA information completed before calling the Drug Authorization and Policy Override Center to request PA.

QUICK LINKS

- [Prior Authorization Requests and Amendments for Synagis](#) topic (#7877)
- [Synagis](#) topic (#1951)

Note: These topics will be updated on October 1, 2020.

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Prescribers are required to retain a copy of the PA form and any supporting documentation.

If a prescriber or their designee chooses to submit a paper PA request for Synagis by fax or mail, the following must be completed and submitted to ForwardHealth:

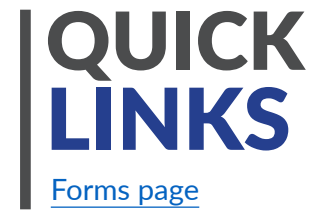
- Prior Authorization Request Form (PA/RF), F-11018 (05/2013), for physician services
- Prior Authorization Drug Attachment for Synagis, F-00142 (10/2014)
- Supporting documentation, as appropriate

The Prior Authorization Fax Cover Sheet, F-01176 (12/2011), is available on the [Forms page](#) of the Portal for providers submitting the forms and documentation by fax.

Prescribers are reminded that they are required to sign and date each PA request form when submitting the request on paper. For additional information about PA requests and amendments for Synagis, providers may refer to the Prior Authorization Requests and Amendments for Synagis topic (#7877) of the Online Handbook.

When requesting PA for Synagis, the prescribing provider must identify the name and National Provider Identifier (NPI) of the provider who intends to submit a claim for reimbursement for Synagis (that is, the billing provider).

IF ...	THEN ...
The prescribing provider intends to submit the claim,	The prescribing provider must list their name and NPI on the PA request as the billing provider.
The prescribing provider's clinic or group intends to submit the claim,	The prescribing provider must list the clinic or group's name and NPI on the PA request as the billing provider.
The pharmacy provider intends to submit the claim,	The prescribing provider must submit the pharmacy provider's name and NPI on the PA request as the billing provider. In this case, it is the prescribing provider's responsibility to acquire the pharmacy provider's name and NPI for the PA request.



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Documentation Retention

Providers are reminded that they must follow the documentation retention requirements, per Wis. Admin. Code § [DHS 106.02\(9\)](#). Information about those requirements can be found in the following Online Handbook topics:

- [Financial Records](#) (#201)
- [Medical Records](#) (#202)
- [Preparation and Maintenance of Records](#) (#203)
- [Record Retention](#) (#204)
- [Availability of Records to Authorized Personnel](#) (#1640)

Providers are required to produce and/or submit documentation to ForwardHealth upon request. ForwardHealth may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from Wisconsin Medicaid.

Information Regarding Managed Care Organizations

This Update contains fee-for-service policy for members enrolled in Wisconsin Medicaid and BadgerCare Plus who receive pharmacy services on a fee-for-service basis only. Pharmacy services for Medicaid members enrolled in the Program of All-Inclusive Care for the Elderly (PACE) are provided by the member's managed care organization.

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

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