ForwardHealth has developed this FAQs document to capture questions about the process of submitting amendments to current, active prior authorization (PA) requests and to share answers.

This document will be revised when new information is available.

[**General Questions**](#GeneralQuestions)

[**End-Dating Questions**](#EndDatingQuestions)

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[**Amending PA Requests and Requesting Additional Services Questions**](#AmendingPARequests)

**General Questions**

**Question: How can I amend a denied PA request?**

**Answer:** You cannot amend:

* A denied PA request.
* A denied line item on a PA request.

A new PA must be submitted with the necessary documentation to be considered.

For more information on PA requests, refer to the Prior Authorization [section](https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=1&sa=15) of the ForwardHealth Online Handbook or the Prior Authorization drop-down menu of the [Trainings](https://www.forwardhealth.wi.gov/WIPortal/cms/page/trainings/home) page of the ForwardHealth Portal (the Portal). The Online Handbook contains information about everything you need to know about PA as a provider, and the PA trainings will walk you through the process of requesting PA.

**Question: What form do I need to submit when requesting an amendment?**

**Answer:** Providers can submit an amendment request with a Prior Authorization Amendment Request form, F-11042 (07/2012), via the Portal for PA requests with a status of “Approved” or “Approved with Modifications,” or they can submit this form via mail or fax. Providers must submit paper amendment requests using this form if sending via mail or fax; no other paper amendment request will be accepted. This form can be found on the [Forms](https://www.forwardhealth.wi.gov/WIPortal/Subsystem/Publications/ForwardHealthCommunications.aspx?panel=Forms) page of the Portal.

**Question: What should I submit an amendment request for?**

**Answer:** Submit amendment requests to:

* Temporarily modify a member's frequency of a service when there is a short-term change in their medical condition.
* Change the rendering provider information when the billing provider remains the same if no units have been claimed on the approved service(s) yet. If the approved services are part of long-term, multi-visit dental treatment (for example, orthodontic treatment requiring 25+ units of D8670), ForwardHealth recommends that the provider end date the original PA request and submit a new PA request with the new rendering provider.
* Add or change a procedure code to the approved service(s).
* Extend the end date if the services need more time to complete. (Note: ForwardHealth will consider a six-month maximum extension to the end date.)

**Question: What is the best way to submit a PA amendment request?**

**Answer:** The fastest way to receive a response is to submit a PA amendment request through the Portal. Most requests submitted through the Portal are processed within one to three days.

**End-Dating Questions**

**Question: When do I need to end date a PA?**

**Answer:** A PA should be end-dated in these situations:

* There is an interruption in a member's continual care services.
* There is a change in a member's condition that warrants a long-term change in the services required.
* The service(s) is no longer medically necessary.
* A member chooses to discontinue receiving prior authorized services with the original, rendering provider.
* A provider chooses to discontinue delivering prior authorized services.

**Question: How do I end date a PA?**

**Answer:** To request an end date to a PA, the Prior Authorization Amendment Request form can be submitted via the Portal, mail, or fax.

* The end date must be at least one day later than the start date.
* Only services that have been approved via PA can be end-dated.
* When you request an end date, the specific date must be included in Element 9 (Requested End Date) of the form, otherwise it will be returned for corrections.

**Rendering Provider Questions**

**Question: When do I need to change a rendering provider?**

**Answer**: The rendering provider should be changed if a different provider will be providing the approved service than who was listed as the rendering provider on the original PA.

**Note:** The new rendering provider’s National Provider Identifier (NPI) must be included on the form. This can only be done if there are no claims paid on the active, approved PA.

If claims have already been paid, there are two options.

1. If the billing provider remains the same, the rendering provider does not need to be updated.
2. If the approved services are part of long-term, multi-visit dental treatment (for example, orthodontic treatment requiring 25+ units of D8670), ForwardHealth recommends that the original PA request is [end-dated](https://www.forwardhealth.wi.gov/WIPortal/Subsystem/KW/Display.aspx?ia=1&p=1&sa=15&s=3&c=16&nt=Enddating), and a new PA request is submitted with the new rendering provider.

**Question:** **How can I change the rendering provider on an approved PA?**

**Answer:** If the PA has no claims, a rendering provider can be changed by submitting a completed Prior Authorization Amendment Request form via the Portal, mail, or fax.

**Amending PA Requests and Requesting Additional Services Questions**

**Question: What is the process to amend an approved PA to change the number of teeth requiring scaling and root planing in a quadrant?**

**Answer:** To amend an approved PA to change the number of teeth requiring scaling and root planing in a quadrant, submit a Prior Authorization Amendment Request form via the Portal, mail, or fax.

**Question: How can I request additional units for an approved procedure?**

**Answer:** Additional units can be submitted on a Prior Authorization Amendment Request form for an approved procedure that is submitted via the Portal, mail, or fax.

**Question: What should I do if I need to add an additional service that requires PA as part of an active, approved PA?**

**Answer:** To request PA for additional services on an active, approved PA, you can submit them on a Prior Authorization Amendment Request form via the Portal, mail, or fax. The adjudicator may request a new PA be submitted for the additional line item to be added.

**Question: I want to change the procedure code on an approved PA, what do I need to do?**

**Answer:** To change the procedure code on an approved PA via a Prior Authorization Amendment Request, all required documentation for that new procedure code must be submitted along with the request. The modification of this procedure code will be decided by the adjudicator, and this request is not an automatic approval to a previously approved PA.

**Question: I already received approval to make a partial denture, but my patient has lost another tooth. How can I update my request?**

**Answer:** If a member loses a tooth before the final partial denture has been delivered and claimed, a provider can submit an amendment to the approved PA to add the tooth to that partial. Providers are advised to add this request in the notes section of the amendment request.