

# Overview of Portal Navigation and Claims Submission Options

# Agenda

- Introduction
- Navigating the ForwardHealth Portal
- View Prior Authorization (PA) Record
- Claim Submission Options
- Direct Data Entry
  - Copy Claim
  - Create a Claim from PA
- Paper Claim
- 837 Submission
- Q&A

# Introduction

- [forwardhealth.wi.gov](http://forwardhealth.wi.gov)
- The ForwardHealth Portal allows authorized users to conduct business through a secure entry point 24 hours a day, seven days a week.
- Both public and secure information are accessible through the Portal.

# Introduction

- Public information is accessible to all users; however, users are required to establish a secure account within the Portal to gain access to secure information and to conduct business with ForwardHealth.
- Providers are encouraged to submit claims electronically as it improves efficiency, reduces billing and processing errors, and allows for the timely processing of claims.

# Navigating the ForwardHealth Portal

The screenshot shows the ForwardHealth Wisconsin portal homepage. At the top, there is a navigation bar with links for 'wisconsin.gov home', 'state agencies', and 'department of health services'. The ForwardHealth logo is prominently displayed. The main content area is organized into several sections:

- Providers:** A list of resources including provider-specific resources, becoming a provider, fee schedules, administrative codes, enrollment data, claim adjustments, enrollment, revalidation, search, e-payment, and case management software.
- Acute and Primary Managed Care:** Resources for related programs and services, enrollment data, and enrollment.
- Manufacturer Drug Rebate:** Information on the CMS Medicaid Drug Rebate Program, pharmacy information, and related services.
- Adult Long-Term Care Programs:** Resources for Family Care/Family Care Partnership/PACE and IRIS.
- Welcome to the ForwardHealth Portal:** A central area with links to resources for over-the-counter oral contraception, child care coordination services, and COVID-19 provider news. It includes an attention notice regarding Medicaid information and supported browsers (Edge, Chrome, Firefox, Safari).
- Navigation Grid:** A grid of icons linking to Providers, Acute and Primary Managed Care, Adult Long-Term Care Programs, Children's Specialty Programs, Tradino Partners, Manufacturer Drug Rebate, Partners, and Members.
- Hot Topics:** A list of current topics such as 'Better to Illuminate Than Merely to Shine: ForwardHealth Connect', 'Change Healthcare Service Interruption: Resources', and 'Required ForwardHealth Multi-Factor Authentication'.
- Policy and Communication:** A section with sub-sections for Policy (updates, handbooks, forms) and Communication (home page, guides, trainings, sign-up).

# Navigating the ForwardHealth Portal



Welcome » June 13, 2024 1:46 PM

[Login](#)

## Catalog of Trainings and Educational Resources for Providers and Other Stakeholders

A number of trainings and other educational resources are available to providers and other stakeholders to offer support in the administration of ForwardHealth's programs. Some of the offered trainings serve as an introduction to program policy and operations, while others go into more depth on a particular topic. In addition, continuing education credit is available for some courses offered through the Centers for Medicare and Medicaid Services (CMS).

FORWARDHEALTH PORTAL BASICS/NAVIGATION	PROVIDER/SERVICE AREA SPECIFIC
BILLING, CLAIMS, DRUG REBATE, & PAYMENTS	OFFICE OF THE INSPECTOR GENERAL (OIG)
COORDINATION OF BENEFITS	ACUTE AND PRIMARY MANAGED CARE
PRIOR AUTHORIZATION	ADULT LONG-TERM CARE PROGRAMS
ELECTRONIC VISIT VERIFICATION (EVV)	CHILDREN'S SPECIALTY PROGRAMS (CLTS)
OTHER TRAININGS AND RESOURCES	CALENDAR: UPCOMING LIVE VIRTUAL TRAININGS

### Other ForwardHealth Communications Resources

[Communications Home](#)

[Contact Information](#)



# Navigating the ForwardHealth Portal

**ForwardHealth Communications**

[Home](#)

**Policy**

- [ForwardHealth Updates](#)
- [Adult Long-Term Care Updates](#)
- [Online Handbooks](#)
- [Forms](#)

**Communication**

- **User Guides**
- [Training](#)
- [ForwardHealth Connect Newsletter](#)
- [Email Subscription Sign-up](#)

**User Guides**

ForwardHealth user guides and instruction sheets provide Portal users with step-by-step instructions and screen shots to help navigate Portal functionality. They do not contain policy information.

User guides have multiple sections that contain instructions for completing tasks on the Portal, such as submitting claims and prior authorization requests, accessing Remittance Advices, and enrolling in electronic funds transfer.

Instruction sheets are short, typically single-section documents that contain instructions for procedures such as searching for a claim, copying a claim, and uploading claim attachments.

**General Portal Functionality**

- [Account](#)
- [Demographic Maintenance Tool](#)
- [Electronic Payment](#)
- [E-mail Subscription](#)
- [Enrollment Verification](#)
- [HealthCheck](#)
- [Max Fee](#)
- [Newborn Reporting](#)
- [Nursing Home Information](#)
- [Nursing Home Level of Care](#)
- [Preadmission Screening and Resident Review \(PASRR\)](#)
- [Provider-Based Billing](#)
- [Other Coverage Discrepancy Report](#)
- [Prior Authorization](#)
- [Upload Audit Information Instruction Sheet](#)

**Provider Portal Claims Functionality**

**Managed Care Information**

- [2018 Quality](#)
- [Annual HMO Financial Audit](#)
- [Birth Outcome Registry Network \(BORN\)](#)
- [Clinical Laboratory Improvement Amendments \(CLIA\)](#)
- [Encounter Based Payment](#)
- [Health Insurance Fee Reimbursement Methodology](#)
- [HMO Encounter](#)
- [Managed Care Organization Pricing Administration](#)
- [Maternity Kick Payments](#)
- [Obstetric Medical Homes for High-Risk Medicaid Members](#)

**Partner Portal Functionality**

- [Partner Portal](#)

**Trading Partner Information**

# Navigating the ForwardHealth Portal

wisconsin.gov home   state agencies   department of health services

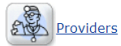
**ForwardHealth**  
Wisconsin serving you

interChange  
Provider

Welcome Gainwell Testers » June 14, 2024 8:56 AM [Logout](#)

[Home](#) | [Search](#) | **[Providers](#)** | [Enrollment](#) | [Claims](#) | [Prior Authorization](#) | [Remittance Advices](#) | [Trade Files](#) | [Health Check](#) | [Max Fee Home](#) | [Account](#) | [Contact Information](#) |  
[Online Handbooks](#) | [Site Map](#) | [iC Functionality](#) | [User Guides](#) | [Certification](#) | [Message Center](#)

You are logged in with NPI: 1012011353, Taxonomy Number: 207Q00000X, Zip Code: 53704 - 1111, Financial Payer: Medicaid

## What's New?



Providers can improve efficiency while reducing overhead and paperwork by using real-time applications available on the new ForwardHealth Portal. Submission and tracking of claims and prior authorization requests and amendments, on-demand access to remittance information, 835 trading partner designation, and instant access to the most current ForwardHealth information is now available.

- [New Rate Reform Part 3 Ideas/Recommendations Requested.](#)
- [Incentive Payments. . . Are you Eligible?](#)
- [ForwardHealth System Generated Claim Adjustments](#)

## Home Page

- [Update User Account](#)
- [Customize Home Page](#)
- [Demographic Maintenance](#)
- [Electronic Funds Transfer](#)
- [Check My Revalidation Date](#)
- [Revalidate Your Provider Enrollment](#)
- [Check Enrollment](#)
- [Provider Enrollment Upload File Check](#)
- [ForwardHealth E-payment](#)

## Messages

You have no messages.

## Quick Links

- [Register for E-mail Subscription](#)
- [Provider-specific Resources](#)
- [Request Portal Access](#)
- [Designate 835 Receiver](#)





# View PA Record


wisconsin.gov home state agencies department of health services

**ForwardHealth** Wisconsin serving you  
interChange Provider

Welcome Gainwell Testers » June 24, 2024 12:50 PM [Logout](#)

[Home](#) | [Search](#) | [Providers](#) | [Enrollment](#) | [Claims](#) | **[Prior Authorization](#)** | [Remittance Advices](#) | [Trade Files](#) | [Health Check](#) | [Max Fee Home](#) | [Account](#) | [Contact Information](#) |  
[Online Handbooks](#) | [Site Map](#) | [iC Functionality](#) | [User Guides](#) | [Certification](#) | [Message Center](#)

You are logged in with Provider ID: 41524800

 [Prior Authorization](#)

**Prior Authorization**

Prior authorization (PA) is the electronic or written authorization issued by ForwardHealth to a provider prior to a service being provided to a member. In most cases, providers are required to obtain PA before providing services that require it.

**User Guides**

- View the Prior Authorization User
- [Guide](#)

Select a link below to begin a process that you need.

- [Submit a new PA](#)
- [Complete a saved PA request](#)
- [Check on a previously submitted PA](#)
- [Amend an approved PA](#)
- [Correct a returned PA](#)



# View PA Record

[Find PA Record](#) » [Choose PA Record](#) » [PA Record](#)

### Find PA Record

To view a PA record enter the PA Number in the PA Number field and select "View PA Record".

PA Number

If you do not know the PA number, enter the member information in one or more of the data fields and select "Search" to view available PAs, or select "Clear" and "Search" to view the entire list of PAs submitted by your Provider ID.

Process Type

- Any
- 111 - Physical therapy (PT)
- 112 - Occupational therapy (OT)
- 113 - Speech and language pathology (SLP)
- 114 - Spell of illness (SOI) for PT
- 115 - SOI for OT

Member ID

Requested Start Date

PA Status

Amendment Status

# View PA Record

**Choose PA Record**

From the list below select the PA record you wish to view and press enter. If the PA is not listed, select "Previous", refine your search criteria and search again, or [contact](#) provider services for assistance at 1-800-947-9627.

PA Number	Member Id	Last Name	First Name	Process Type	PA Status	Amendment Status	Requested Start Date	Grant Date	Expiration Date	PA Notice
<a href="#">5241760001</a>	9010012081	CARLSON	MCD ONE FORTYSE	121 - Personal care services	PENDING - FISCAL AGENT REVIEW		06/24/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5241720001</a>	9010012121	CARLSON	BABY THIRTYFOUR	121 - Personal care services	SUSPENDED - PROVIDER SENDING INFO		06/20/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5240530001</a>	9010012081	CARLSON	MCD ONE FORTYSE	121 - Personal care services	PENDING - FISCAL AGENT REVIEW		02/22/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5240180003</a>	9010012081	CARLSON	MCD ONE FORTYSE	121 - Personal care services	PENDING - FISCAL AGENT REVIEW		01/19/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5240050001</a>	2201692726	CARLSON	SPENDDOWN	121 - Personal care services	PENDING - FISCAL AGENT REVIEW		01/05/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5233470002</a>	9208984494	MILLER MSK	FRANCE MSK	121 - Personal care services	INACTIVE - INFO NOT RECEIVED		12/13/2023	0	0	<a href="#">Decision Notice</a>
<a href="#">2241250201</a>	9010012121	CARLSON	BABY THIRTYFOUR	120 - HOME HEALTH	APPROVED		09/30/2023	09/30/2023	10/29/2023	<a href="#">Decision Notice</a>
<a href="#">2241250201</a>	9010012121	CARLSON	BABY THIRTYFOUR	120 - HOME HEALTH	APPROVED		09/30/2023	12/30/2023	03/29/2024	<a href="#">Decision Notice</a>
<a href="#">5232560001</a>	9000036013	HALL	TEST	121 - Personal care services	INACTIVE - INFO NOT RECEIVED		09/13/2023	0	0	<a href="#">Decision Notice</a>



# Claim Submission Options

- Direct Data Entry (DDE)
  - Copy a paid claim
  - Create a claim from a PA
- Paper Claims
- 837


# Direct Data Entry

- Submit claims directly within the ForwardHealth Portal
- Submit claims 24 hours a day, seven days a week
- Immediate feedback to any errors
- Specific functionality to make submitting multiple claims easier

# Direct Data Entry

Home | Search | Providers | Enrollment | **Claims** | Prior Authorization | Remittance Advices | Trade Files | Max Fee Home | Account | Contact Information | Online Handbooks | Site Map | User Guides | Message Center

You are logged in with Provider ID: 41524800

 Claims

Search

## Claims

### Claims Submission Options

Providers may submit claims to ForwardHealth electronically or on paper. Providers are encouraged to submit claims electronically as it improves efficiency, reduces billing and processing errors, and allows for the timely processing of payments.

Providers may begin the claim processing function by clicking on the following options.

### What would you like to do?

- [Claim search](#)
- [Claims Submission Report](#)
- [Submit Institutional Claim](#)
- [Submit Professional Claim](#)
- [Upload Claim Attachments](#)
- [Create a Claim From PA](#)
- [WWWP Reporting Form Search](#)
- [Submit WWWP Breast Cancer Diagnostic and Follow Up Report](#)
- [Submit WWWP Cervical Cancer Diagnostic and Follow Up Report](#)
- [Submit WWWP Breast and Cervical Cancer Screening Activity Report](#)

### User Guides

- [Portal User Guides](#)

# Direct Data Entry

You are logged in with NPI: 8591521520, Taxonomy Number: 207QS0010X, Zip Code: 53704 - 4444, Financial Payer: Medicaid

Claims > Professional

Next Search By: ICN

## Professional Claim

Required fields are indicated with an asterisk (\*).

ICN	<input type="text"/>	Rendering Provider	8591521520	NPI	[ Search ]
Provider ID	8591521520 NPI	Referring Provider 1	<input type="text"/>		[ Search ]
Member ID*	9010006554	Referring Provider 2	<input type="text"/>		[ Search ]
Last Name	CLTSCLAIMSTEST	Medicare Disclaimer	no disclaimer <input type="button" value="v"/>		
First Name, MI	FIRST ONE	Other Insurance Indicator	<input type="button" value="v"/>		
Date of Birth	06/07/2017				
Patient Account #	<input type="text"/>	Total Charge*	<input type="text" value="\$0.00"/>		
Medical Record Number	<input type="text"/>	Other Insurance Amount	<input type="text" value="\$0.00"/>		
SOI Date	<input type="text"/>	Total Amount Paid	<input type="text" value="\$0.00"/>		
		Net Difference	<input type="text"/>		

[Diagnosis](#) [Condition](#) [Medicare](#) [Anesthesia](#) [Other Insurance](#)

## Diagnosis

Sequence	<input type="text" value="1"/>	Diagnosis 1	<input type="text" value="Z41.8"/>	[ Search ]
Sequence	<input type="text" value="2"/>	Diagnosis 2	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="3"/>	Diagnosis 3	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="4"/>	Diagnosis 4	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="5"/>	Diagnosis 5	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="6"/>	Diagnosis 6	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="7"/>	Diagnosis 7	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="8"/>	Diagnosis 8	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="9"/>	Diagnosis 9	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="10"/>	Diagnosis 10	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="11"/>	Diagnosis 11	<input type="text"/>	[ Search ]
Sequence	<input type="text" value="12"/>	Diagnosis 12	<input type="text"/>	[ Search ]



# Direct Data Entry

**Detail**

Line Number	From Date of Service	To Date of Service	Procedure Code	Mod1	Mod2	Mod3	Mod4	Status	Units	Charge
A	1	06/01/2024	06/01/2024	97110	GP				1.00	\$100.00

Type data below for new record.

Line Number       Rendering Provider       NPI  [ Search ]

From Date of Service\*       Referring Provider 1  [ Search ]

To Date of Service\*       Referring Provider 2  [ Search ]

Procedure Code\*  [ Search ]      Ordering Provider  [ Search ]

Modifiers GP  [ Search ]       [ Search ]       [ Search ]       [ Search ]

Diagnosis Code Pointers 1                  

Units\*       Status

Charge\*       Allowed Amount

Place of Service Code\*  [ Search ]      CoPay Amount

Emergency       Family Planning

Notes       Professional Service Description

[NDCs for JCode](#)

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**Medicare Information(Detail)**

Line Number <input type="text" value="1"/>	Medicare Deductible <input type="text" value="\$0.00"/> +
Medicare Date Paid <input type="text" value=""/>	Medicare Coinsurance <input type="text" value="\$0.00"/> +
Medicare Paid Amount <input type="text" value="\$0.00"/>	Psychiatric Reduction <input type="text" value="\$0.00"/> +
Medicare Non Covered Charge <input type="text" value="\$0.00"/>	Medicare Copayment <input type="text" value="\$0.00"/> +
Remaining Patient Liability* <input type="text" value="\$0.00"/> =	

---

**Attachments**

\*\*\* No rows found \*\*\*

Select row above to update -or- click Add button below.

Attachment Control Number

Description

---

**Claim Status Information**

Claim Status





# Direct Data Entry

**The following messages were generated:**

Invalid Diagnosis Code - Z41.8  
Diagnosis Code is required.  
Diagnosis code pointed to from detail - 1 is not available.  
The sum of the detail Charge amounts is not equal to the header Total Charge amount.

# Direct Data Entry

### Attachments

\*\*\* No rows found \*\*\*

Select row above to update -or- click Add button below.

Attachment Control Number

Description

### Claim Status Information

Claim Status

Claim ICN

Paid Date

Paid Amount


### EOB Information

Detail Number	Code	Description
1	9918	Pricing Adjustment - Maximum allowable fee pricing applied.

# Copy Claim

- Providers may copy a claim if it is in PAY status.
- All the information on the claim will be copied to a new claim.
- Providers can then make any desired changes to the claim and submit it as a new claim.
- After submission, ForwardHealth will assign the claim a new internal control number (ICN) and status.
- Providers may refer to Copying a Claim User Guide.

# Copy Claim



interChange  
Provider

Welcome Patrick Richardson » June 24, 2024 1:46 PM  
[Logout](#)

[Home](#) | [Search](#) | [Providers](#) | [Trading Partners](#) | [Partners](#) | [Managed Care](#) | [Manufacturer](#) | [Electronic Visit Secure Home](#) | [Waiver Agency](#) | [Enrollment](#) | **Claims** | [Prior Authorization](#) | [Remittance Advices](#) | [Trade Files](#) | [Health Check](#) | [Max Fee Home](#) | [Account](#) | [Contact Information](#) | [Online Handbooks](#) | [Site Map](#) | [Portal Admin](#) | [Sys Maint](#) | [iC Functionality](#) | [Wisconsin Provider Index](#) | [User Guides](#) | [Certification](#) | [Internal Message Center](#) | [Message Center](#) | [Content Management](#) | [Content Management Approval](#)

You are logged in with NPI: 8591521520, Taxonomy Number: 207QS0010X, Zip Code: 53704 - 4444, Financial Payer: Medicaid

[Claims](#)

### Claims

**Claims Submission Options**  
Providers may submit claims to ForwardHealth electronically or on paper. Providers are encouraged to submit claims electronically as it improves efficiency, reduces billing and processing errors, and allows for the timely processing of payments.


Providers may begin the claim processing function by clicking on the following options.

**What would you like to do?**

- [Claim search](#)
- [Claims Submission Report](#)
- [Submit Dental Claim](#)

**User Guides**

- [Portal User Guides](#)



ForwardHealth  
Wisconsin serving you

# Copy Claim

[Home](#) | [Search](#) | [Providers](#) | [Trading Partners](#) | [Partners](#) | [Managed Care](#) | [Manufacturer](#) | [Electronic Visit Secure Home](#) | [Waiver Agency](#) | [Enrollment](#) | **[Claims](#)** | [Prior Authorization](#) | [Remittance Advices](#) | [Trade Files](#) | [Health Check](#) | [Max Fee Home](#) | [Account](#) | [Contact Information](#) | [Online Handbooks](#) | [Site Map](#) | [Portal Admin](#) | [Sys Maint](#) | [iC Functionality](#) | [Wisconsin Provider Index](#) | [User Guides](#) | [Certification](#) | [Internal Message Center](#) | [Message Center](#) | [Content Management](#) | [Content Management Approval](#)

You are logged in with NPI: 8591521520, Taxonomy Number: 207QS0010X, Zip Code: 53704 - 4444, Financial Payer: Medicaid

[Claims](#) » [Portal Search](#)

## Message Description

At least one of the search parameters must be entered.

## Claim Search

Required fields are indicated with an asterisk (\*).

Provider ID : 8591521520 NPI

Internal Control Number(ICN)

Member ID

Old Internal Control Number(ICN)

From Date of Service

To Date of Service

Rendering Provider ID

Claim Type

Status

Date Paid

Amount Billed

[About](#) | [Contact](#) | [Disclaimer](#) | [Privacy Notice](#)  
Wisconsin Department of Health Services



# Copy Claim

**Claim Search**

Required fields are indicated with an asterisk (\*).

Provider ID : 8591521520 NPI

Internal Control Number(ICN)       Rendering Provider ID

Member ID       Claim Type

Old Internal Control Number(ICN)       Status

From Date of Service       Date Paid

To Date of Service       Amount Billed

**Search Results**

ICN/Old ICN	Claim Sequence	Adjustment Status	Original ICN	Member ID	Member First Name	Member Last Name	From Date of Service	To Date of Service	Claim Type	Status	Date Paid	Amount Billed
2224173001003				9010006554	FIRST ONE	CLTSCCLAIMSTEST	06/01/2024	06/01/2024	Professional	PAY	06/21/2024	\$100.00
2222272001003				1111166666	MURDERER	PROFESSIONAL	02/02/2022	02/02/2022	Professional	PAY	09/29/2022	\$1,000.00
2215233001039				6111302167	AARON	DUPREE	12/22/2014	01/02/2015	Inpatient	DENY	08/21/2015	\$2,000.00
2215222001005				6111338161	BULLET	DUPREE	12/25/2014	01/01/2015	Inpatient	DENY	08/10/2015	\$600.00
2215222001084				9010003766	MCDXOVER	DUPREE	12/25/2014	12/30/2014	Inpatient Xover	DENY	08/10/2015	\$5,000.00
2215183001007				9010003733	TRAINING	DUPREE	07/01/2015	07/01/2015	Professional	PAY	07/02/2015	\$2,200.00
2215180001094				2110900628	DYLAN	SANTOLINI	06/29/2015	06/29/2015	Professional	DENY	06/29/2015	\$5,500.00
2215180001096				2110900628	DYLAN	SANTOLINI	06/29/2015	06/29/2015	Professional	DENY	06/29/2015	\$5,500.00
2224176001001				9010006554	FIRST ONE	CLTSCCLAIMSTEST	06/01/2024	06/01/2024	Professional	DENY	0	\$100.00
2217250001041				0112082106	DAME	RITTER	09/05/2017	09/05/2017	Professional	SUSPEND	0	\$1,400.00
2215180001100				2110900628	DYLAN	SANTOLINI	06/29/2015	06/29/2015	Professional	SUSPEND	0	\$5,500.00



# Copy Claim

Medicare Paid Amount	<input type="text" value="\$0.00"/>	Psychiatric Reduction	<input type="text" value="\$0.00"/>	+
Medicare Non Covered Charge	<input type="text" value="\$0.00"/>	Medicare Copayment	<input type="text" value="\$0.00"/>	+
Remaining Patient Liability*				<input type="text" value="\$0.00"/> =

**Attachments**

\*\*\* No rows found \*\*\*

Select row above to update -or- click Add button below.

Attachment Control Number

Description

**Claim Status Information**

Claim Status

Claim ICN

Paid Date

Paid Amount

**EOB Information**

Detail Number	Code	Description
1	9918	Pricing Adjustment - Maximum allowable fee pricing applied.

# Copy Claim

Next Search By: ICN

---

**Professional Claim** ?

Required fields are indicated with an asterisk (\*).

ICN 
 Rendering Provider  NPI

Provider ID  NPI 
 Referring Provider 1

Member ID\* 
 Referring Provider 2

Last Name 
 Medicare Disclaimer

First Name, MI 
 Other Insurance Indicator

Date of Birth

Patient Account # 
 Total Charge\*

Medical Record Number 
 Other Insurance Amount

SOI Date 
 Total Amount Paid

Net Difference

[Diagnosis](#)
[Condition](#)
[Medicare](#)
[Anesthesia](#)
[Other Insurance](#)

---

**Detail**

Line Number	From Date of Service	To Date of Service	Procedure Code	Mod1	Mod2	Mod3	Mod4	Status	Units	Charge
1	06/01/2024	06/01/2024	97110					GP	1.00	\$100.00

Select row above to update -or- click Add button below.

Line Number 
 Rendering Provider

From Date of Service 
 Referring Provider 1

To Date of Service 
 Referring Provider 2


Procedure Code  
 Ordering Provider



# Create a Claim from PA

Home | Search | Providers | Enrollment | **Claims** | Prior Authorization | Remittance Advices | Trade Files | Max Fee Home | Account | Contact Information | Online Handbooks | Site Map | User Guides | Message Center

You are logged in with Provider ID: 41524800

 Claims

Search

## Claims

### Claims Submission Options

Providers may submit claims to ForwardHealth electronically or on paper. Providers are encouraged to submit claims electronically as it improves efficiency, reduces billing and processing errors, and allows for the timely processing of payments.

Providers may begin the claim processing function by clicking on the following options.

### What would you like to do?

- [Claim search](#)
- [Claims Submission Report](#)
- [Submit Institutional Claim](#)
- [Submit Professional Claim](#)
- [Upload Claim Attachments](#)
- [Create a Claim From PA](#)
- [WWWP Reporting Form Search](#)
- [Submit WWWP Breast Cancer Diagnostic and Follow Up Report](#)
- [Submit WWWP Cervical Cancer Diagnostic and Follow Up Report](#)
- [Submit WWWP Breast and Cervical Cancer Screening Activity Report](#)

### User Guides

- [Portal User Guides](#)

# Create a Claim from PA

[Find PA Record](#) » [Choose PA Record](#) » [PA Record](#)

**Find PA Record**

To view a PA record enter the PA Number in the PA Number field and select "View PA Record".

PA Number

If you do not know the PA number, enter the member information in one or more of the data fields and select "Search" to view available PAs, or select "Clear" and "Search" to view the entire list of PAs submitted by your Provider ID.

Process Type

- Any
- 111 - Physical therapy (PT)
- 112 - Occupational therapy (OT)
- 113 - Speech and language pathology (SLP)
- 114 - Spell of illness (SOI) for PT
- 115 - SOI for OT

Member ID

Requested Start Date

PA Status

Amendment Status

# Create a Claim from PA

Find PA Record » Choose PA Record » PA Record

**Choose PA Record**

From the list below select the PA record you wish to view and press enter. If the PA is not listed, select "Previous", refine your search criteria and search again, or [contact](#) provider services for assistance at 1-800-947-0627.

PA Number	Member Id	Last Name	First Name	Process Type	PA Status	Amendment Status	Requested Start Date	Grant Date	Expiration Date	PA Notice
<a href="#">5240020002</a>	9400281202	TORRES MSK	FRANCIS MSK	146 - Supportive Housing Agency	RETURNED - PROVIDER REVIEW		04/01/2024	0	0	<a href="#">Decision Notice</a>
<a href="#">5233100002</a>	020890202	SCOTT MSK	DARBY MSK	146 - Supportive Housing Agency	APPROVED - WITH MODIFICATIONS	RETURNED - PROVIDER REVIEW	02/01/2024	11/15/2023	11/15/2024	<a href="#">Decision Notice</a>
<a href="#">5240030002</a>	040022791	NGUYEN MSK	EDDIE MSK	146 - Supportive Housing Agency	APPROVED	PENDING - FISCAL AGENT REVIEW	01/07/2024	01/07/2024	01/06/2025	<a href="#">Decision Notice</a>
<a href="#">5240000001</a>	9400547196	MITCHELL MSK	TAYLOR MSK	146 - Supportive Housing Agency	APPROVED	PENDING - FISCAL AGENT REVIEW	01/06/2024	01/06/2024	01/05/2025	<a href="#">Decision Notice</a>
<a href="#">5240000002</a>	9400012098	HERNANDEZ MSK	BELLIE MSK	146 - Supportive Housing Agency	APPROVED	PENDING - FISCAL AGENT REVIEW	01/01/2024	01/01/2024	12/31/2024	<a href="#">Decision Notice</a>
<a href="#">5233400001</a>	9209017293	TURNER MSK	FONDA MSK	146 - Supportive Housing Agency	DENIED		12/20/2023	12/20/2023	12/20/2023	<a href="#">Decision Notice</a>
<a href="#">5233400002</a>	9208993591	JACKSON MSK	AUDRIA MSK	146 - Supportive Housing Agency	APPROVED		12/20/2023	12/20/2023	12/19/2024	<a href="#">Decision Notice</a>
<a href="#">5233800001</a>	9208984494	MILLER MSK	FRANCE MSK	146 - Supportive Housing Agency	APPROVED	PENDING - FISCAL AGENT REVIEW	12/20/2023	12/20/2023	12/19/2024	<a href="#">Decision Notice</a>
<a href="#">5233400002</a>	9208904598	EITXC	SIASW	146 - Supportive Housing Agency	PENDING - FISCAL AGENT REVIEW		12/20/2023	0	0	<a href="#">Decision Notice</a>
<a href="#">5233470001</a>	9410000390	DXCTESTA	IAN	146 - Supportive Housing Agency	DENIED		12/13/2023	12/13/2023	12/13/2023	<a href="#">Decision Notice</a>

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# Create a Claim from PA

Next Search By: ICN  [ search ] [ clear ] [ New Search ]

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**Professional Claim**

Required fields are indicated with an asterisk (\*).

ICN <input type="text"/>	Rendering Provider <input type="text"/> [ Search ]
Provider ID <input type="text"/> 41524800 MCD	Referring Provider 1 <input type="text"/> [ Search ]
Member ID* <input type="text"/>	Referring Provider 2 <input type="text"/> [ Search ]
Last Name <input type="text"/>	Medicare Disclaimer <input type="text"/> no disclaimer
First Name, MI <input type="text"/>	Other Insurance Indicator <input type="text"/>
Date of Birth <input type="text"/>	
Patient Account # <input type="text"/>	Total Charge* <input type="text"/> \$0.00
Medical Record Number <input type="text"/>	Other Insurance Amount <input type="text"/> \$0.00
SOI Date <input type="text"/>	Total Amount Paid <input type="text"/> \$0.00
	Net Difference <input type="text"/>

[Diagnosis](#) [Condition](#) [Medicare](#) [Anesthesia](#) [Other Insurance](#)

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**Detail**

Line Number	From Date of Service	To Date of Service	Procedure Code	Mod1	Mod2	Mod3	Mod4	Status	Units	Charge
A 1									0	\$0.00

Type data below for new record.

Line Number <input type="text"/> 1	Rendering Provider <input type="text"/> [ Search ]
From Date of Service* <input type="text"/>	Referring Provider 1 <input type="text"/> [ Search ]
To Date of Service* <input type="text"/>	Referring Provider 2 <input type="text"/> [ Search ]
Procedure Code* <input type="text"/> [ Search ]	Ordering Provider <input type="text"/> [ Search ]
Modifiers <input type="text"/> [ Search ] <input type="text"/> [ Search ] <input type="text"/> [ Search ] <input type="text"/> [ Search ]	
Diagnosis Code Pointers <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Units* <input type="text"/> 0	
Charge* <input type="text"/> \$0.00	Status <input type="text"/>
Place of Service Code* <input type="text"/> [ Search ]	Allowed Amount <input type="text"/> \$0.00
Emergency <input type="text"/>	CoPay Amount <input type="text"/> \$0.00
Family Planning <input type="text"/>	

# Paper Claims

- ForwardHealth will accept paper claims.
- ForwardHealth does not supply 1500 Professional or UB-04 Claim Forms.

# 837 Claim Submission

- Providers have the option to submit 837 claims to ForwardHealth.
- This topic will be discussed further in a later presentation.

# Questions?

Please send questions to:  
[DHSCLTSPROVIDERRELATIONS@dhs.wisconsin.gov](mailto:DHSCLTSPROVIDERRELATIONS@dhs.wisconsin.gov)

**Thank You**