

**PUBLIC NOTICE**  
**Department of Health Services**  
**(Medicaid Reimbursement for**  
**Disposable Medical Supplies and Durable Medical Equipment)**

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**

To comply with Section 503 of the federal Consolidated Appropriations Act and Section 5002 of the federal 21st Century Cures Act, the Department is proposing changes in the methods of payment and payment rates for certain disposable medical supplies and durable medical equipment identified in the federal Acts.

This is a renotification of changes affecting disposable medical supplies and durable medical equipment. The original was published on September 24, 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 reduced annual expenditures of \$3.9 million all funds (AF), composed of \$2.6 million federal match (FED) and \$1.3 million state funds/general purpose revenue (GPR), effective January 1, 2019.

**Copies of Changes**

Copies of the available proposed changes and proposed rates may be obtained free of charge by writing to:

Regular Mail:

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

Fax:

(608) 266-1096  
Attention: Theresa Walske

Telephone:

Theresa Walske  
Bureau of Benefits Management  
(608) 266-7415

E-Mail:

[DHSDMSSPAPublicFeedback@dhs.wisconsin.gov](mailto: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](mailto: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 changed methodology based on comments received.