

ForwardHealth **UPDATE**

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PRIOR AUTHORIZATION PROCESS IMPROVEMENTS: REMOVING SPELL OF ILLNESS AND REVISING LIMITS FOR THERAPY SERVICES

Beginning January 1, 2026, ForwardHealth will discontinue the spell of illness (SOI) policy for physical therapy (PT), occupational therapy (OT), and speech and language pathology (SLP) services.

ForwardHealth will also change the threshold for outpatient therapy and Birth to 3 Program therapy services rendered before needing prior authorization (PA). ForwardHealth will discontinue the lifetime limit of 35 days of service prior to PA. Members may receive up to 35 days of medically necessary services per discipline per calendar year prior to needing PA.

This ForwardHealth Update is the [second in a series](#) regarding PA process changes related to the Centers for Medicare & Medicaid Services (CMS) Interoperability and Prior Authorization Final Rule ([CMS-0057-F](#)).

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

Audiologists, Occupational Therapists, Physical Therapists, Rehabilitation Agencies, Speech-Language Pathologists, Therapy Groups, HMOs and Other Managed Care Programs

QUICK LINKS

- [Prior Authorization Process Improvements page](#)
- [Forms page](#)

The information provided in this ForwardHealth Update is published in accordance with CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F).

Removal of Spell of Illness

Effective January 1, 2026, ForwardHealth will discontinue the SOI policy for therapy services. ForwardHealth will end date all active SOI PA requests to December 31, 2025.

For dates of service on or after January 1, 2026, outpatient therapy providers should use process types 111, 112, and 113 when submitting PA requests.

ForwardHealth will no longer accept SOI process types 114, 115, and 116 for PT, OT, and SLP services beginning on January 1, 2026. PA requests submitted by providers with these process types will be returned.

Revised Prior Authorization/Therapy Attachment Form

Providers should request a PA using the revised Prior Authorization/Therapy Attachment (PA/TA) form, F-11008 (12/2025), using process types 111, 112, and 113 as appropriate.

All related forms will be revised to reflect this change and will be available on the [Forms](#) page of the ForwardHealth Portal on or before January 1, 2026.

Removal of Lifetime Limit for Therapy Services

Instead of a lifetime limit for therapy services, BadgerCare Plus and Medicaid members will receive up to 35 medically necessary PT, OT, and SLP visits per calendar year before PA is needed (except for certain services that always require PA).

Submitting Outpatient Therapy PA Requests

A PA request for therapy services must include two completed forms:

- Prior Authorization Request Form (PA/RF), F-11018 (05/2013)
- PA/TA form, F-11008 (12/2025)

Providers must submit the updated PA/TA form. ForwardHealth will return a PA request submitted on an outdated PA/TA form.

Providers no longer need to submit an Individualized Education Plan for school-aged children for any outpatient PA requests. Providers must still submit [coordination of care documentation](#) in Element 10 in the PA/TA for any subsequent requests.

QUICK LINKS

- Prior Authorization for HealthCheck Other Services topic [#1](#)
- Overview topic [#2714](#) in the Birth to 3 and Therapies service areas
- Dual Treatment topic [#2726](#)
- Cotreatment topic [#2728](#)
- Unlisted Procedures topic [#2802](#)
- An Overview topic [#2957](#) in the Hearing service area
- Coordination of Care topic [#21279](#)

REVISED FORM

Prior Authorization/Therapy Attachment (PA/TA) form, F-11008 (12/2025)

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Effective January 1, 2026, ForwardHealth will render the Prior Authorization/ Spell of Illness Attachment (PA/SOIA) form, F-11039, obsolete. If providers use the PA/SOIA form after this date, ForwardHealth will return their request, and the provider will be required to submit the updated PA/TA form.

Submitting Birth to 3 Program PA Requests

The PA request process for Birth to 3 Program therapy services remains the same and must still include two forms:

- PA/RF
- Prior Authorization/Birth to 3 Attachment (PA/B3), F-11011 (07/2012)

PA's submitted by a Birth to 3 Program provider will be approved for that therapy discipline through the date the member turns 3 years old. No further PA requests will be required for that therapy discipline while the member is enrolled in the Birth to 3 Program.

Note: Providers treating members aged 0–3 years old should ensure appropriate [coordination of care](#).

Refer to the [ForwardHealth Online Handbook](#) for updated policy information.

Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to the Wisconsin Department of Health Services (DHS) upon request. Per Wis. Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by DHS for verification of provider claims for reimbursement. DHS may audit such records to verify the actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

THE KEY MESSAGE

BadgerCare Plus and Medicaid members receive up to 35 medically necessary PT, OT, and SLP visits per calendar year before PA is needed (except for certain services that always require PA).

Information Regarding Managed Care Organizations

This Update applies to PT, OT, and SLP services that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The information provided in this ForwardHealth Update is published in accordance with CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F).

This Update was issued on 12/19/2025 and information contained in this Update was incorporated into the Online Handbook on 01/02/2026.

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 HIV 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/.