

ForwardHealth **UPDATE**

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PRIOR AUTHORIZATION PROCESS IMPROVEMENTS: THERAPIES DUAL TREATMENT, MODIFIERS FOR DISPOSABLE MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT

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

ForwardHealth will now:

- Process dual treatment differently for PA requests for three types of therapy treatments.
- Require disposable medical supplies (DMS) and durable medical equipment (DME) providers to use modifiers with not otherwise classified (NOC) or not otherwise specified (NOS) codes.

Dual Treatment for Therapies

Dual treatment occurs when a member receives treatment from two or more providers of the same discipline from the same or different agencies or organizations.

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

Audiologists, Individual Medical Supply Providers, Medical Equipment Vendors, Occupational Therapists, Pharmacies, Pharmacists, Physical Therapists, Speech and Hearing Clinics, Speech-Language Pathologists, Therapy Groups, HMOs and Other Managed Care Programs

QUICK LINKS

- [Prior Authorization Process Improvements](#) page
- [DME and DMS Indices](#)
- [Modifiers topics #1735 and #2021](#)
- [Dual Treatment topic #2726](#)

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



Each provider has their own separate plan of care to address unique medical needs of the member.

Dual treatment is distinct from care collaboration, which occurs across multiple service areas and is documented on the Prior Authorization/Therapy Attachment (PA/TA), [F-11008 \(12/2025\)](#). Dual treatment occurs within one service area.

The ForwardHealth Portal (the Portal) will now process dual treatment differently for PA requests for these therapy treatments:

- Physical therapy (Process type 111)
- Occupational therapy (Process type 112)
- Speech and language therapy (Process type 113)

ForwardHealth requires each provider to submit a separate PA request for dual treatment of a member.

Previously, if two providers submitted separate PA requests, the first request would be processed. To approve the second request, ForwardHealth had required documentation of the dual treatment's medical necessity. If dual treatment wasn't supported, the second request would be denied as a duplicate.

Now, providers will receive a message through the Portal asking if they are providing dual treatment. If they aren't, the second request is considered a duplicate PA and will be denied.

Disposable Medical Supplies and Durable Medical Equipment PA Modifiers

When requesting PA for DMS or DME, providers must use modifiers with NOC/NOS codes to distinguish separate services. These NOC/NOS codes are required to separate distinct services on PA requests.

If the relevant modifiers aren't included on DMS and DME requests, ForwardHealth will deny the PA request.

Providers can find modifiers for NOC/NOS codes in the [DMS and DME Indices](#), as well as ForwardHealth Online Handbook Modifiers topic [#2021](#) for DMS and Modifiers topic [#1735](#) for DME.

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Documentation Retention

As a reminder, providers 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.

Information Regarding Managed Care Organizations

This Update applies to therapy and DME or DMS 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.

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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 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/.