HOSPITAL TERMS OF REIMBURSEMENT

Interim payment and final hospital reimbursement rates for services rendered commencing with the effective date of the provider agreement shall be determined by the Wisconsin Department of Health Services pursuant to the Inpatient and Outpatient Hospital State Plan for Title XIX Hospital Reimbursement, effective July 1, 1999, or as may be amended.

Interim hospital payments may be adjusted during the term of the provider agreement to more closely approximate the final reimbursement rates.

Providers are required to bill their usual and customary charges for services provided, that charge being the amount charged by the provider for the same service when provided to non-Medicaid patients, as defined by Wis. Admin. Code § <u>DHS 101.03(181)</u>. For providers who have not established usual and customary charges, the charge should be reasonably related to the provider's cost for providing the service.

The Department of Health Services shall adjust payments made to providers to reflect the amounts of any allowable copays, which providers are required to collect pursuant to Wis. Stat. ch. 49.

Payments for deductible and coinsurance payable on an assigned Medicare claim shall be made in accordance with Wis. Stat. 49.46(2)(c).

In accordance with federal regulations 42 C.F.R. § 447.205, the Department of Health Services will provide public notice in advance of the effective date of any significant proposed change in its methods and standards for setting payment rates for services.

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Wisconsin Department of Health Services